



Purchasing Services

TO: All Bidders **DATE:** November 4, 2009
Revenue Cycle Information System
for UBHC
RFP #P10-002

FROM: Edwing Canaca **SUBJECT:** Addendum #2
Sr. Buyer

Bid Due Date: **Bid opening date has been scheduled for November 19, 2009 at 2:00 P.M.**

ADDENDUM #2

The following constitutes Addendum #1 to the above referenced solicitation. This addendum includes the following parts:

Part 1: Answers to questions asked by prospective bidders.

Part 2: Additions, deletions, clarifications and modifications to the RFP. **NOTE: Major revisions are included, please review carefully.**

It is the bidder's responsibility to ensure that all changes are incorporated into the original RFP.

All other instructions, terms and conditions of the RFP shall remain the same.

ADDENDUM # 2 INTRODUCTION

This addendum is intended to answer final questions that were asked at the pre-bid conference and to provide any major revisions.

PART 1 **Answers to Questions**

Each question is referenced by the appropriate RFP page number(s) and section where applicable.

#	Page #	RFP Section Reference	Question	Answer
1	2	1.0 Information for Bidders	<u>Background</u> Please describe UBHC IT platform and networking environment. Please describe the departments and respective staffing levels that will be using the system.	IT Platform will consist of a multi-server, blade configuration. It will be configured for high availability as well as automated redundant failover. Failover may be accomplished by virtualization software. The networking environment consists of different types of links to the various locations, depending on the size of the location there are 100mg byte, gigabyte, T1 connections. Depending on location staff consists of doctors, clinicians, nurses, office staff.
2	11	3.0-Scope of Work	SCOPE OF WORK Please identify enterprise, satellite, and affiliate locations and their relationships to UBHC.	UBHC as an enterprise system includes a variety of sites/locations (referred to in the RFP as “satellites”). “Designated affiliates” are other behavioral health care entities with which UBHC may enter into contract as an ASP, permitting them to use the revenue cycle software. Each designated affiliate will have secured use of the revenue cycle software.
3	Page 11	3.0: Scope of Work	States UBHC is moving towards VistA for an EHR. Bidders for the EHR have not heard back yet. Does this mean that a decision has been made?	The award decision regarding the EHR is pending.
4	Page 11	3.0	What is meant by affiliates/entities you wish to permit use of the Revenue Cycle Management Systems? Do all affiliates/entities operate under the same Tax ID number?	See # 2 No

5	Page 11	3.0: Scope of Work	<p>Can UBHC confirm that the following functions will be handled in the billing system? If we are missing any, we need to know for interface purposes. We need to know which system owns what data.</p> <ul style="list-style-type: none"> i. Pre-admit ii. Admit iii. Discharge iv. Financial information v. Appointment Scheduling vi. Bill generation vii. Remittance processing viii. Document Management (only financial docs?) ix. Billing related reporting x. Data Warehouse GL Interface 	<p>All of these functions shall be handled in the Revenue Cycle Software. Functions not specifically identified include direct charge entry, and census-based charge capture for Inpatient and Partial Hospital. The Financial information function contains many elements as identified in the document, including, but not limited to client insurance eligibility, charge master definition, payer fee schedules, contractual allowance and authorization tracking.</p>
6	Page 11	3.0: Scope of Work	<p>Please identify which vendors were called to demonstrate their EHR solutions for RFP #P09-122?</p>	<p>Not Applicable to this RFP</p>
7	12	3.1.1 General System Functionality	<p>Please describe intended workflow for scanned documents and captured barcode information to Vista and define the other ancillary systems/modules.</p>	<p>UBHC currently does not have a document management system and requires the bidder to provide a system. Refer to Section 3.1.1.2.</p>
8	12	3.1.1 General System Functionality	<p>Please confirm that the system audit trail relates only to tracking user activity within the system program.</p>	<p>3.1.1.8 - The RFP requires that the system audit trail collect information on a user's movements within the system, the clients they connect to and the options they enter. Further, the RFP requires user, date and time stamps on all system modifications so we can identify which users are making changes to the system. Responding to a question during the pre-bid conference – The RFP is not asking the audit system to track the physical location of the user at the point of entry. UBHC requires that provides the capacity to track how/when a user/service provider provides services across multiple programs.</p>

9	Page 12	3.1.1: General System Functionality	Does UBHC want all scanned documents stored in the document manager in the billing system or just billing documents?	See response to #7
10	Page 12	3.1.1.2	Do you currently have a Document Management System? If so, what Document Mgt. System do you use? Are you planning to continue using it in additions to a Document Management functionality included in the RCM?	See response to #7 See response to #7 See response to #7
11	Page 13	3.1.2: Interface with Ancillary Systems	Will UBHC continue to use its current Call Center or is it looking to replace that system?	UBHC will continue to use its current call center telephonic system (Symposium) but plans to update the data entry component, i.e. pre-registration information, as specified in qu: # 20, as part of the proposed bid.
12	Page 13	3.1.2	Can you provide a list of what specific systems you want us to interface with? Who are the vendors of those systems?	See table at end.
13	Page 13	3.1.1 General System Functionality	Seamless interface (Requirement) Please identify all ancillary systems to be included in the seamless system interface with VistA EHR.	See # 12
14	Page 13	3.1.2.1	Detail the capacity of the System to interface with other applications including, but not limited to: EMR's, Pharmacy, Laboratory, Documentation Management, Mobile Entry, E-Prescribing, Medication Reconciliation, Call Center and Housing software. What other application need interfacing into?	See # 12

15	Page 14	3.1.3: Security Issues	Does UBHC want a user to have to sign a sig pad every time it accesses an option for security purposes?	No, this shall be effected by configuring secure sign on
16	Page 16	3.1.4.5	How do you currently utilize DSM coding for billing?	The DSM code is gathered within the system for reporting to the State of NJ. The DSM code is converted to an ICD-9 code that is printed on the bill. The ICD-9 code is used by payers to confirm client eligibility for the services provided. The code is also used to determine appropriate payment based on the Medicare Inpatient Prospective Payment methodology.
17	Page 17	3.1.4.18	Do all electronic signatures go into your Clinical Systems?	Our current EMR and Financial system collect electronic signatures on all assessments (EMR) and financials/schedules/etc. (Revenue Cycle System) entered. This is performed by collecting user, date and time stamp information with each row of data entered. In the EMR this info is paired with credentialing info from the service provider. This RFP requires development of a system with the ability to collect electronic signatures, not only a time stamp of the user completing the document. This is different from digital signature, which would be similar to the kind employed in a common retail credit card transaction UBHC will prefer a system with the ability to collect digital signatures as well for client sign-off on registration documentation and treatment plans, as an example.
18	Page 18	3.1.4: System Controls	Does UBHC want all dictionaries to have effective dates?	Yes as applicable. UBHC prefers a system with the ability to include effective dates in dictionaries.
19	Page 18	3.1.5	What reporting tools do you currently use?	SAS, Crystal Reports, Access, SQL, Monarch (the data mining tool we use).
20	Page 19	3.1.6 Access Center	Please confirm that the Access Center will use the proposed system to register, schedule, and provide referrals to callers beginning or re-establishing services at UBHC.	Correct, UBHC will use the proposed system to capture all preadmission, registration and scheduling information.

21	Page 19	3.1.6	Do the external facilities and programs work directly in VistA or into the Document Management System?	The external facilities currently contract with to provide Access Center services and do not work directly in VistA. The proposed revenue cycle software shall capture all pre-registration information. However, the Access Center shall be able to track & retrieve data collected for their calls in Vista & the external facilities shall have the ability to view & retrieve that data.
22	Page 19	3.1.6.1	How do you currently track activity in your Access Center? Do you use an automated solution for this? Do you manually track this? What reporting tools do you currently use?	The Access Center tracks activity in proprietary software that was developed by University Behavioral HealthCare. The software allows the Access Center to work with each external facility to develop requirements for customized data entry and reports. This software also includes a scheduling system and a variety of other disposition options, which allows each organization to track the outcome of all calls. Nothing is tracked manually. Collected data is retrieved for reporting using a SQL server.
23	Page 21	3.1.8	What Scheduling system do you currently use?	NetSmart HSIS for scheduling is currently used once a client is registered and an internally developed product is used for the calls into the access center when the client is in preadmission status.
24	Page 23	3.1.9: Service Entry and Charge Capture	Is UBHC looking for an Order Entry and Pharmacy system (the RFP says UBHC want to track labs and pharmaceuticals)? If not, is that being addressed through the VistA system?	An Order Entry and Pharmacy system are not part of the requirements of this RFP. However, it is anticipated that UBHC will either use the VistA system or another vendor (e.g. McKesson) and the Revenue Cycle system will be required to interface with those systems.
25	Page 28	3.2: Technical Requirements	Does UBHC want all service details converted (detailed service info, payments, adjustments, transfers) instead of Balance Forward?	There will be no Balance Forward conversion or import of previous service activity. All services existing prior to implementation will be worked down from existing system.
26	Page 28	3.4 Software	Response time – the RFP states there are 500 users. Are these 500 users concurrent or ad-hoc and does this number need to be revised.	Revision to the # of concurrent users is 175 rather than 500 on the enterprise level. In an ASP model, we want to be able to add users as needed.

27	Page 29	3.5.2	How many months should the plan be based on?	Bidders are expected to submit a proposed cost effective, realistic implementation timeframe and work plan based on projects of similar size and scope.
28	Page 30	3.5:8 Implementation Services	Warranty: Please confirm that the One(1) year warranty does not include additional work or special projects as defined in; <u>4.16 Additional Work and/or Special Projects</u>	The warranty includes the system as proposed. If any additional work or special projects are authorized, they will include their own warranty provisions.
30	Page 30	3.6.1	It is normal practice for clients who request this to pay the annual fee. Is your organization willing to do this	Yes, however bidders are expected to include an estimated fee for the escrow service.
31	Page 30	3.6.5	We support interfaces and registration 7 by 24. Other modules are typically supported from 8 to 5. If you want all modules to be supported 7 by 24 is your organization willing to pay an up charge for support.	In their proposals, bidders are expected to provide a breakdown of the types of support provided 8-5 and the types of support provided 24/7. See modification section for new price sheet.
32	Page 31	3.6.7	Is there someone else in this document or the contract that would be executed that has some protection for the Vendor? Is your organization willing to entertain selected Terms and Conditions from our standard contract relating to Limits of Liability?	First question: UBHC will consider proposals which cap the contractor's liability at the total value of 8.1, 8.1.2, 8.2, and 8.2.1. See Modification section Second question: No.
33	Page 31	3.6 Support and Maintenance	Please describe the departmental staffing assigned to this project.	On the UMD-UBHC side, the project will be managed by a F/T Project Manager. The team will consist of the multidisciplinary staff representing all aspects of the revenue cycle and who were involved in the development of the RFP. IS staff will also play an integral role. The multidisciplinary staff will include representatives from Finance, Data Control, Patient Accounting, Registration, Access Center, among others as deemed necessary to complete the project.
34	Page 31	3.6.7	Who will the resources from UBHC be?	See answer to Question #34.

35	Page 33	4.6	Is your organization willing to entertain selected Terms and Conditions from our standard contract relating to this 4.6?	No.
36	Page 35	4.0 SPECIAL CONTRACTUAL TERMS AND CONDITIONS	Ownership of Material – In responding to UBHC’s RFP, where and how should the bidder identify pre-existing intellectual property and any modifications or adaptations that combined are the exclusive property of the bidder..	The bidder should include a separate section in its proposal in which such pre-existing material is identified. The bidder should identify the ownership of such material with sufficient clarity to protect its ownership interests.
37	Page 36	4.11	We typically require that client stay within two major releases and/or no further out than 24 months to adequately support them under the normal Support Fees. Would this be acceptable?	Section applies to <u>News</u> releases, not new releases of software by the vendor
38	Page 38	4.15: Form of Compensation and Payment	What does UBHC mean by populating of databases? Are you referring to conversion? Conversion would not occur until later in the implementation. Please clarify.	Population of database in this instance does not refer to data conversion. The databases being referred to are not client specific, but consist of all those dictionaries necessary for us to begin the testing and population of the system. i.e: service codes, DSM, ICD9, program names, etc. Data conversion will be handled separately.
39	Page 38	4.15.3	Do the Client and Vendor collectively define Acceptance Testing of the System?	Yes this will be developed collectively.
40	Page 38	4.15.4	Implementation Services Implementation fees are to be charged on a fixed-fee basis with a “cap not to exceed.” Those fees will be paid based on agreed-upon project milestones, with the majority of payment being made after first productive use of the System. Will the Vendor have participation in defining “agreed-upon milestones”? Implementation fees are to be inclusive of travel and living expenses. – This is not our standard. We typically bill travel and out-of-pocket per each trip. If we are to include this, assumptions need to be	The bidder is expected to use its proposed timeline and workplan, including the milestones therein, as the basis for preparing its implementation fee proposal. If the bidder prefers, UBHC will accept for review separate line items on which travel and expenses are listed. However, such lines must be presented as “Not to Exceed” items. See modification section of the addendum for new price sheet.

			made. Have you defined your timeline and duration you believe it will take to go live on the Patient Access and Revenue Cycle part of our overall solution? This would help to know your expectations to help us include Travel and living expenses in the “cap not to exceed” bid. UMDNJ will not pay for the Contractor’s administrative costs on the project.	
41	Page 41	4.22	Does the Vendor have the right to have the Client sign off and clearly state what task or subtasks are to be delivered, where as to protect ourselves where possible? This way everyone is in agreement on what is to be delivered.	<p>Section 5.6.3 of the RFP provides that the bidder propose a contract schedule setting forth the deliverables, the tasks, and sub tasks, dates of delivery and control methodology. Therefore the bidder has considerable control over the contract schedule subject to approval by UBHC. The final schedule will be agreed upon and set by both the contractor and UBHC.</p> <p>UBHC recognizes that unforeseen or uncontrollable circumstances may arise that may impact the schedule and require contract schedule time changes to account for these factors. The need for schedule changes, if they arise, will be addressed as necessary. The contractor shall be held responsible for circumstances and events within its reasonable control that impact the agreed upon contract schedule.</p>
42	Page 50	5.7.7	We are privately held company. Do we have to supply this information in advance	No, To be supplied if requested by Evaluation Committee.
43	Page 53	6.3 Evaluation Criteria	Can this be revised to include “subject to approval by the organization/facility serviced by the bidder” as a precondition to conducting an onsite inspection. As 6.4.6 currently stands, this exceeds HCS’s authority to grant due to prior contractual agreements.	Yes. See modification section below.

44	Page 54	6.7 NEGOTIATION AND BEST AND FINAL OFFER (BAFO)	The ninth sentence on section 6.7 Negotiation and Best and Final Offer indicates, Any revised payment proposal that is not equal to or higher in payment than the original payment proposal will be rejected as nonresponsive. This is a conflicting instruction.	Acknowledged, addendum will replace conflicting instructions on revising BAFO pricing. See modification section below.
45		5.8 Section A: Terms and Conditions Governing All Contracts	Performance Security: Acknowledged - Does not apply to RFP #P10-002 Revenue Cycle Information System for UBHC.	Correct. No performance security is required.
46	Page 78	7.0 Bidder's Financial Capacity	Do we have to supply this information in advance	No, To be supplied if requested by Evaluation Committee
47	89	Supplier Diversity and vendor Development Program Diversity Vendor Policy/ Requirements	5. Important Process Change In order to be eligible to bid, a firm must now be registered as a small business as of the date of the bid opening. This is a change from previous requirements, which required a firm to have submitted an application one-day prior to bid opening. If we understand this statement we are not eligible to bid because we did not submit an application one-day prior to bid opening. We are right now finishing up the processing of registering to be do business in NJ. Can you please clarify this statement.	Bidders are not required to be registered as a small business for the Bid.

Function	Program Name	Vendor	Replace? (Y/N) or 3rd Party
AP/MM/Purchasing/Budgeting/GL	Banner	Sun MicroSystems	No – Replace No – Interface
Revenue Cycle, Including Patient Reg.	HSIS	Netsmart	Yes – Replace as part of Revenue Cycle RFP. Yes – Interface
Billing Statements	HSIS	Netsmart	Yes – Replace as part of Revenue Cycle RFP. Yes – Interface
Health Information Mgmt.			
Document Management			This should be included in the pricing of the Revenue Cycle system.
Laboratory	LabGen	Comtron	No – Replace Yes - Interface
Radiology			NA – Not part of this procurement.
Scheduling	HSIS	Netsmart	Yes – Replace as part of Revenue Cycle RFP. Yes – Interface
Pharmacy Robot	MedsManager 7.4	McKesson	Possibly Replace Yes – Interface
Supply Cabinets			
Medication Carts			Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
Automated Medication Dispensing			Not part of the

Machines			requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
ER Tracking			Not part of the requirements for this RFP. However bidder may propose as an option item related to the mental health perspective. Will not be considered as part of revenue cycle proposal evaluation.
Dietary			Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
EKG	On Paper		Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
Clinical Documentation	CWS	Netsmart	
POC Glucose Testing	On Paper		UBHC doesn't

			have enough demand.
Transcription	On Paper	UBHC	
Fetal Monitoring			NA
Mammography			NA
Data Repository	DSS	Netsmart	Yes – Replace
Pathology Information System			NA
Blood Bank			NA
Coding Software			Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
PACS			NA
Tumor Registry			NA
Extended Care	CWS	Netsmart	Not part of the requirements for this RFP. However bidder may propose as an option item related to inpatient mental health. Will not be considered as part of revenue cycle proposal evaluation.
Auto-fax of Results			Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part

			of revenue cycle proposal evaluation.
Outsourced Transcription			NA
Web Portal			Not part of the requirements for this RFP. However bidder may propose as an option item. Will not be considered as part of revenue cycle proposal evaluation.
Housing Software	Awards	Footholds	Yes - Replace
Division of Child Behavioral Health EMR	Absolute	Value Options ** it is possible that this vendor will be replaced	No – Replace Yes - Interface

PART 2: Additions, Deletions, Clarifications and Modifications to the RFP

#	Page #	RFP Section	Additions, Deletions, Clarifications and Modifications
01	28 and 79	3.4 and 8.0	Throughout the RFP, scaling of the system should be based on a total of 500 UBHC enterprise users, including its satellite locations, with no more than 175 of those being concurrent users. If the ASP model is implemented, pricing should be based on increments of 50 concurrent users. The revised price sheets provide for this change.
02	30 and 79	3.6.5	This Section shall now read: The Contractor must provide Software support. At a minimum, interfaces and registration must be supported 24/7 and all other modules of the system must be supported M-F/8-5. The revised price sheets provide for this change.
03	31	3.6.7	This Section shall now read: In cases where software problems create issues for UBHC, such as use of additional staff resources, re-work, or manual workarounds, the Contractor must provide remedies that are to be financial in nature. The Contractor shall monetarily compensate UBHC for all direct and indirect losses and damages resulting under this section. Contractor remedies in these cases shall be limited to the total value of sections 8.1, 8.1.2, 8.2, and 8.2.1.
04	53	6.4.6	The first sentence of this Section shall now read: The University reserves the right to conduct site inspections of any facility(ies) serviced by the bidder(s) to assist in judging the bidder's ability to provide the services required by this Request for Proposal, subject to approval by the organization/facility serviced by the bidder.
05	54	6.7	The ninth sentence of this Section shall now read: Any revised payment proposal that is not equal to or lower than the original payment proposal will be rejected as nonresponsive.

06	81	8.1, 8.1.2, 8.2, 8.2.1, 8.3 and 8.3.1	The following is modified in sections 8.1, 8.1.2, 8.2, 8.2.1, 8.3 and 8.3.1. All bidders must use the modified price sheets. There is no change in the Price Sheets for sections 8.4 and 8.5.
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**ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL SPECIFICATIONS
REMAIN UNCHANGED.**

END OF ADDENDUM #2

8.0 PRICE SHEET AND SUPPORTING DETAIL

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

8.1 **Revenue Cycle Information System Price**

All inclusive total license price or subscription fees for purchase of Revenue Cycle Information System.

The price must include all requirements as indicated in section 3.0 Scope of Work, direct and indirect costs including but not limited to the first year warranty, licensing fees/ subscription fees, administration, travel and related expenses, overhead, and profit. Payment will be made pursuant to schedule set forth in Section 4.15.3 of the RFP.

Price for Revenue Cycle Information System (Software) including cost of first year warranty as required under Section 3.5.8 of the RFP

8.1.1 Enterprise-wide license for UBHC central office and satellite locations:

Schedule of Payments for License and one year warranty/support

15% Approved workplan and timelines \$ _____

15% Software delivery \$ _____

20% Completion of HL7 interfaces \$ _____

25% First Productive Use \$ _____

25% Completion of Acceptance Testing* \$ _____

* Payments due after Completion of Acceptance Testing will be issued as System is rolled out to users in groups of 50.

Total: \$ _____

Incremental per user license fee, if more than

175 concurrent users: \$ _____

Or

Year	Monthly per user subscription fee, based on 175 concurrent users
1	\$ _____
2	\$ _____
3	\$ _____
4	\$ _____
5	\$ _____

Incremental per user subscription fee, if more than

175 concurrent users: \$ _____

8.1.2 Enterprise-wide license for UBHC central office, satellite locations and external affiliate users:

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

Schedule of Payments for License and one year warranty/support

- 15% Approved workplan and timelines \$ _____
 - 15% Software delivery \$ _____
 - 20% Completion of HL7 interfaces \$ _____
 - 25% First Productive Use \$ _____
 - 25% Completion of Acceptance Testing* \$ _____
- * Payments due after Completion of Acceptance Testing will be issued as System is rolled out to users in groups of 50.

Total: \$ _____
 Incremental per user license fee, if more than
 175 concurrent users: \$ _____

Or

Year	Monthly per user subscription fee, based on 175 concurrent users
1	\$ _____
2	\$ _____
3	\$ _____
4	\$ _____
5	\$ _____

Incremental per user subscription fee, if more than
 175 concurrent users: \$ _____

8.2 Implementation Services Price

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

All inclusive total price, direct and indirect cost, including but not limited to administration, overhead, profit, and related expenses, for implementation services of the Revenue Cycle Information System required by the RFP in section 3.5. The bidder shall provide an all inclusive for the total cost of implementation services. In addition, the bidder shall propose a schedule for payment for implementation services. The final schedule will be established by agreement between the bidder/contractor and UBHC.

Total Cost UBHC Enterprise-wide \$ _____
(Does not include travel expenses listed on 8.2.1)

Total Cost UBHC Enterprise-wide and Affiliates \$ _____
(Does not include travel expenses listed on 8.2.1)

Proposed schedule for payment on Implementation Services:

8.2.1 Travel Expenses Related to Implementation Services Price

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

Travel expenses related to implementation services of the Revenue Cycle Information System required by the RFP in section 3.5.

Travel Expense for UBHC Enterprise-wide implementation (Not to Exceed) \$_____

Travel Expense for UBHC Affiliate implementation, per affiliate (Not to Exceed) \$_____
(Assume, for bidding purposes that all affiliates are located in the state of New Jersey)

8.3 Service and Maintenance (Post Warranty)

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

All Inclusive Annual Service and Maintenance Price for 24/7 Support of Revenue Cycle Information System for UBHC, all modules, after delivery and installation of product.

UBHC Enterprise-wide application

\$ _____ Year 1

\$ _____ Year 2

\$ _____ Year 3

\$ _____ Year 4

\$ _____ Year 5

UBHC Enterprise-wide and affiliates application

\$ _____ Year 1

\$ _____ Year 2

\$ _____ Year 3

\$ _____ Year 4

\$ _____ Year 5

8.3.1 Service and Maintenance (Post Warranty)

Revised Price Sheets Dated 11/04/09 – Must be submitted with proposal

All Inclusive Annual Service and Maintenance Price for Support of Revenue Cycle Information System for UBHC after delivery and installation of product Price includes 24/7 support of registration and interfaces, and support of all other modules Monday through Friday 8:00AM to 5:00PM EST.

UBHC Enterprise-wide application

\$ _____ Year 1

\$ _____ Year 2

\$ _____ Year 3

\$ _____ Year 4

\$ _____ Year 5

UBHC Enterprise-wide and affiliates application

\$ _____ Year 1

\$ _____ Year 2

\$ _____ Year 3

\$ _____ Year 4

\$ _____ Year 5