



# **Request for Proposal (RFP)**

**For**

# **Voice over Internet Protocol (VOIP)**

# **Telephone System**

**RFP Issue Date: July 31, 2018**

**Deadline for Questions: September 14, 2018**

**RFP Due Date: October 31, 2018**

**RESTRICTIONS on COMMUNICATIONS with EVMS STAFF**

**All Respondents are restricted to contacting Dominick Calgi at [calgidr@evms.edu](mailto:calgidr@evms.edu) with any and all questions, concerns, clarifications, information needs, etc. regarding this VOIP RFP. Respondents and their employees/agents are not permitted to communicate with any other EVMS staff regarding this RFP. If a vendor is found to be in violation of this restriction, EVMS reserves the right to reject their RFP response.**

**OVERVIEW**

**Eastern Virginia Medical School (EVMS)** has provided education in medicine (MD), biomedical sciences (PhD and Master) and other health professions (e.g., physician assistants, surgical assistants and art therapists) in southeastern Virginia since 1973. Our clinical faculty care for patients throughout Hampton Roads and we conduct biomedical research in areas such as cancer, diabetes, cardiovascular disease and infertility.

EVMS serves the region of southeastern Virginia known as Hampton Roads, a community that consistently ranks high in independent quality of living surveys. Hampton Roads is one of the most populous regions of Virginia which includes the cities of Chesapeake, Hampton, Newport News, Norfolk, Portsmouth, Suffolk and Virginia Beach. The main campus of the school is located in Norfolk, Virginia. EVMS operates under a charter from the Commonwealth of Virginia as a public instrumentality to advance health care in eastern Virginia.

The governing body is the Board of Visitors, which is comprised of 17 members appointed by the Governor, Virginia Senate and House of Delegates, and city councils of Hampton Roads (Chesapeake, Hampton, Newport News, Norfolk, Portsmouth, Suffolk, and Virginia Beach) and six members appointed by the Eastern Virginia Medical School Foundation which is the fundraising organization for EVMS.

**Facts and Figures: (FY 2018)**

- |                          |   |
|--------------------------|---|
| • Annual Budget          | \$253 million (includes research)           |
| • Research               | \$26 million                                |
| • Medical students       | ~600 with 6000 applications/yr.             |
| • Allied Health students | ~900  |
| • Faculty                | ~530  |
| • Residents              | ~350  |
| • Staff                  | ~2100 FTEs                                  |
| • Total Net Assets       | \$162 million (restricted and unrestricted) |

Additional information about EVMS, including our mission, vision, values, strategic plan and our QEP (Quality Enhancement Plan), can be accessed through our website at [www.evms.edu](http://www.evms.edu).

EVMS understands the confidentiality of the proposals, data and materials submitted and it will hold such proprietary information and trade secrets as confidential and not subject to public disclosure to the extent permitted under Virginia law.

## Project Background, Selection Criteria and Evaluation Process

EVMS current telephony infrastructure is comprised of the following – data collected as of July 10, 2018 unless otherwise noted:

- **Switch/PBX** – located at 700 W. Olney Road, Norfolk, VA 23507, Siemens HICOM 300, Model 80EX, admin software LC-WIN VERSION 1.0 KV68, Remote shelf MOD 30 CMX CAB3 located at 358 Mowbray Arch, Norfolk, VA 23507
- **Campus Handsets** – as of 12/15/2017- (1963) total devices in main PBX and remote shelf, breakdown is (1294) digital devices and (669) analog devices, devices are located throughout 12 buildings on campus, (2) switch board consoles
- **Voicemail** – HICOM PHONEMAIL 7654 CABINET, 2 NODES, 16 Channels, admin software PROCOMM PLUS VERSION 4.8, (724) boxes, plan for (1500), currently no integration with email
- **Auto attendant in Voicemail** – (43) call processing boxes on campus, (10) satellite boxes, plan for (250)
- **Enhanced 911** – Installed in 2005, ENTERPRISE ALERT NOTIFICATION PACKAGE - SENTRY LIMITED TO 6 INSTANCES/CLIENTS, DUAL PRI INTERFACE BOARD, 8 CHANNEL ANALOG PASSIVE/TERMINATE INTERFACE BOARD, BY PASS BOX WITH WATCHDOG TIMER for BC/DR, admin software ENTERPRISE ALERT V 11.1.0012, Maintenance contract under SPOK, MAC requests are auto uploaded to Verizon E911 Virginia database using Intrado portal, all 911 calls are recorded
- **ACD** – Installed in 1999, server ROLM 9751 ACD VERSION 6.4A, admin software BUSINESSVIEW - CALL REPORTING - BVC 1.0 KV58 and BVO 2.1 KV13. (8) groups on campus, using pre-recorded messaging for queue in addition to MOH, (3) satellite groups, plan for 50-100 groups, business hours 8 am – 5 pm EDT
- **Call Center Agents** – (95) on campus, (50) at satellite locations, plan for 300
- **CDR** – provided by Homisco, Inc., monthly bill back to (150) departments, admin software VERSION 8.75.0\_COMMERCIAL, server connects to HICOM via SERIAL LOGGER SERVICE 1.21e
- **Our cabling infrastructure** dates back to the 1970's in some areas. We have CAT3 wires for some digital and analog locations. In the early 2000's renovated areas were cabled with CAT5 for voice and data. Existing areas are being cabled with CAT5 for voice and data. Our new buildings and newly renovated spaces are being cabled with CAT6. A breakdown of known areas where CAT3 is in place is provided in the next section.
- We have **(16) satellite offices** located in Norfolk, Virginia Beach, Portsmouth, Hampton and Newport News. None of these offices are connected back to campus, or each other, for voice services. See **Exhibit A (Satellite Offices)**

- We bill all our services, costs and work orders back to the corresponding department.

TOTAL DEPARTMENTS BY MISSION=	47	52	67
	Administration	Education & Research	Clinical

- The **Telecommunications Department** is part of the Facilities Division under the Administration mission. The office is staffed Monday through Friday from 8:00 am to 4:30 pm EDT. The manager and one analyst are available for emergencies after hours. The department is made up of two analysts and one manager/analyst.
  - **Telecom Analyst I** – Responsibilities include: primary dispatcher and responsible for manning the help desk, processing service calls and MAC requests, subcontractor scheduling, and asset/equipment/inventory/database management.
  - **Telecom Analyst I** – Responsibilities include: primary for monthly invoicing which includes handling payments to service providers and processing bill back to departments for long distance charges, handset/voicemail fees and CDR usage. Processes financial transactions for department including Purchase Orders, Requisitions, Procurement card, and budget trends. Maintain servers and engineer support for PBX and application servers.
  - **Telecom Analyst III/Manager** – Responsibilities include: Project Manager for construction, renovation, cable plant infrastructure, etc. Primary for ACD and call center builds, auto attendant design and recording
- EVMS Data Network will remain separate at all times from VOIP: separate routers, separate internet connectivity, and separate administration. Closets will be shared. In general there are IDF’s on each floor of each building cabled to an MDF that is connected by fiber (data) and copper (voice) to the central hub in Lewis Hall. See **Exhibit B (Campus Map)**

EVMS concerns about options include:

- **Migration of exchange** – Our 757-446-xxxx leased DID blocks are exhausted. Proposal should include options for new NXX conversion or options for retaining 446 NXX and redesigning department level call routing to internal extensions using main numbers or using auto attendants.
- **Analog support** – we have a high number of analog devices comprised of panic alarms, faxes, elevator phones, door access call boxes, parking gate call boxes, FACP lines, etc. Of the (669) on campus devices, I estimate (500) will stay and (169) can convert from an analog handset to a VoIP handset
- **Connection of our satellite offices** – Proposal should include plan to connect the (16) satellite offices back to campus. See **Exhibit A (Satellite Offices)** for locations and details about existing data.
- **Cable management** – we have an aged cabling infrastructure that needs to be considered. An estimate was done to determine a total of (1422) CAT3 cables. This is an estimate based on an inspection of the closets. This includes (100) possible cables in Lewis Hall. See breakdown notes below and **Exhibit B (Campus Map)**.
  - **Hofheimer Hall** – 7th floor 120 CAT3 cables, 6th floor 56 CAT3 cables, 5th floor 133 CAT3 cables, 4th floor 145 CAT3 cables, 3rd floor 13 CAT3 cables, 2nd floor 2 CAT3 cables and 1st floor 36 CAT3 cables. There are a total of 505

CAT3 cables in HH. Notes: Most of the original voice cables are 6 pair and some have multiple jumpers. All closets except the 1st floor have the cables terminated on 66 blocks which would have to be replaced. These are shared closets with electrical panels leaving little space for frame expansion.

- **Jones Institute** – 4th floor 38 CAT3 cables, 3rd floor 57 CAT3 cables, 2nd floor 83 CAT3 cables, 1st floor 78 CAT3 cables. There are a total of 256 CAT3 cables in Jones Inst. Notes: The cables are terminated on 110 blocks.
  - **Brickell Library** – small closet on each of 3 floors for a total of 36 CAT3 cables terminated on 110 blocks.
  - **Williams Hall** – 96 CAT3 cables in the B wing terminated on 110 blocks.
  - **Materials Management and Bldg. 154** – have a total of 47 CAT3 cables terminated on 66 blocks.
  - **Lewis Hall** – 3rd floor has 4 closets with 163 CAT3 cables, 2nd floor has 4 closets with 143 CAT3 cables, 1st floor closet 109A has 59 CAT3 cables and the main communications room has 17. We have added 100 for unknown. Notes: The cables are terminated on 66 blocks. There are some 25 pair cables on these frames that have multiple jumpers on them indicating some cables have been run to blocks in the ceiling so we cannot determine the number of cables without extensive research. I would suggest a figure of 100 additional cables for planning purposes. There are a total of 482 CAT3 cables in Lewis Hall.
- Implementation support to provide consulting, physical surveys, migration planning, implementation plan, project oversight, and implementation review (optimization), etc.
  - Disaster recovery and Business Continuity plan for main medical practice groups for voice services.
  - High quality support and service SLA
  - Maintenance of both the existing and new proposed infrastructure throughout the project implementation – until “Go Live”.
  - Recording of calls for police dispatch in/out bound, all 911 and EVMS Medical Group

EVMS intends to purchase and install from a well-established, ethical, financially sound and responsible vendor whose systems, services, support and products are aligned with our current and future needs, a functionally complete VOIP telephone system to replace our aged phone system. Functional areas to be covered by the proposed system include, but are not limited to areas covered in this document and in the Advantiv DecisionDirector toolkit.

This Request for Proposal (RFP) is for a VOIP system to meet the immediate and long-range needs of EVMS. We will consider quotes for a solution that provides for UCaaS services management of our VOIP needs, a local PBX for analog and business continuity requirements, implementation management, and long-term management/oversight/coordination of EVMS’ telecommunication carrier and support services.

EVMS proposes to move to the new telephone system beginning in calendar year 2019. A selection team representing different departments and functional areas will evaluate potential vendor solutions and make a recommendation to our Administration and Board for final approval.

EVMS' goal is to provide superior customer service to all service users. EVMS' telephony staff will best be able to meet this goal by working in a collaborative and cohesive partnership with the selected vendor's staff delivering the proposed service. The ability to give timely, informative, and thorough communication to service users is part of our excellent customer service strategy. All available information should be shared between EVMS and vendor's staff as soon as it is known.

EVMS expects any solution proposed to meet these expectations:

- Maintain services throughout the implementation during business hours (7 am – 7 pm EDT) of our school, healthcare, research and administrative missions. This will require any vendor to be able to work after hours and weekends.

The selection criteria are divided into two areas:

1. *Functional requirements* – this area encompass all the features and attributes for the VOIP system including completeness of features, disaster recovery and business continuity, training, analytics and reporting, efficient and economical operations, capacity for growth, reliability, security of data, flexibility and adaptability, simplicity of operation, customer support, etc. Solutions that do not meet our functional requirements will not be selected.
2. *Supplemental information* – this area encompasses all other items that are required for a diligent evaluation of a VOIP solution. This information will be used to further evaluate solutions that are judged to meet our functional requirements. Examples of such vendor information include but are not limited to:
  - *Experience, qualifications and reputation* – vision, track record, development philosophy, strategic goals, commitment to higher education (graduate medical/health schools)
  - *Planning, implementation services, processes and support* – VOIP project execution, timeframe and team, training, implementation, service support, post-implementation review and optimization
  - *References* – client feedback on performance and implementation, financial stability and health, vendor reliability, quality of equipment, comparable institutions, client retention rate
  - *Costs and Pricing* – initial and ongoing fees, enhancements and updates, 3<sup>rd</sup> party consultants, 5 year total cost
  - *Other information* – reporting & analysis tools, invoicing process, video integration, mobility applications, value added services, monitoring performance

*Functionality* information will be gathered via Advantiv's web-based RFP response toolkit, DecisionDirector that evaluates responses to each functional area within EVMS' RFP. Every response will be evaluated by our selection team based upon predetermined criteria. Vendors will be asked to demonstrate the item's functionality to the team during 'Proof of Function' demos.

*Supplemental information* will also be gathered by Advantiv’s Decision Director (DD) and this Request for Proposal document. It is in your best interests to answer each question or statement completely.

**VOIP Telephone System Project Timetable (also *Exhibit C*)**

<b>Event</b>	<b>Date</b>
1. RFP Distribution to Vendors	July 31, 2018
2. Questions from Vendors about RFP due	September 14, 2018
3. Vendors Conference Call & Site Visits (appointment required)	Sept. 17 - 21, 2018
4. Responses to Vendors Questions about RFP due	September 24, 2018
5. Final Date for Questions , Clarification, etc. on RFP	October 26, 2018
6. RFP Proposal Due Date	October 31, 2018
7. Review RFPs and Vendor Selection Discussion – Month of	November 2018
8. Shortlisted Vendors' Proof of Function Demonstrations	December 2018
9. Anticipated decision and selection of Vendor	January 2019
10. Anticipated commencement date of work	First Quarter 2019

**INSTRUCTIONS for COMPLETING THIS RFP**

All bidders will submit their Proposals using a web-based system provided by Advantiv Solutions, LLC. Bidder responses to the RFP questions will be collected and processed using Advantiv’s DecisionDirector RFP Response Management System. Each Bidder will be provided with a secure, on-line response environment within the tool. ***Please note that all the questions and requirements contained in this RFP Word document must be answered in DecisionDirector (DD) including additional VOIP functional requirements with the exception of EVMS VOIP Costs and Pricing information.*** Advantiv Solutions will provide each Bidder with all necessary instructions and support. Confirmation for receipt of proposal submissions using Advantiv will be provided by email only. Please email Advantiv at [support@advantiv.com](mailto:support@advantiv.com) to obtain access to the Advantiv DecisionDirector System and note in the email subject line: **EVMS VOIP RFP**. You will receive a response from Advantiv within one business day. The Bidder response environment will open upon the release of the RFP and will close at **5:00 PM EDT on the RFP due date, see Timetable (*Exhibit C*)**.

Late proposals will not be accepted and will be automatically disqualified from further consideration, unless the Advantiv’s System is found to be at fault. All proposals and any accompanying documentation become the property of EVMS and will not be returned.

Conference calls and site visits will be set up sometime in September for all VOIP vendors to call in with questions about the RFP for clarification and information purposes. EVMS requires that any questions or information requests be sent to us by **5:00 PM EDT on the due date** (see *Exhibit C*) so we can prepare our responses. Responses to all vendor questions will be compiled and emailed to each confirmed bidder so that every vendor has the same equitable chance to correctly complete the RFP. Any new questions asked at the conference call will also be sent to each vendor via email. Details about the conference call (dates, times, duration, phone number, etc.) will be sent to all vendors in a separate email.

***The following sections: 1 – 19 have all their functional requirements contained in the Advantiv DecisionDirector toolkit (do not insert your answers in this Word document):***

## **1. VENDOR OVERVIEW and QUALIFICATIONS**

You will be asked to provide a brief, non-technical overview of your company and the VOIP telephone system solution(s) including equipment, software and services you are proposing:

1. Company size: number of employees working in telephony, annual net income for last two fiscal years (annual financial reports)
2. Type of organization (corporation, partnership, LLC, privately held corp., etc.)
3. Country, state, county, city and date (where and when company started/incorporated)
4. Years in business and presence in the VOIP telephone market
5. List of industry awards and recognitions.
6. Has your company been involved in any company mergers, acquisitions or change of ownership? If Yes, describe its impact on the VOIP telephone system you are proposing.
7. Do you have any liens, claims and lawsuits adjudicated or pending involving your company? If Yes, please provide the details and outcome.

You will be asked to confirm that your company has never been terminated for default, poor or non-performance, non-allocation of funds or other reason? If you have been severed for cause, then please provide circumstances.

You will be required to execute a HIPAA Chain of Trust and Business Associate Agreement (see *Exhibit D – Business Associate Agreement*)

***Describe the VOIP UCaaS and On-site PBX solution you are proposing; EVMS will entertain this solution because of the need to have an on premise PBX to provide analog and business continuity coverage.***



## 2. REFERENCES

*The vendor's latest VOIP solution must be fully deployed and in use for over one year at three or more higher education institutions (4 year colleges or universities) preferably two medical/health professions schools. Failure to comply with this requirement at the date this RFP was issued may result in the vendor's disqualification from the RFP process.*

Please list names, addresses and contact personnel phone numbers for the VOIP System proposed for EVMS that you sold to colleges, universities and graduate medical/health schools within the last five years. EVMS will not contact any schools during this initial stage.

Please list all clients lost in the last five years for the VOIP proposed system and include the following: Contact person's name and telephone number; length of service at the account; and reasons for the loss.

Provide at least six (6) references, e.g., higher education or healthcare institutions, medical (MD)/health professions schools and include the institution, address, contact name, phone number, purchased date and live date. Each reference should comply with at least one of the criteria listed below and **please cite which of the four listed criteria the reference fulfills.**

- One reference should be from an organization that has been using your proposed solution for at least five plus years.
- Two references should be the most recently completed proposed solution implementation.
- Two references must be from a graduate medical/health professions school similar to EVMS.
- One reference should be from an organization that has stopped using your system within the past three to five years. Please include the reason for the loss of the account.

## 3. CONTRACTS: MSAs, SLAs, SOWs, etc.

Vendors are requested to provide a valid contract as part of the RFP to EVMS. Please include MSAs (Master Service Agreements), Terms and Conditions, SLAs (Service Level Agreements), SOWs (Statement of Work), etc.

1. Please supply a sample contract or MSA with terms and conditions.
2. Please supply a sample maintenance agreement.
3. Please supply a sample SOW for implementation services.
4. Please supply a certificate of insurance per the terms and conditions.
5. Please supply SLA documents.
6. Please identify: state or commonwealth of governing law.

#### 4. OTHER INFORMATION

Provide a copy of the firm's most recent (audited, if available) financial statements for the last two (2) years including any management letter/recommendations made by your auditors (an email PDF file/scan copy is acceptable). Please send financial statements to Dominick Calgi at [calgidr@evms.edu](mailto:calgidr@evms.edu). EVMS is prepared to sign a nondisclosure agreement (NDA) with the Vendor.

Are you currently for sale or recently involved in any transaction to expand or become acquired by another business entity? If yes, explain the expected impact on the organization and its strategic direction.

Are you currently or in the last 5 years in default on any loan, bond covenant or financing agreements with a bank, financial institution or other entity? If yes, explain the pertinent details, circumstances and describe the prospects for resolution.

EVMS is going to want a scripted demo at EVMS (preferred) or vendor's site, where both the technology (phones, call center) and functionality (auto attendant, MAC requests, call recording, building voicemail, agent setup, physical relocation, etc.) are demonstrated. Are you prepared to participate? Describe any requirements for the demonstration to be conducted at EVMS.

#### 5. IMPLEMENTATION and PROJECT MANAGEMENT

EVMS requires as part of the implementation, consulting and specification of our exchange schema to one that supports growth. Please describe your approach and experience.

Provide your recommended VOIP telephone system implementation plan, process and schedule (rollout process).

Describe the tech support response process to new client setup/operation issues?

What anomalies have marred previous similarly scoped installations, if any? Please describe any recommendation for avoidance?

Please describe your responsibilities for contacting each EVMS location, performing a site assessment including data gathering and setup requirements, coordinating the deployment and configuration of Handsets, and identifying and training staff on the system in coordination with EVMS telecommunications manager?

Please describe your responsibilities for coordinating with EVMS staff, telecommunications manager, and each site/location of the final configuration of all telephones and VOIP system operation including but not limited to programmable features keys, speed lists, calling groups, hunt groups, coverage patterns, auto-attendant set-up, etc.?

Please supply the resumes of at least 2 possible project managers to be assigned to EVMS.

Please supply any operational standards available for best practices.

Are tools, project management methodologies and resources available to ensure a successful implementation of the VOIP telephone system? If Yes, please describe.

Please describe the various roles and responsibilities within the plan and whether they belong to vendor or client.

## **6. TRAINING**

Describe your training philosophy, location(s), and delivery methods including the type of training (initial, on-going, annual, etc.) and the expected hours per week.

Please provide available training syllabi for training of technical, administrative, power and end users.

Are the individual(s) assigned to work with EVMS for training or implementation your employees or third-party consultants? Please list the number of years with your company.

EVMS will want to record training and use as an internal training tool only. If you require an additional NDA please attach.

EVMS will want to record any demonstrations and use to engage other EVMS faculty and staff in the decision making. If you require an additional NDA, please supply

## **7. SECURITY**

Is the proposed solution adequately secured to comply with Federal and State laws and regulations as well as meeting accreditation and Medical school requirements? This holds true whether the solution is sourced on premises at EVMS, or in the cloud.

Describe how physical access to the proposer's data center(s) is controlled, should the proposed solution include data or components which reside there.

What security measures will be taken to protect EVMS data?

Describe the written policies, procedures, and methods for ensuring security.

Explain the proposed solution's response to applicable state and federal laws, including and specifically addressing CALEA compliance, and explain how you maintain compliance with privacy rules & regulations (such as the Privacy Act of 1974, PCI, HIPAA, FERPA, etc.).

Is the encryption on hardware or software phones in this system restricted from use in countries outside the United States?

Indicate where data centers are located or any place where you store customer data, and include any locations outside the United States.

Do you provide a separate written Service Level Agreement that covers security concerns, risks, and liability coverage? If Yes, provide a sample.

Do you provide encryption of all stored data? Indicate types of encryption and where encryption is used.

Can all media packets (voice, video, IM, etc.) in transport be encrypted? Describe the encryption solutions used.

Who has access to any decryption keys and how are they secured?

What types of operating systems are running on the servers and how do you secure them from exploits?

What is in place to prevent device-level exploits? This should include any locally installed gateways, data-storage devices, and the telephones (including soft phones).

What are the software update mechanisms for installed gateways, data-storage devices, and telephones (including soft phones)? How is the update mechanism resistant to person-in-the-middle attacks? What is the support lifecycle for product enhancements or bug fixes?

What type of security exists within the applications to prevent abuse and malicious activities?

What security measures are in place to provide secure access to authorized EVMS staff that need to access the system's management tools?

How do you protect the services from standard IP vulnerabilities, including person-in-the-middle and denial-of-service attacks?

What are the firewall traversal requirements (applications, ports and protocols) for the service?

Explain the frequency of third party audits of the systems and processes of the proposed solution. If possible, please include the results of the latest SOC 2 type 2 audit.

For cloud services, please provide the assessment results of a Cloud Security Alliance Cloud Controls Matrix version 3.0 or better, or equivalent documentation.

Describe the electronic discovery and retention capabilities of the proposed solution, including user or centrally instigated voice mail retention policies and the ability to administratively extract voice mail messages (for example, as part of a Public Records request facilitated by the EVMS).

Describe the logging capabilities of the service for both administrative changes and normal use.

Describe the retention time available for system logs and call detail records, and how are they made available for integration into external logging facilities (Syslog, SIEM tools) or for export.

Identify any security certifications the hosting organization holds.

## 8. DISASTER RECOVERY

Survivability – EVMS expects dial tone survivability to be implemented at each site. Describe the capabilities and options.

Does your VOIP solution have disaster recovery features? If Yes, explain what happens in the event of a catastrophe (man-made or natural) or data loss, and what are your contingency plans especially if a Hosted or Managed option is offered?

Does the VOIP system provide redundancy options / alternatives to ensure critical sites remain functional in the event of a power outage? If Yes, please explain how this is accomplished.

Failure Scenarios - Describe how your firm will be responsive and how the proposed service will be impacted in the following scenarios:

- Upstream Service Provider failure
- Primary data center failure
- Denial of Service attack
- DNS failure
- EVMS primary Internet Service Provider failure
- EVMS primary data center failure
- EVMS WAN connectivity failure for one or more WAN sites
- Network failure in or between EVMS buildings
- EVMS email environment offline
- Electrical outage lasting longer than 12 hours

## 9. REPORTING

Does your system provide ongoing monthly utilization and performance reports of service components starting upon completion of VOIP installation? If Yes, please describe/show the reports.

Does your system provide Call Detail Recording (CDR) reports on calling stations, trunks, Caller ID, account codes, usage, exceptions, etc? If Yes, describe/show the reports.

Will you provide scheduled reports, dashboards, and performance monitoring tools to EVMS showing Service Level Agreements are being fulfilled? If Yes, please give examples of such reports.

Does the system allow the connection of 3rd party reporting software such as Crystal Reports? Please explain what is required to implement.

Can all reports be exported to an xls, doc or pdf format?

## **10. CUSTOMER SUPPORT/MAINTENANCE**

When can the client expect a response and define your prioritization/escalation specifications?

Explain the cost for the first and subsequent years' maintenance on the software (include costs in attached spreadsheets *Exhibit E*).

Provide details on time-based support levels. For example, business hours, 24x7, weekends, etc.

Please supply overview of support request procedure.

## **11. MONITORING and NOTIFICATIONS**

Describe the support and troubleshooting process, including expectations of EVMS staff.

Describe the system monitoring and performance monitoring tools included in the proposed service and which if any, EVMS support staff will have direct access to view.

Describe any API's you have allowing custom interfaces or third-party interfaces for monitoring and notifications.

Describe how EVMS end users are notified by the service provider of status changes (i.e. event, outage, etc.) in the proposed service.

Describe how you inform customers of planned service changes, new service offerings, and other upcoming service events.

Describe how you monitor call quality, for example, distracting noise, echo, pops, delays, etc.

## **12. INTERNAL INVOICING**

Describe any billing reports that are available through your application. Include what information they provide, the circumstances in which they would be useful, and the process for retrieval and viewing reports (include samples).

If EVMS identifies a need for a report that is not currently available, describe the process for developing that report.

Describe how EVMS can access active and inactive records to validate invoicing in-service dates, work order information, etc.

Describe the process for internal invoicing, including the day of the month invoicing is performed, how invoice is sent, the invoicing begin and end dates, if service charges are in advance or arrears of the service, etc.

Describe the process for handling invoicing discrepancies, including the contacts to resolve discrepancies, your escalation process, etc.

Describe your process for requesting and receiving credits, including forms or required formats, deadlines, etc.

**Sections 13 – 19 have all their requirements contained in DecisionDirector:**

**13. CALL CENTER OPERATION**

**14. FEATURE REQUIREMENTS**

**15. HANDSETS**

**16. TECHNICAL**

**17. CARRIER**

**18. VOIP SYSTEM FEATURES and FUNCTIONALITY**

**19. FINANCIAL RATING**

Vendors will provide a current (within 60 days of this RFP submittal) financial rating of their company (such as a Dunn and Bradstreet or Standard and Poor analysis) that indicates the financial stability of the Vendor.

**20. COST and PRICING INFORMATION** (complete on separate spreadsheets: *Exhibit E*)

The vendor's price information must be itemized and include all costs (e.g., license fees, implementation and training, travel and per diem, documentation, maintenance, and hourly rates). The information provided will be used to determine the value of each vendor's proposed solution (price paid for function delivered). All pricing will be provided on a unit cost basis with all support and maintenance costs to be broken out – ***No bundling of prices***. The pricing for your VOIP system should only be for an On-site PBX and UCaaS. One of EVMS' goals is to determine a 5 year and 10 year cost of ownership so it is important to include all expenses for software, equipment, infrastructure, training, implementation, maintenance, upgrades, project management, etc. as applicable. Costs and pricing should be complete, detailed and comprehensive. **Please respond to this section for cost and pricing using the formatted Excel spreadsheets, *Exhibit E: EVMS VOIP Pricing Worksheets*, attached to this RFP in the appropriate section of DecisionDirector. You will upload your completed worksheets as instructed within DecisionDirector before the 5:00 PM deadline on the RFP Due Date – listed in RFP Timetable (*Exhibit C*).**

Please identify all 3rd party applications required to meet EVMS needs and identify associated costs.

Will you honor state bid pricing?

**GENERAL TERMS and ADDITIONAL PROVISIONS**

Applicable Laws and Courts: This solicitation and any resulting contract shall be governed in all respects by the laws of the Commonwealth of Virginia and any litigation with respect thereto shall be brought in the courts of the Commonwealth. The contractor shall comply with all applicable federal, state and local laws, rules and regulations.

Anti-Discrimination: By submitting their proposals, offerors certify to the Medical School that they will conform to the provisions of the Civil Rights Act of 1964, as amended as well as the Virginia Fair Employment Contracting Act of 1975 as amended, where applicable. If the award is made to a faith-based organization, the organization shall not discriminate against any recipient of goods, services, or disbursements made pursuant to the contract on the basis of the recipient's religion, religious belief, refusal to participate in a religious practice, or on the basis of race, age, color, gender or national origin and may be subject to the same rules as other organizations that contract with public bodies to account for the use of the funds provided.

In every contract, the provisions in 1 and 2 below apply:

1. During the performance of this contract, the contractor agrees as follows:



- a. The contractor will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment, except where there is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
  - b. The contractor, in all solicitations or advertisements for employees placed by or on behalf of the contractor, will state that such contractor is an equal opportunity employer.
2. The contract will include the provision of 1 above in every subcontract or purchase order, so that the provisions will be binding upon each subcontractor or vendor.

Negotiation: The Medical School may award a contract on the basis of initial offers received. Therefore, each initial offer should contain the offeror's best price, service and terms. The Medical School reserves the right to enter contract negotiations with the selected offeror or offerors. If the Medical School and the offeror(s) do not agree to terms of a contract, the Medical School may elect to terminate negotiations and begin negotiating with the second best ranked offeror and so forth. This process will continue until a contract has been executed, or, all proposals have been rejected. No offeror shall have any claims and/or rights against the Medical School arising from such negotiation and/or the proposal process.

Award of Contract: Selection shall be made of one or more offerors deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included in the Request for Proposals. Negotiations shall be conducted with the offeror(s) so selected. After negotiations have been conducted with each offeror so selected, the Medical School shall select the offeror which, in its opinion, has made the best proposal, and shall award the contract to that offeror. The Medical School's decision of whether to make the award(s) and which proposal is in the best interest of the Medical School shall be final.

There is no obligation on the part of the Medical School to award the contract to the offeror who proposes the lowest cost. The Medical School reserves the right to award the contract to the offeror(s) whose proposal is deemed by the Medical School to be the most advantageous in meeting the specifications of the RFP.

Should the Medical School determine in writing and in its sole discretion that only one offeror is fully qualified, or that one offeror is clearly more highly qualified than the others under consideration, a contract may be negotiated and awarded to that offeror. The award document will be a contract and purchase order incorporating by reference all the requirements, terms and conditions of the solicitation and the contractor's proposal as negotiated.

It is the intent of the Medical School to award only one contract. The Medical School, however, reserves the right not to award any or to award multiple contracts, as deemed in the best interest of the Medical School.

The Medical School reserves and holds at its discretion the following additional rights and options:

1. To issue or not reissue subsequent Requests for Proposals
2. Not to select a candidate from those submitting a proposal
3. Not to negotiate a contract for any part of the work
4. To approve, disapprove, or cancel any or all work to be undertaken

Ethics In Contracting: By submitting their proposal, offerors certify that their proposals are made without collusion or fraud and that they have not offered or received any kickbacks or inducements from any other offeror, supplier, manufacturer or subcontractor in connection with their proposal, and that they have not conferred on any Medical School employee having official responsibility for this procurement transaction any payment, loan, subscription, advance, deposit of money, services or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value was exchanged.

Immigration Reform and Control Act of 1986: By submitting their proposals, offerors certify that they do not and will not during the performance of this contract employ illegal alien workers or otherwise violate the provisions of the federal Immigration Reform and Control Act of 1986.

Debarment Status: By submitting their proposals, offerors certify that they are not currently debarred by the Commonwealth of Virginia, from submitting bids or proposals on contracts for the type of goods and/or services covered by this solicitation, nor are they an agent of any person or entity that is currently so debarred. Also, offerors certify that they are not on the Department of Health and Human Services (HHS) and Office of Inspector General's (OIG) monthly list of excluded individuals/entities from providing medical services and supplies to Medicare, Medicaid or other federal health care program participants.

Antitrust: By entering into a contract, the contractor conveys, sells, assigns, and transfers to the Medical School all rights, title and interest in and to all causes of action it may now have or hereafter acquire under the antitrust laws of the United States and the Commonwealth of Virginia, relating to the particular goods or services purchased or acquired by the Medical School under said contract.

Mandatory Use of Terms and Conditions for RFPs: Modification of or additions to the General Terms and Conditions of the solicitation may be cause for rejection of the proposal; however, the Medical School reserves the right to decide, on a case-by-case basis, in its sole discretion, whether to reject such a proposal.

Clarification of Terms: If any prospective offeror has questions about the specifications or other solicitation documents, the prospective offeror should contact Dominick Calgi whose contact information appears throughout this document of the solicitation no later than **5:00 PM EDT on the Final Date for Questions (Exhibit C)**. Any revisions to the solicitation will be made only by addendum issued by the buyer. The reason for the October 26<sup>th</sup> date is so answers to any last minute questions about the RFP and the Advantiv DecisionDirector Response toolkit will be sent

to all respondents prior to the deadline. EVMS expects that most questions about the RFP will be answered by September 24<sup>th</sup> when the Vendors' questions about the RFP are responded to via email to all bidders.

## Payment:

### A. To Prime Contractor:

1. Invoices for items ordered, delivered and accepted shall be submitted by the contractor directly to the payment address shown on the purchase order/contract. All invoices shall show the purchase order number and the contract number.
2. Any payment terms requiring payment in less than 30 days will be regarded as requiring payment 30 days after invoice or delivery, whichever occurs last. This shall not affect offers of discounts for payment in less than 30 days, however.
3. All goods and services provided under this contract/purchase order shall be billed by the contractor at the contract price, regardless of which department is being billed.
4. The date of postmark shall be deemed to be the date of payment in all cases where payment is made by mail.
5. Payments to vendor will be based upon milestones achieved and deliverables received.
6. **Unreasonable Charges.** Under certain emergency procurements and for most time and materials purchases, final job costs cannot be accurately determined at the time orders are placed. In such cases, contractors should be put on notice that final payment in full is contingent on a determination of reasonableness with respect to all invoiced charges. Charges which appear to be unreasonable will be researched and challenged, and that portion of the invoice held in abeyance until a settlement can be reached. Upon determining that invoiced charges are not reasonable, the Medical School shall promptly notify the contractor, in writing, as to those charges which it considers unreasonable and the basis for the determination. A contractor may not institute legal action unless a settlement cannot be reached within sixty (60) days of notification.

### B. To Subcontractor:

1. A contractor awarded a contract under this solicitation is hereby obligated: To pay the subcontractor(s) within seven (7) days of the contractor's receipt of payment from the Medical School for the proportionate share of the payment received for work performed by the subcontractor(s) under the contract; or to notify the Medical School and the subcontractor(s), in writing, of the contractor's intention to withhold payment and the reason.

2. The contractor is obligated to pay the subcontractor(s) interest at the rate of one percent per month (unless otherwise provided under the terms of the contract) on all amounts owed by the contractor that remain unpaid seven (7) days following receipt of payment from the Medical School, except for amounts withheld as stated in (ii) above. The date of mailing of any payment by U.S. Mail is deemed to be payment to the addressee. These provisions apply to each sub-tier contractor performing under the primary contract. A contractor's obligation to pay an interest charge to a subcontractor may not be construed to be an obligation of the Medical School

Precedence of Terms: The following General Terms and Conditions APPLICABLE LAWS AND COURTS, ANTI-DISCRIMINATION, ETHICS IN CONTRACTING, IMMIGRATION REFORM AND CONTROL ACT OF 1986, DEBARMENT STATUS, ANTITRUST, MANDATORY USE OF TERMS AND CONDITIONS, CLARIFICATION OF TERMS, PAYMENT shall apply in all instances. In the event there is a conflict between any of the other General Terms and Conditions and any Special Terms and Conditions in this solicitation, the Special Terms and Conditions shall apply.

Qualifications of Offerors: The Medical School may make such reasonable investigations as deemed proper and necessary to determine the ability of the offeror to perform the services/furnish the goods and the offeror shall furnish to the Medical School all such information and data for this purpose as may be requested. The Medical School reserves the right to inspect offeror's physical facilities prior to award to satisfy questions regarding the offeror's capabilities. The Medical School further reserves the right to reject any proposal if the evidence submitted by, or investigations of, such offeror fails to satisfy the Medical School that such offeror is properly qualified to carry out the obligations of the contract and to provide the services and/or furnish the goods contemplated therein.

Testing and Inspection: The Medical School reserves the right to conduct any test/inspection it may deem advisable to assure goods and services conform to the specifications.

Assignment of Contract: A contract shall not be assignable by the contractor in whole or in part without the written consent of the Medical School.

Changes to the Contract: Changes can be made to the contract in any of the following ways followed by a change order/revised purchase order:

1. The parties may agree in writing to modify the scope of the contract. An increase or decrease in the price of the contract resulting from such modification shall be agreed to by the parties as a part of their written agreement to modify the scope of the contract.
2. The Purchasing Department may order changes within the general scope of the contract at any time by written notice to the contractor. Changes within the scope of the contract include, but are not limited to, things such as services to be performed, the method of packing or shipment, and the place of delivery or installation. The contractor shall comply with the notice upon receipt. The contractor shall be

compensated for any additional costs incurred as the result of such order and shall give the Purchasing Department a credit for any savings. Said compensation shall be determined by one of the following methods:

- a. By mutual agreement between the parties in writing; or
- b. By agreeing upon a unit price or using a unit price set forth in the contract, if the work to be done can be expressed in units, and the contractor accounts for the number of units of work performed subject to the Purchasing Department's right to audit the contractor's records and/or to determine the correct number of units independently; or
- c. By ordering the contractor to proceed with the work and keep a record of all costs incurred and savings realized. A markup for overhead and profit may be allowed if provided by the contract. The same markup shall be used for determining a decrease in price as the result of savings realized. The contractor shall present the Purchasing Department with all vouchers and records of expenses incurred and savings realized. The Purchasing Department shall have the right to audit the records of the contractor as it deems necessary to determine costs or savings. Any claim for an adjustment in price under this provision must be asserted by written notice to the Purchasing Department within thirty (30) days from the date of receipt of the written order from the Purchasing Department.

Disputes: Neither the existence of a claim nor a dispute resolution process, litigation or any other provision of this contract shall excuse the contractor from promptly complying with the performance of the contract generally or with the changes ordered by the Purchasing Department.

Default: In case of failure to deliver goods or services in accordance with the contract terms and conditions, the Medical School, after due oral or written notice, may procure them from other sources and hold the contractor responsible for any resulting additional purchase and administrative costs. This remedy shall be in addition to any other remedies which the Medical School may have.

Taxes: Sales to the Medical School are normally exempt from State sales tax. State sales and use tax certificates of exemption, Form ST-12, will be issued upon request. Deliveries against this contract shall be free of excise or transportation taxes

Use of Brand Names: Unless otherwise provided in this solicitation, the name of a certain brand, make or manufacturer does not restrict offerors to the specific brand, make or manufacturer named, but conveys the general style, type, character, and quality of the article desired. Any article which the Medical School, in its sole discretion, determines to be the equal of that specified, considering quality, workmanship, economy of operation, and suitability for the purpose intended, shall be accepted. The offeror is responsible to clearly and specifically identify the product being offered and to provide sufficient descriptive literature, catalog cuts and technical detail to enable the Medical School to determine if the product offered meets the

requirements of the solicitation. This is required even if offering the exact brand, make or manufacturer specified. Failure to furnish adequate data for evaluation purposes may result in declaring a bid nonresponsive. Unless the offeror clearly indicates in its proposal that the product offered is an equal product, such proposal will be considered to offer the brand name product referenced in the solicitation.

**Transportation and Packaging:** By submitting their proposals, all offerors certify and warrant that the price offered for FOB destination includes only the actual freight rate costs at the lowest and best rate and is based upon the actual weight of the goods to be shipped. Except as otherwise specified herein, standard commercial packaging, packing and shipping containers shall be used. All shipping containers shall be legibly marked or labeled on the outside with purchase order number.

**Insurance:** By signing and submitting a proposal under this solicitation, the offeror certifies that if awarded the contract, it will have the following insurance coverage at the time the contract is awarded. For construction contracts, if any subcontractors are involved, the subcontractor will have workers' compensation insurance in accordance with § 2.2-4332 and 65.2-800 et seq. of the *Code of Virginia*. The offeror further certifies that the contractor and any subcontractors will maintain these insurance coverages during the entire term of the contract and that all insurance coverage will be provided by insurance companies authorized to sell insurance in Virginia by the Virginia State Corporation Commission.

#### MINIMUM INSURANCE COVERAGES AND LIMITS REQUIRED FOR MOST CONTRACTS:

1. *Workers' Compensation* – Statutory requirements and benefits. Coverage is compulsory for employers of three or more employees, to include the employer. Contractors who fail to notify the Medical School of increases in the number of employees that change their workers' compensation requirements under the *Code of Virginia* during the course of the contract shall be in noncompliance with the contract.
2. *Employer's Liability* - \$1,000,000.
3. *Commercial General Liability* - \$1,000,000 per occurrence. Commercial General Liability is to include bodily injury and property damage, personal injury and advertising injury, products and completed operations coverage. The Medical School must be named as an additional insured and so endorsed on the policy.
4. *Automobile Liability* - \$1,000,000 per occurrence. (Only used if motor vehicle is to be used in the contract.)
5. *Professional Engineer* - \$2,000,000 per occurrence, \$6,000,000 aggregate

**Announcement of Award:** Upon the award or the announcement of the decision to award a contract over \$50,000, as a result of this solicitation, the Department of Materials Management

will publicly post such notice in the Purchasing Department “Vendor Waiting Area” and on the EVMS Internet web site at [www.evms.edu](http://www.evms.edu) for a minimum of 10 days.

Drug-Free Workplace: During the performance of this contract, the contractor agrees to provide a drug-free workplace for the contractor’s employees; (ii) post in conspicuous places, available to employees and applicants for employment, a statement notifying employees that the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana is prohibited in the contractor’s workplace and specifying the actions that will be taken against employees for violations of such prohibition; (iii) state in all solicitations or advertisements for employees placed by or on behalf of the contractor that the contractor maintains a drug-free workplace; and (iv) include the provisions of the foregoing clauses in every subcontract or purchase order of over \$10,000, so that the provisions will be binding upon each subcontractor or vendor.

For the purpose of this section, “drug-free workplace” means a site for the performance of work done in connection with a specific contract awarded to a contractor, the employees of whom are prohibited from engaging in the unlawful manufacture, sale, distribution, dispensation, possession or use of any controlled substance or marijuana during the performance of the contract.

Nondiscrimination of Contractors: An offeror or contractor shall not be discriminated against in the solicitation or award of this contract because of race religion, color, sex, national origin, age or disability, faith-based organizational status, any other basis prohibited by state law relating to discrimination in employment or because the bidder or offeror employs ex-offenders unless the Medical School has made a written determination that employing ex-offenders on the specific contract is not in its best interest. If the award of this contract is made to a faith-based organization and an individual, who applies for or receives goods, services, or disbursements provided pursuant to this contract objects to the religious character of the faith-based organization from which the individual receives or would receive the goods, services, or disbursements, the Medical School shall offer the individual, within a reasonable period of time after the date of his objection, access to equivalent goods, services, or disbursements from an alternative provider.

Equal Employment Opportunity (EEO) Clause for Veterans: An offeror or contractor shall abide by the requirements of 41 CFR 60-300.5(a). This regulation prohibits discrimination against qualified protected veterans, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified protected veterans.

Equal Employment Opportunity (EEO) Clause for Individuals with Disabilities: An offeror or contractor shall abide by the requirements of 41 CFR 60-741.5(a). This regulation prohibits discrimination against qualified individuals on the basis of disability, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals with disabilities.

Equal Employment Opportunity (EEO) Clause for Individuals based on Race, Color, Religion, Sex, or National Origin: An offeror or contractor shall abide by the requirements of 41 CFR 60-

1.4(a). This regulation prohibits discrimination against qualified individuals on the basis of race, color, religion, sex, or national origin, and requires affirmative action by covered prime contractors and subcontractors to employ and advance in employment qualified individuals without regard to their race, color, religion, sex, or national origin.

## **SPECIAL TERMS and CONDITIONS**

Advertising: In the event a contract is awarded for supplies, equipment, or services resulting from this proposal, no indication of such sales or services to the Medical School will be used in product literature or advertising. The contractor shall not state in any of its advertising or product literature that the Medical School has purchased or uses its products or services.

Audit: The contractor shall retain all books, records, and other documents relative to this contract for five (5) years after final payment, or until audited by the Medical School, whichever is sooner. The Medical School, its authorized agents, and/or auditors shall have full access to and the right to examine any of said materials during said period.

Best and Final Offer (BAFO): At the conclusion of negotiations, the offeror(s) may be asked to submit in writing, a Best and Final Offer (BAFO). After the BAFO is submitted, no further negotiations shall be conducted with the offeror(s). The offeror's proposal will be rescored to combine and include the information contained in the BAFO. The decision to award will be based on the final evaluation including the BAFO.

Proposal Acceptance Period: Any proposal in response to this solicitation shall be valid for 120 days. At the end of the 120 days the proposal may be withdrawn at the written request of the offeror. If the proposal is not withdrawn at that, it remains in effect until an award is made or the solicitation is canceled.

Proposals received after the proposal due date and time are late and will not be considered. Modifications received after the proposal due date are late and will not be considered. Letters of withdrawal received either after the proposal due date or time, or after contract date, whichever is applicable, are late or will not be considered.

RFP Postponement/Cancellation: The Medical School may, at its sole and absolute discretion, reject any and all, or parts of any or all proposals; readvertise this RFP; postpone or cancel at any time this RFP process; or waive any irregularities in this RFP or in the proposals received as a result of this RFP.

Cancellation of Contract: The Medical School reserves the right to cancel and terminate any resulting contract, in part or in whole, without penalty, upon 60 days written notice to the contractor. In the event the initial contract period is for more than 12 months, the resulting contract may be terminated by either party, without penalty, after the initial 12 months of the contract period upon 60 days written notice to the other party. Any contract cancellation notice shall not relieve the contractor of the obligation to deliver and/or perform on all outstanding orders issued prior to the effective date of cancellation.



Indemnification: Contractor agrees to indemnify, defend and hold harmless the Medical School, its officers, agents, and employees from any claims, damages and actions of any kind or nature, whether at law or in equity, arising from or caused by the use of any materials, goods, or equipment of any kind or nature furnished by the contractor/any services of any kind or nature furnished by the contractor, provided that such liability is not attributable to the sole negligence of the Medical School or to failure of the Medical School to use the materials, goods, or equipment in the manner already and permanently described by the contractor on the materials, goods or equipment delivered.

Accuracy/Competition: By submitting a proposal, offerors certify that all information provided in response to this RFP is true and accurate. Failure to provide information required by this RFP may ultimately result in rejection of the proposal.

Furthermore, the Medical School has broad flexibility in fashioning the details of competition for this RFP. This may include conducting on-line Reverse Auctions for certain products within this RFP or setting price targets as part of follow-on negotiations in order to determine the prices that will be used to evaluate the pricing part of your proposal.

Additional Cost: No service fees or additional costs will be invoiced to the Medical School by the contractor during the term of the contract except as allowed for in the contract.

Method of Payment: EVMS shall pay the selected SIS vendor for services rendered pursuant to this RFP based upon successful completion of the VOIP UCaaS Project milestones. The vendor shall submit monthly invoices itemizing the services performed as of the date of the statement and set forth a progress report, including work accomplished during the period, percent of each milestone/task completed, and planned efforts for the next period. Invoices shall identify personnel who have worked on the services provided, the number of hours each worked during the period covered by the invoice and the percent of the total project completed. The payments prescribed herein shall constitute all compensation to vendor for all costs of services, including, but not limited to, direct costs of labor of vendor's employees, travel and lodging expenses, telephone charges, copying and reproduction, computer time, and any and all other costs, expenses and charges of vendor, its agents and employees.

## QUESTIONS and CONCERNS

Should you have any questions regarding the material contained in this RFP, please contact Dominick Calgi prior to **5:00 PM EDT on Final Date for Questions (*Exhibit C*)** via email at [calgidr@evms.edu](mailto:calgidr@evms.edu). Amendments and changes will be issued to all respondents.

EVMS will not be liable for any expenses incurred by any vendor in response to this RFP.

***Furnishing all information requested is required. Failure to provide such information shall be considered non-responsive and may result in automatic disqualification of vendor to***

*participate in the RFP process. Proposals which are substantially incomplete or lack key information may also be rejected.*

## **RESTRICTIONS on COMMUNICATIONS with EVMS STAFF**

*Respondents and their employees/agents are not permitted to communicate with any other EVMS staff regarding this RFP with the exception of contacting Dominick Calgi at [calgidr@evms.edu](mailto:calgidr@evms.edu). If a vendor is found to be in violation of this restriction, EVMS reserves the right to reject their response.*

## **RESPONSE to THIS RFP**

Please respond to/complete this RFP by **5:00 PM EDT on the RFP Due Date (Exhibit C) into DecisionDirector.**

Sign and attach the “**Addendum: Authorization Signature on behalf of VOIP Telephone Vendor**” found on page 27 of this RFP into the appropriate section in DecisionDirector by following the instructions within DecisionDirector.

Remember to also upload your completed **Costs and Pricing spreadsheet** on the attached spreadsheets (**Exhibit E): EVMS VOIP Pricing Worksheets**, by **5:00 PM EDT on the RFP Due Date (Exhibit C) into DecisionDirector.**

**Addendum: Authorization Signature on behalf of VOIP Telephone Vendor**

This Request for Proposal (RFP) must be signed with the full name and address of the company submitting the response; if a co-partnership, by a member of the firm with the name and address of each partner member; if a corporation, by the duly authorized officer thereof in the corporate name. In an effort to have a paperless submission, please sign this addendum and attach a PDF copy of this addendum in the **“KP: Addendum: Authorization Signature”** section for this in **DecisionDirector**.

In compliance with this Request for Proposal and to all the conditions imposed therein and hereby incorporated by reference: including General Terms and Additional Provisions, and Special Terms and Conditions; the below-named individual submitting and signing this RFP offers and agrees to furnish the goods/services in accordance with this proposal or as mutually agreed upon by subsequent negotiation, and that his/her signature attests the information and answers provided in this response to this RFP are accurate, complete and final.

Name and Address of Firm: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_ By: \_\_\_\_\_  
 Signature (In Ink – I certify that I am authorized to sign this proposal)

\_\_\_\_\_  
 \_\_\_\_\_ Name (Please Print)

\_\_\_\_\_  
 \_\_\_\_\_ Title

\_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone No.: \_\_\_\_\_

FEI/FIN No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

DUNS No.: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Exhibit A: EVMS Satellite Offices**

Department	Site Location	System	Installation	PBX Vendor	MAC/WO vendor	Digital	Analog
Urogynocology	880 Kempsville Rd., Suite 2900, Norfolk, VA 23502	Samsung OfficServ 7030 Phone System	12/2017	Vicom	Vicom	3	1
Hague Club Apartments	604 Fairfax Ave, Apt A, Norfolk, VA 23507	POTS lines, no system, cordless phones	Unknown	Schick	Schick	3	1
Radiation Oncology	SNGH - 600 Gresham Drive, 1st floor, Norfolk, VA 23507	Mitel SX-200 IP Phone System	08/2006	Schick	Schick	8	2
Radiology Residency	SNGH - 600 Gresham Drive, 1st floor, Norfolk, VA 23507	Off of Sentara's phone system	Unknown	Unknown	Unknown	5	1
Otolaryngology - River Pavilion	SNGH - 600 Gresham Drive, Suite 1100, Norfolk, VA 23507	Off of Sentara's phone system	Unknown	Unknown	Unknown	58	7
Emergency Medicine	SNGH - 600 Gresham Drive, Suite 304, Norfolk, VA 23507	Off of Sentara's phone system	Unknown	Unknown	Unknown	8	1
Maternal-Fetal Medicine (Riverside)	10852 Warwick Blvd, Newport News, VA 23601	Mitel MiVoice Office IP Phone System	04/2017	BCS	BCS	31	3
Portsmouth Family Medicine	3460 High Street, Suite 2F, Portsmouth, VA 23707	Mitel MiVoice Office IP Phone System	03/2018	BCS	BCS	50	8
ODU	4111 Monarch Way, Suite 500, Norfolk, VA 23508	Off of ODU's phone system	05/2007	Unknown	Unknown	65	11
Fetal Diagnostic Unit	SNGH - 600 Gresham Drive, 5th floor, Norfolk, VA 23507	Off of Sentara's phone system	Unknown	Unknown	Unknown	4	1
OBGyn - SPAH	2075 Glenn Mitchell Drive, Suite 500, Virginia Beach, VA 23456	Avaya IP Office Phone System	08/2012	MABC	MABC	55	4
Office of Development	Fort Norfolk Plaza, 301 Riverview Ave, Suite 120, Norfolk, VA 23510	Icon IX-5930 IP Phone System	09/2014	Schick	Schick	27	2
Otolaryngology - SPAH	2075 Glenn Mitchell Drive, Suite 310, Virginia Beach, VA 23456	Alcatel-Lucent IP Phone System	01/2015	Schick	Schick	15	4
PM&R - Neuroscience	Fort Norfolk Plaza, 301 Riverview Ave, Suite 200, Norfolk, VA 23510	NEC 1100 IP Phone System	09/2016	Schick	Schick	5	1
Dermatology - SPAH	1950 Glenn Mitchell Drive, Suite 208, Virginia Beach, VA 23456	Unknown	Unknown	Schick	Schick	13	2
Jones - Newport News	729 Thimble Shoals, Newport News, VA 23606	Unknown	3/2007	Schick	Schick	5	2
					<b>TOTAL</b>	<b>355</b>	<b>51</b>

**Exhibit B : EVMS Campus Map**



EVMC\_Map.pdf

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**Exhibit C: VOIP Telephone System Project Timetable**

Event	Date
1. RFP Distribution to Vendors	July 31, 2018
2. Questions from Vendors about RFP due	September 14, 2018
3. Vendors Conference Call & Site Visits (appointment required)	Sept. 17 - 21, 2018
4. Responses to Vendors Questions about RFP due	September 24, 2018
5. Final Date for Questions , Clarification, etc. on RFP	October 26, 2018
6. RFP Proposal Due Date	October 31, 2018
7. Review RFPs and Vendor Selection Discussion – Month of	November 2018
8. Shortlisted Vendors' Proof of Function Demonstrations	December 2018
9. Anticipated decision and selection of Vendor	January 2019
10. Anticipated commencement date of work	First Quarter 2019

**Exhibit D: Business Associate Agreement**



Business Associate Agreement Final 9-23-2013.pdf

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**Exhibit E: EVMS VOIP Pricing Worksheets**

**VOIP Deployment Options Costs+Pricing 20180730.xlsx**