



**REQUEST FOR PROPOSAL (RFP)
AUTOMATED PATIENT RECORD REVIEW SOFTWARE
RFP # 0138**

ISSUED: February 17, 2025

RESPONSES DUE: March 28, 2025

**LIFEPATH SYSTEMS
1515 HERITAGE DR.
MCKINNEY, TX 75069**

For RFP Questions:

Anansa Prince

Director of Compliance & Risk

Procurement_inquiries@lifepathsystems.org



INVITATION

Background Information

Collin County Mental Health Mental Retardation Center d/b/a LifePath Systems (the “Center”) was founded in 1986. It is a community center created under Texas Health & Safety Code Chapter 534 and as such is:

- 1) an agency of the state, a governmental unit, and a unit of local government, as defined by Chapters 101 and 102 of the Texas Civil and Practice Remedies Code;
- 2) a local government, as defined by Section 791.003 of the Texas Government Code;
- 3) a local government for the purposes of Chapter 2259 of the Texas Government Code; and
- 4) a political subdivision for the purposes of Chapter 172 of the Texas Local Government Code.

The Center the Local Behavioral Health Authority (LBHA) and the Local Intellectual and Developmental Disabilities Authority (LIDDA) for Collin County, Texas as authorized by the Texas Health and Human Services Commission (HHSC). In addition to its role as Authority, the Center is a provider of behavioral health services and a provider of services for individuals with intellectual or developmental disabilities.

Throughout this RFP, reference to “Center” is assumed to define and include LifePath Systems. Reference to the “vendor” is assumed to include the vendor and any other vendors and/or personnel with which the vendor has elected to partner for purposes of this RFP.

The Center is seeking a solution to automate patient record review activities to include tracking, identifying, analyzing, and trending information in the Center’s electronic health record. Vendors wishing to submit proposals can submit a letter of intent identifying the name, address, phone, fax number and email address of the person who will serve as the key contact for all correspondence regarding this RFP. It is the Vendors responsibility to monitor the Center’s website to view answers to submitted questions and for any addenda issued for the RFP. A copy of the Request for Proposal (RFP) may be obtained from the Center’s website at <https://www.lifepathsystems.org/connect-with-us/contracting-opportunities/> or by contacting Anansa Prince, Director of Compliance & Risk, procurement_inquiries@lifepathsystems.org .

The Center is subject to and complies with the Texas Public Information Act, Chapter 552 of the Texas Government Code therefore following Contract award, the contents of all proposals may be made available upon written request. Therefore, any information contained in the proposal that is deemed to be proprietary in nature must clearly be so designated in the proposal. Such information may still be subject to disclosure under the Public Information Act depending on opinions from the Attorney General’s office.

APPEALS and/or PROTEST. Any Respondents wishing to protest or appeal the selection process must do so within 7 days of the proposal award. Protest or appeals must clearly state with specificity the grounds upon which the award selection is being challenged. Send via certified mail to:

LifePath Systems
Attn: Anansa Prince
1515 Heritage Drive
McKinney, TX 75069

Anansa Prince
Director of Compliance & Risk
procurement_inquiries@lifepathsystems.org



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SCOPE OF SERVICES

Scope of Services

The Center is seeking a solution to automate patient record review activities to include tracking, identifying, analyzing, and trending information in the Center's electronic health record as outlined in the sections below.

Summary of Desired Services

The Center's total patient record count per month averages 5440, with an average patient monthly encounter count of 17,433. The Center's review will be conducted to align with contractual compliance, claims administration, and compliance with third party administrative reporting requirements for prescribers, therapists, peer support specialist, case managers, service coordinators, speech therapists, occupational therapists, physical therapist, licensed chemical dependency counselors and licensed professional counselors.

The review will likely encompass a diverse range of service areas, potentially including different client populations, case complexities, or specific program initiatives. All the reviewed documentation will be found within the organization's electronic health record system, allowing for easy access and analysis. Some documents will utilize a pre-designed structure with specific formatting guidelines that must be followed when creating the document, ensuring consistency and clarity across all versions. Any documents under review must adhere to the specific guidelines, rules, and regulations outlined in the Texas Administrative Code (TAC) and the regulations set by the Texas Health and Human Services Commission (HHSC). This requirement ensures that all information presented in the documentation is legally compliant and accurately reflects the current regulations set by the Texas state agencies.

A. Systems Functionality

The Center will consider both, on and off premise data storage as long as the data remains in the United States. The application should be accessible via web and supported 24/7 from the Center's network and remote locations. System functionality should include but not be limited to:

- i. Patient Chart Audits Functionality:
 - Connect seamlessly with the Center's electronic health record.
 - Customize review criteria to align with specific procedure codes, service types, payor types, and program requirements.
 - Provide immediate results for patient notes that both meet the acceptable threshold of criteria and do not meet the acceptable threshold of documentation criteria.
 - Ability to run default queries or create ad hoc queries on predefined categories.
 - Ability to develop and manage workflow queues. User friendly graphical interface that can assign, prioritize, monitor workflows, and generate emails regarding deficient and exemplary notes to service providers.
 - Generate on-demand summary and detailed reports that identify trends by provider, programs, payors, etc., and target positive feedback or training/coaching.
 - Comply with applicable laws and regulations related to security of protected health information.
 - Electronic record storage for 7 years related to any stored PHI along with the ability to delete said data following the 7-year retention requirement.
- ii. Independent Risk Assessment Platform
 - Predicting Risk Patterns
 - Conducting in depth reviews
 - Gaining understanding of risk across multiple platforms and imbed appropriate controls to mitigate risk.

B. System Requirements

- Cloud hosted, single source and fully integrated database.

- Customizable single report writer for all aspect of the system
- Ability to import/export reports using Microsoft excel.
- Option for 100% paperless processing
- Dedicated project management implementation team that will support all needs of the Center.
- Multi-factor authentication and SSO compatible with Microsoft Entra (Azure)
- All data stored must reside in a datacenter within the United States.
- All data must be encrypted in transit and at rest.

C. Maintenance Agreement/System Upgrades

- Proposal must specify the process involved in system upgrades as well as frequency of major release, updates, service packs, legislative updates, product life cycle and end-of-life production/
- Cost of system software version upgrades must be included in the master agreement.
- Training must be provided during the initial project implementation phase.
- Training materials and release notes must be provided for updates/upgrades.
- Configuration customization must be available. Potential costs must be outlined. This may include but is not limited to custom reports, custom input fields, interface etc.

D. Service and Technical Support

Service support must allow unlimited and immediate access to 24/7 support. A phone number, web portal and email addresses for all support needs should be provided by the vendor. A support manager contact should be provided with defined SLAs with monetary penalties for failure to meet requirement within the defined SLA terms.

TERM

As you evaluate your approach to provide services, you are encouraged to recommend contract options and address the relative advantages and disadvantages of your recommendations. Contract duration must allow early termination without penalties to the Center in the event the Texas Health and Human Services Commission terminates revenue contracts to the Center. The contract can also be terminated for cause.

Fee

The following is a guide for splitting the fee into sections that clearly identify the acquisition/start-up costs versus ongoing solution fees. Although it is not intended to be absolute, significant deviations should be closely reviewed.

A. Fee Matrix

Having examined specifications and requirements of this RFP (including any attachments and published answers to questions), the undersigned proposes to furnish work upon the pricing terms quoted below:

Deliverable Description	Costs	Comments
Software License or Subscription		
Software Maintenance/Support (specify pricing/coverage levels offered)		
Implementation Services		
Training & Materials		
Third Party Software		
Third Party Software Support		
Total Year 1 Price		

B. Maintenance Fees

Responses must clearly articulate the anticipated LifePath Systems internal resources necessary for a successful project. Responses must distinguish between implementation and ongoing support after implementation.

Description	Estimated Costs	Comments
Year 1 – Maintenance & Subscription Fees		
Year 2 – Maintenance & Subscription Fees		
Year 3 – Maintenance & Subscription Fees		

SUBMITTAL SCHEDULE

Task	Date
RFP Issued	February 17, 2025
Deadline for Questions	March 5, 2025
Questions answered via addenda	March 12, 2025
RFP Submittal Deadline	March 28, 2025
Proposal Review	April 7, 2025
Evaluation Team FINAL RECOMMENDATION to Programs and Communications Committee	April 14, 2025
Tentative Services Start Date	April 28, 2025



PROPOSAL DEADLINE

Request for proposal packets may be obtained on the Center’s website, <https://www.lifepathsystems.org/connect-with-us/contracting-opportunities/>. Responses to the Request for Proposal (RFP) must be received by the Center by 5:00 pm CDT 03/28/2025. If you are submitting an electronic copy via email, your attachment must include the RFP number, your company name, and the date it was sent. If you mail your proposal, it must be postmarked prior to the submission deadline.

PROPOSAL INSTRUCTIONS AND FORMAT

Vendors shall pay particular attention to all **INSTRUCTIONS, REQUIREMENTS, ATTACHMENTS and DEADLINES** indicated in the attached Proposal and should govern themselves accordingly.

The Center reserves the right to reject any and all proposals, to waive formalities and reasonable irregularities in submitted documents, and to waive any requirements in order to take the action, which it deems to be in the best interest of the Center and is not obligated to accept the lowest Proposal. This RFP does not obligate the Center to pay for any costs incurred by respondents in the preparation and submission of a proposal. Furthermore, the RFP does not obligate the Center to accept or contract for any expressed or implied services. Contract funding and length is contingent on HHSC funding.

The Center will only release names of the Vendors that have responded to this solicitation after the Center’s Evaluation Team has evaluated the Proposals and an award has been made and approved by the Center’s Board of Trustees.

The Center appreciates your time and effort in preparing this proposal. All proposals must be received at the specified location identified in RFP # 0138 before opening date and time. The official time shall be determined by the time/date stamp when received at location. Proposals received after above date and time shall be returned unopened.

All required documentation must be submitted with the proposal. The Vendor is cautioned to read the entire RFP to determine all requirements. LifePath Systems RESERVES THE RIGHT TO REJECT A PROPOSAL WHICH DOES NOT CONTAIN ALL INFORMATION REQUIRED BY THE RFP.

1. All Proposals must be submitted in accordance with the following no later than March 28, 2025, at 5:00p.m.

Mail
LifePath Systems
Attn: Anansa Prince
REQUEST FOR PROPOSAL RFP # 0138
Automated Patient Record Review Software **OR**
1515 Heritage Drive
McKinney, TX 75069
DO NOT OPEN IN MAILROOM

Email:Procurement_inquiries@lifepathsystems.org
LifePath Systems
Attn: Anansa Prince
REQUEST FOR PROPOSAL RFP # 0138
Automated Patient Record Review Software
1515 Heritage Drive
McKinney, TX 75069

Proposals will not be opened until after the deadline.

2. Late Proposal or modifications - Proposal and modifications received after the time set for submission will not be considered.
3. **If submitting via Mail:** Number of Copies - To achieve a uniform review process and to obtain a maximum degree of comparability, LifePath Systems requires that Proposals be submitted with one (1) master (marked original) and one (1) copy. Each must include the following items:

- a. Title Page - Title page must show the RFP subject; the Vendor's name; the name address, and telephone number of a contact person; and the date of the proposal.
- b. Transmittal Letter - Submit a signed letter briefly addressing the Vendor's understanding of the work to be done, the commitment to do the work detailed within this RFP and a statement explaining why the Vendor believes itself to be best qualified to do the required work.
 - i. Vendor Representative - Include the name of the designated individual(s), along with respective telephone number(s), email address(es), who will be responsible for answering technical and contractual questions with respect to the proposal.
- c. Vendor Application - must be filled out in its entirety.
Response format as follows: State the question or item exactly as appears; then provide your detailed response.
- d. Questions fall under the following sections:
 - I. Business Demographics
 - II. Services
 - III. Cost Proposal
 - IV. Implementation Plan
 - V. Client Reference
- e. All application response attachments must be labeled to reference the appropriate section and letter (i.e., "VI. a.")

4. A STATEMENT CONFIRMING THAT YOU HAVE READ, UNDERSTAND, AND AGREE TO THE GENERAL AFFIRMATIONS LOCATED AT:
<https://www.lifepathsystems.org/wp-content/uploads/2021/05/General-Affirmations.pdf>

The selected vendor will be required to adhere to all Texas contract and confidentiality requirements.

Your response may also contain any narrative, charts, tables, diagrams, or other materials in addition to those called herein; to the extent such additions are useful for clarity or completeness of the response. Attachments should clearly indicate on each page the paragraph in the RFP to which they pertain. The Center will not be liable for any errors in your proposals.

No modifications to your proposal will be accepted except during negotiations initiated by the Center.

Any verbal communication will be considered unofficial and non-binding regarding this RFP and subsequent award.

Each respondent submitting a Proposal in response to this RFP acknowledges and agrees that the preparation of all materials for submittal to the Center and all presentation, related costs, and travel expenses are the respondents' sole expense as the Center shall not, under any circumstances, be responsible for any cost or expense by the respondent.

The Center shall be allowed to keep all materials submitted by the respondents regarding this RFP. Each respondent agrees to hold the Center harmless against any expenses, damages, and claims arising from or connected with your proposal, including patent, trademarks, copyright, or other intellectual property infringement or misappropriation.

Any media request of the respondents shall be concurrently directed to the Center during the receipt, analysis, selection, and subsequent contract negotiation until said contract is signed and delivered by the Center.



The Center reserves the right to accept or reject any or all proposals, to alter the selection process in any way, to postpone the selection process for either party's own convenience at any time, and to waive any defects in proposals submitted. The Center reserves the right to issue addenda to this RFP at any time due to the need for clarification, change in schedule, or other reasons the parties so decide. The Center reserves the right to accept or reject any individual sub-consultants that the successful respondent proposes to use.

Your proposal constitutes an offer that remains open and irrevocable for a period of no less than 90 days unless your proposal states otherwise. Proposals after the award are public documents.

APPLICATION

I. Business Demographic

Organization Name: _____

Organization dba Name (if applicable): _____

Federal Tax ID Number: _____

Business Address: _____

Contact/Title: _____

Email Address: _____

Physical Address: _____

Phone/Fax: _____

Executive Director – Owner/Title: _____

Email Address: _____

Physical Address: _____

Phone/Fax: _____

Billing Contact/Title: _____

Email Address: _____

Physical Address: _____

Phone/Fax: _____

Other Owners/Partners – Name/% Ownership/If corporate, list organization:

1. _____

2. _____

3. _____

4. _____

Type of Organization (i.e., Non-Profit Corporation, Limited Liability, General Partnership, etc.):

Years in operation: _____

Hours of operations: _____

Certification Number if a Historically Underutilized Business (HUB): _____

Qualifications if HUB eligible, but not certified: _____

List all licenses, credentials, certifications, and/or accreditations currently held by organization: (provide copies if applicable)

II. Services

a. Describe Respondent’s company history, evidencing its strengths and stability, including number of years in business, licensing information (if applicable), number of years providing the type of proposed service, existing customer satisfaction data, number of customers in Texas and areas covered in Texas.

b. Describe Respondent’s experience relevant to the Scope of Services requested by this RFP.

i. List and describe relevant projects of similar size and scope performed over the past four years.

- c. Describe Respondent's specific experience with clients, especially large organizations with multiple locations.
 - i. If Respondent has provided services for the Center in the past, identify the name of the contract and service provided.
- d. List other resources that will be made available to the Center.
- e. Please feel free to include any additional skills, experiences, qualifications, and/or other relevant information about the Respondent's qualifications.
- f. List all licenses, credentials, certifications, and/or accreditations the Respondent currently holds.

III. Cost Proposal

- a. Describe your proposal fee structure.

IV. Implementation Plan

- a. Provide a description of Vendor's understanding of the project and scope of services.
 - i. Discuss methodologies used and/or approaches taken to providing the services as outlined. Indicate features, skills, and/or services which distinguish the Vendor and make it the better choice for the Center.
 - ii. Indicate how the Vendor's resources will be allocated for this project (e.g., number and type of personnel allocated by hours).
- b. Describe Vendor's experience utilizing electronic medical record platforms.
- c. Describe Vendor's connectivity capabilities (type, bandwidth, high-definition resolution, etc.).
- d. Describe Vendor's business continuity and disaster recovery capabilities and back up procedures.
- e. Describe how protected health information is stored.
- f. Describe Vendor's customer and technical support. Is this support available 24-hours per day, 365 days per year. If not, please provide hours of support services availability.
 - i. What is the response time for support services?
- g. Provide an explanation of Vendor's process and frequency of license verification, background checks, review of complaints/suspension/revocations.
- h. Provide a timeline for implementation.
- i. Please advise what costs may arise for the development of customized scripts or widgets.

V. Client References

Provide a minimum of three client references. For each client listed, include the following:

- a. Agency name and address;
- b. Name or Point of Contact (POC);
- c. POC email address and telephone number;
- d. Dates of services provided to client;
- e. Type of services provided to client.



SELECTION CRITERIA

The selection and approval of the Vendor will be made in accordance with the Center's competitive bidding and selection process. An evaluation committee will evaluate proposals based on the guidelines set forth in this RFP and will present its findings to the Center's Management. LifePath Systems reserves the right to request additional information and clarification of any information submitted, including any omission from the original proposal. All proposals will be treated equally regarding this item.

LifePath Systems intends to solicit, evaluate, and negotiate proposed terms from qualified Vendors to determine which proposal will serve the best interests of the organization by providing the best value¹. Once it is determined that a proposal meets the requirements, the LifePath Systems evaluation team will score each proposal. In determining best value for the organization, LifePath Systems will consider:

1. Cost Proposal.
2. The reputation of the Vendor and of the Vendor's services.
3. The quality of the Vendor's services.
4. The extent to which the services meet the Center's needs.
5. The Vendor's past relationship with the Center.
6. The total long-term cost to the Center to acquire the Vendor's services; and any relevant criteria specifically listed in the request for proposals.

¹ Texas Local Government Code §252.043(a)(b) Award of Contract



ASSURANCES, CERTIFICATIONS, EXHIBITS, AND ATTACHMENTS

Vendor must submit the Assurance and Certifications and all Attachments requested, to include:

1. Vendor will submit a copy of their standard contract, along with proposal. Label this (Attachment A)
2. Signature Page (Attachment B)
3. Resident/Non-Resident Certification (Attachment C)
4. Assurances Document (Attachment D)
5. Conflict of Interest Questionnaire (Attachment E)
6. Form W-9 (Attachment F)
7. Lobbying Certification (Attachment G)
8. Deviation Form (Attachment H)
9. Questions or Inquires: All questions must be submitted electronically no later than 5:00 pm CDT on 03/05/2025.

LifePath Systems

Anansa Prince

Email: procurement_inquiries@lifepathsystems.org

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the LifePath Systems Behavioral Health Division**



**ATTACHMENT B
SIGNATURE PAGE**

The attached proposal application is being submitted in response to the **AUTOMATED PATIENT RECORD REVIEW SOFTWARE #0138**. The proposal is a firm offer and shall remain an open offer, valid ninety (90) days from the date of this document.

LifePath Systems in its sole and absolute discretion shall have the right to award contracts for any or all materials listed in each proposal, shall have the right to reject all proposals and shall not be bound to accept the lowest proposal and shall be allowed to accept the total proposal of any one vendor. I understand that this proposal will be reviewed and evaluated according to the procedures indicated in this RFP.

Authorized Signature

Company Name

Typed or Printed Name

Street Address

Title

City, State, Zip Code

Date

Fax Number

Email

ATTACHMENT C
RESIDENT/NON- RESIDENT CERTIFICATION

Contractor must answer the following questions in accordance with the **Texas Government Code §2252.002**, as amended:

1. Is the Contractor that is making and submitting this bid a “resident Applicant” or a “non-resident Applicant”?

Answer: _____ Resident Applicant _____ Non-resident Applicant

A Texas Resident Contractor is a Contractor whose principal place of business is in Texas and includes a Contractor whose ultimate parent company or majority owner has its principal place of business in Texas.

2. If the Contractor is a “Non-resident Contractor”, does the state in which the Nonresident Contractor’s principal place of business is located have a law requiring a Nonresident Contractor of that state to bid a certain amount or percentage under the bid of a Resident Contractor of that state in order for the nonresident Contractor of that state to be awarded a contract on his bid in such state?

Answer: _____ Yes _____ No _____ Which state? ____

3. If the answer to Question B is “yes,” then what amount, or percentage must a Texas Resident Contractor bid under the bid price of a Resident Contractor of that state to be awarded a contract on such bid in said state?

Answer: _____

ATTACHMENT D ASSURANCES DOCUMENT

The Vendor assures the following:

1. All addenda and attachments to the RFP as distributed by the Local Authority and designated by the checklist have been received.
2. No attempt has been or will be made by the Vendor to induce any person or Vendor to submit or not to submit a Proposal, unless so described in its Proposal.
3. The Vendor does not discriminate in its services or employment practices based on race, color, genetic information, religion, sex, national origin, disability, veteran status, or age.
4. All cost and pricing information is reflected in the RFP response documents or attachments.
5. The Vendor accepts the terms, conditions, criteria, and requirements set forth in the RFP.
6. The Vendor accepts the Center's right to cancel the RFP at any time prior to Contract award.
7. The Vendor accepts the Local Authority's right to alter the timetables for procurement that are set forth in the RFP.
8. The Proposal submitted by the Vendor has been arrived at independently without consultation, communication, or agreement for the purpose of restricting competition.
9. Unless otherwise required by law, the information in the Proposal submitted by the Vendor has not been knowingly disclosed by the Vendor to any other Vendor prior to the notice of intent to award.
10. No claim will be made for payment to cover costs incurred in the preparation of the submission of the Proposal or any other associated costs.
11. Local Authority has the right to complete background checks and verify information.
12. The individual(s) signing this document and any Contract awarded to Vendor is authorized to legally bind the Vendor.
13. No employee of the Local Authority and no member of the Local Authority's Board will directly or indirectly receive any pecuniary interest from an award of the proposed Contract to Vendor. If the Vendor is unable to make the affirmation, then the Vendor must disclose any knowledge of such interests.
14. The Vendor is not currently held in abeyance or barred from the award of a federal or state contract.
15. The Vendor is not currently delinquent in its payments of any franchise tax or state tax owed to the state of Texas, pursuant to Texas Business Corporation Act, Texas Civil Statutes) Article 2.45.
16. The Vendor shall disclose whether any of the directors or personnel of Vendor has either been an employee or a trustee of the Local Authority within the past two (2) years preceding the date of submission of the Proposal. If such employment has existed, or at term of office served, the Proposal shall state in an attached writing the nature and time of the affiliations as defined.



17. The Vendor shall identify in the attached writing any trustee or employee of Local Authority who has a financial interest in the Vendor or who is related within the second degree by consanguinity or affinity to a person having such financial interest. Such disclosure shall include a complete statement of the nature of such financial interest and the relationship, if applicable.
18. No former employee or officer of the Local Authority directly or indirectly aided or attempted to aid in procurement of Vendor's service.
19. The Vendor shall disclose in an attached writing the name of every Local Authority employee and/or member of Local Authority's board with whom the Vendor is doing business or has done business during the 365-day period immediately prior to the date on which the Proposal is due. Failure to include such a disclosure will be a binding representation by Vendor that the natural person executing the Proposal has no knowledge of any key persons with whom the Vendor is doing business or has done business during the 365-day period prior to the immediate date on which the Proposal is due.
20. Under Section 231.006, Family Code, the Vendor, or applicant certifies that the individual or business entity named in this contract, bid, or application is not ineligible to receive the specified grant, loan, or payment and acknowledges that this contract may be terminated, and payment may be withheld if this certification is inaccurate. For purposes of the foregoing sentence, "Vendor or applicant" shall mean Vendor; contract, bid or application shall mean the Proposal; and "this contract" shall mean any Contract awarded to the Successful Vendor(s).

Authorized Signature

Company Name

Typed or Printed Name

Title

Date

Email



ATTACHMENT E CONFLICT OF INTEREST QUESTIONNAIRE

Please retrieve CIQ Form from the following website:

<https://www.ethics.state.tx.us/data/forms/conflict/CIQ.pdf>

(Attach completed CIQ Form as part of your proposal)

A signature is required in Box 7 regardless of any other entry on the form.

For the purposes of this Attachment E, the term "Local government officer" means a member of LifePath Systems' Board of Trustees, Chief Executive Officers, and/or an agent of LifePath Systems who exercises discretion in the planning, recommending, selecting, or contracting **(See Attachment K)**.

ATTACHMENT F FORM W-9

REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION
Vendors are to complete a W-9 Form and submit with Proposal Documents.

<http://www.irs.gov/pub/irs-pdf/fw9.pdf>



ATTACHMENT G LOBBYING CERTIFICATION

The undersigned certifies, to the best of his or her knowledge and belief that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress an officer or employee of Congress or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of the fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Authorized Signature

Company Name

Typed or Printed Name

Title

Telephone Number

Email



ATTACHMENT H DEVIATION FORM

All deviations to this RFP must be noted on this sheet. In the absence of any entry on this Deviation Form, the prospective Vendor assures LifePath Systems of their full agreement and compliance with the Specifications and Terms and Conditions.

Each response to this RFP shall contain a Deviation Form, which states the prospective Vendor's commitment to the provisions of the RFP. An individual authorized to execute contracts must sign the Deviation Form. Any exceptions taken to the terms and conditions identified in this Proposal must be expressly stated in the Deviation Form. Use an additional copy or page if needed.

THIS DEVIATION FORM MUST BE SIGNED AND SUBMITTED WITH THE RFP BY EACH PROSPECTIVE VENDOR/CONTRACTOR WHETHER THERE ARE DEVIATIONS LISTED OR NOT. IF NO DEVIATIONS, NOTE: NONE

Reference Specifications, Terms and Conditions and Page Number	Deviation

Authorized Signature

Company Name

Typed or Printed Name

Title

Telephone Number

Email



ATTACHMENT I
LIFEPATH SYSTEMS KEY PERSONS LIST

NAME	TITLE	BUSINESS ADDRESS	BUSINESS PHONE#
Tammy Mahan, MA, LPC-S	Chief Executive Officer	1515 Heritage Drive McKinney, TX 75069	972-562-0190
Pete Kabira	Chief Operating Officer	1515 Heritage Drive McKinney, TX 75069	972-562-0190
Jennifer Morgan	Chief Financial Officer	1515 Heritage Drive McKinney, TX 75069	972-562-0190
Brent Phillips-Broadrick	Chief Administrative Officer	1515 Heritage Drive McKinney, TX 75069	972-562-0190
Danielle Sneed	Deputy Clinical Officer	1515 Heritage Drive McKinney, TX 75069	972-422-5939
Jordan Planchon	Director of Quality Assurance	1515 Heritage Drive McKinney, TX 75069	972-562-0190
Linda Miller	Assistant Director of Quality Assurance	1515 Heritage Drive McKinney, TX 75069	972-422-5939
Anansa Prince	Director of Compliance and Risk	1515 Heritage Drive McKinney, TX 75069	972-422-5939



NOTICE "NOT TO PARTICIPATE" FORM

Dear Vendor:

Please check the appropriate box below, complete the remainder of this form and return it PRIOR to the scheduled due date and time on the Proposal.

- Our Company cannot provide the products, supplies and/or services listed in this request. Please MOVE our name and address to the following services so that we may submit bids/proposal at a later date:

Services:

- Our Company has chosen NOT to submit a Proposal at this time but would like to remain on your list for this Proposal category. We did not submit a Proposal because:

Reason:

- Please REMOVE our Company name from all LifePath Systems lists until further notice.

Company Name: _____

Representative: _____ Title: _____

Address: _____ Phone: _____

Email: _____ Other: _____



Authorized Signature: _____

Title: _____ Date: _____

VENDORS WHO RESPOND TO THIS INVITATION WITH A COMPLETED PROPOSAL FORM WILL REMAIN ON OUR MAILING LIST. VENDORS MAKING NO RESPONSE MAY BE REMOVED FROM THE MAILING LIST.

PLEASE RETURN THIS FORM ONLY TO:

LifePath Systems
Attn: Anansa Prince
1515 Heritage Drive
McKinney, TX 75069

Notice "Not to Participate" RFP 0138 AUTOMATED PATIENT RECORD REVIEW SOFTWARE