

D. Company Background

RR-D-01 Please provide the following information regarding the makeup of your company.

CORPORATE INFORMATION

Company Name: **ICANotes**

Company Type (C-Corp, S-Corp, LLC, LLP, Sole Proprietorship, Etc.): **LLC**

Location Of Corporate Headquarters: **1600 St. Margaret's Road, Annapolis, MD 21409**

Location Of Field Support Offices: **Same**

Location Of Programming/Technical Support Personnel **Same**

PRIMARY CONTACT INFORMATION FOR THIS RFI

Name: **Ira Morganstern, M.D.**

Title **Vice President in charge of Development, Co-Founder**

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E-Mail Address: **ira@icanotes.com**

Internet Home Page: **www.icanote.com**

RR-D-02 Provide an overview of your firm and its history. Describe the strength of your firm and its ability to meet the needs of California's behavioral health recipients and providers. (2 pages maximum)

ICANotes the company has one software product; the ICANotes program, which assists mental health clinicians in making, storing and retrieving their clinical notes, including Progress Notes, Initial Evaluations, Discharge Summaries, and Treatment Plans.

The ICANotes software was first offered for sale in 1999, and began offering an Internet version in 2004. At the present time approximately 1000 individuals subscribe to the internet version and almost two million clinical notes have been made with the assistance of the program. Some users are solo practitioners;

others are part of groups including clinics, private group practices, in-patient psychiatric units, IOPS, county mental health clinics, substance abuse facilities and others. A wide variety of mental health clinicians use ICANotes, including Psychiatrists, Counselors, Clinical Social Workers, Nurse Practitioners, Mental Health Nurses, Mental Health Technicians, Psychologists, Art Therapists and Group Therapists.

The main strength of the ICANotes software is its clinical utility. Ten years of constant development guided by feedback and requests from users has resulted in software that is highly intuitive, quick to learn and use, and has many useful features. It is highly modifiable by the end user. As a tool, ICANotes meets with a high degree of approval from its clinical end users.

Furthermore, the notes that are created with the assistance of ICANotes meet with a high degree of approval from surveyors of all sorts. The notes are highly legible, professionally formatted, do not read as if written by a computer, and are highly individualized for the specific patient. The notes are written in grammatical English and are detailed and thorough.

Notes created in ICANotes also meet with the approval of mental health administrators. The notes are designed to meet strict Medicare documentation standards and as a consequence meet all accreditation standards. The design of ICANotes allows rapid compliance with new documentation standards. Furthermore, ICANotes automatically arrives at the correct Medicare/Medicaid Service code (e.g. 99232) by keeping track of what documentation elements are in the note and the level of medical decision making.

By eliminating transcription expenses and by automatically arriving at the highest permissible service code ICANotes typically more than pays for itself.

RR-D-03 List the number of employees (Full-time equivalents) in your organization by category
For the last 3 years:

Category	2006	2007	2008
Total Employees	6*	7*	8*
Installation / Setup	1	1	1
Research and Development	3	3	3
Application / Technology Support	1	1	2
Customer Service / Helpdesk	1	2	2

*** Please Note: These numbers are understated. For example, our servers are housed in a professional datacenter. The support staff of the datacenter is not included in these numbers. Similarly, we use the services of a Filemaker Consulting Company and the consulting services of an I.T. Company, whose employees are not included in these numbers.**

Those with Clinical Backgrounds:

Physicians			
Psychologists			
Psychiatrists	1	1	1
Registered Nurses			
Other Clinicians			

RR-D-04 Has your company acquired or merged with any other organizations in the past three years? If so, please list each organization and the purpose behind such activity.

No

RR-D-05 How long has your company been in the business of developing and implementing your Electronic Health Record related products?

Nine Years

RR-D-06 What were your firm's annual revenues for the last 3 fiscal years?

Category	2005	2006	2007
\$1,000,000 to \$5,000,000	X	X	X
\$5,000,000 to \$25,000,000			
\$25,000,000 to \$100,000,000			
Greater than \$100,000,000			

RR-D-07 What percentage of your firm's annual revenue directly resulted from behavioral health care solutions during the past 3 fiscal years?

Category	2005	2006	2007
Percentage of Annual Revenue Resulting from BH Solutions	100%	100%	100%

RR-D-08 What percentage of annual revenue did your company expend for research and development (R&D) on your proposed products during the last 3 fiscal years?

Category	2005	2006	2007
Percentage of Annual Revenue Expended on R&D	30%	30%	30%

RR-D-09 What percentage is budgeted for R&D in the current and next fiscal year?

Category	2008	2009
Percentage of Annual Revenue Budgeted for R&D	30%	30%

E. Partner and/or Reseller References

RR-E-01 Please list any partners and/or resellers in the areas of behavioral health: Strategic or tactical development, sales, support, delivery, consulting, or training.

No Partners or resellers

RR-E-02 For each partner or reseller listed above, please identify the following:

1. Functional areas.
2. Nature of partnership/relationship.
3. Length of the relationship.
4. Reference-able customers for whom you have jointly provided services.
(3 pages maximum)

F. Behavioral Health Solutions Experience

RR-F-01 Describe your firm's experience and qualifications in design, development, and implementation of Behavioral Health Practice Management systems. Practice Management Function Requirements Includes registration, eligibility, accounts receivable, accounts payable, billing, documentation, and reporting these requirements. Addresses the complex financial and administrative needs of physician practices. These requirements will help County Mental Health Departments formulate the criteria needed to provide critical support for practice management functions to increase productivity, improve financial performance, financial management and compliance programs, and determine legal implications of business arrangements.

ICANotes is a clinical program and does not attempt to perform business functions such as billing. However, ICANotes does create a variety of reports that provide the exact information that business oriented software requires. For example, ICANotes provides for any given date or range of dates a billing report which includes the patient's name, unique number, date of service, service code, place of service and provider.

ICANotes, as will be explained elsewhere, is easily able to integrate with any modern database. Therefore, the information described above can be

automatically and instantaneously sent to the billing software of your choice. As a consequence, the user of ICANotes can enjoy the advantages of it first rate clinical strengths while also enjoying the advantages of selecting the business oriented software that best meets its needs.

RR-F-02 Describe your firm's experience and qualifications in design, development, and implementation of Behavioral Health Clinical Data Management systems.

(5 pages maximum)

Clinical Data Function Requirements

Includes clinical documentation such as assessment, treatment notes, and other clinical measures (such as data elements and corresponding definitions) that can be used in the measurement of patient clinical management and outcomes, and for research and assessment. Clinical documentation elements also help facilitate communication across provider types to enhance communication and improve coordination of care.

Clinical Documentation is what ICANotes does. For the past ten years developers at ICANotes have been responding to the suggestions of clinicians so that a myriad of useful features have been included in the program. Approximately 1000 users, including groups of all sorts, have been assisted in implementing ICANotes in their practices.

As noted above in the company's history, ICANotes helps clinicians make Progress Notes, Initial Evaluations, Discharge Summaries, and Treatment Plans. Clinical notes made with ICANotes are widely heralded as being professionally formatted, highly detailed, textually correct, clinically relevant, and individualized for the specific patient. Notes made with ICANotes do not appear to have been composed with the assistance of a computer.

There are specialized sections of ICANotes so that notes can be made by the entire spectrum of mental health clinicians. Supported disciplines include Psychiatrists, Counselors, Clinical Social Workers, Nurse Practitioners, Mental Health Nurses, Mental Health Technicians, Psychologists, Art Therapists and Group Therapists.

Treatment Plan interventions are provided for Psychiatrists/NPs, Counselors, Group Therapists, Dieticians, Nurses, and Team Leaders.

A search function allows the ICANotes database to be mined for clinically relevant material. Searchable data elements include Patient Name, Gender, Age, Religion, Ethnicity, Current Medications, and Diagnoses. This is highly useful in designing clinical programs and for research projects.

The records made with ICANotes by members of a group or clinic are all contained in the same "filing cabinet" and are highly accessible by all members of the group with the privileges to access them. Different members of the group can have access to the same record at the same time (although they cannot work on the same "page" at the same time.) Clinical records are kept in a "chart" in chronological order, so that all notes made for a specific patient are available to

all clinicians with the correct privileges. This helps ensure appropriate communication and coordination of care across clinical disciplines and between treatment team members.

Special features of ICANotes include Interactive Algorithm support, Logs (Medication changes, Prescriptions written, Lab requests, and Lab results), a “Rx Called In” documenter, Telephone Messages support, Form Letters, the ability to scan paper documents into the electronic note, a Scheduler, Prescription printing or faxing, a Suicidal/Violence Assessment tool, a Level of Care documenting tool, automatic “black box” Warnings for Psychotropics, Electronic Signature and locking software, the ability to fill in Forms, an Electronic AIMS form and reminder when due, a Managed Care Monitor and reminder to call for authorization, automatic calculation of the highest permissible Medicare/Medicaid Evaluation/Management Service Code.

RR-F-03 Describe your firm’s experience and qualifications in design, development, and implementation of Computerized Provider Order Entry (CPOE) systems.
(5 pages maximum)

Computerized Provider Order Entry (CPOE) Function Requirements

Includes internal and external laboratory, pharmacy and/or radiology ordering and history display. These requirements address optimizing physician ordering of medications, laboratory tests with interactive decision support systems. Integration with other hospital information technology systems including electronic patient records, pharmacy, laboratory, and other services provides the prescriber with all information necessary to develop and transmit in an effective, error-free order.

ICANotes has a robust interface engine (ConnectMate) in place with support for HL7 integration using ADT, ORU, and PVT message types. It also has the capability to accommodate other HL7 message types or other protocols. Detailed documentation of the HL7 specifications is available. As a consequence of this integration capability, ICANotes can quickly integrate with CPOE system.

RR-F-04 Describe your firm’s experience and qualifications in design, development, and implementation of interoperable Electronic Health Record (EHR) systems.
(5 pages maximum)

Full Electronic Health Record (EHR) Requirements

Includes infrastructure, health record capture, decision support, reporting, data transfer and CPOE components that are interoperable with external systems such as those used by contracted providers using industry standards.

As previously noted, ICANotes has a robust interface engine (ConnectMate) in place with support for HL7 integration using ADT, ORU, and PVT message types. It also has the capability to accommodate other HL7 message types or other protocols. Detailed documentation of the HL7 specifications is available. As a consequence of this integration capability ICANotes can quickly integrate with any third party business or practice management software. We are currently integrated with OfficeAlly, CollaborateMD, and EPIC.

RR-F-05 Describe your firm's experience and qualifications in design, development, and implementation of Personal Health Record (PHR) systems.

(5 pages maximum)

Full EHR and Personal Health Record (PHR) Requirements

Includes full EHR functionality and interoperability with a Personal Health Record system.

ICANotes stands ready to integrate with any PHR system. As noted, ICANotes has a robust interface engine (ConnectMate) in place with support for HL-7 integration using ADT, ORU, and PVT message types. It also has the capability to accommodate other HL 7 message types or other protocols. Detailed documentation of the HL7 specifications is available. As a consequence of this integration capability ICANotes can quickly integrate with any third party business or practice management software. We are currently integrated with OfficeAlly, CollaborateMD, and EPIC.

RR-F-06 Describe your firm's experience and qualifications for Systems Integration.

(3 pages maximum)

Once again, ICANotes has a robust interface engine (ConnectMate) in place with support for HL7 integration using ADT, ORU, and PVT message types. It also has the capability to accommodate other HL7 message types or other protocols. Detailed documentation of the HL7 specifications is available. As a consequence of this integration capability ICANotes can quickly integrate with any third party business or practice management software. We are currently integrated with OfficeAlly, CollaborateMD, and EPIC.

RR-F-07 Describe your firm's experience and approach to the conversion of electronic behavioral health data.

(1 page maximum)

ICANotes has on numerous occasions imported existing electronic data from a different database program into the ICANotes program. Methods vary and depend on the ability of the existing program to export its data and the data format supported. ICANotes prefers that data be in XML but can easily import a wide variety of data formats including flat text files and CSV.

Once the data it is converted into a workable format it is imported using proprietary tools into the appropriate fields.

RR-F-08 Describe your firm's experience and approach to the conversion of paper-based behavioral health data.

(1 page maximum)

We are frequently asked how to convert a paper based record into ICANotes. There are two possibilities. The first is to scan the paper record and upload it into the new, ICANotes electronic record. This method is completely supported by ICANotes. However, this is a time intensive procedure and we typically suggest that the paper record be stored and the electronic record started at a given date.

Then, should a record made prior to the inception of the electronic record system need to be consulted, the stored paper is retrieved manually and consulted.

Of course, the second solution to converting paper records into electronic records is that the information in the paper record be recreated in electronic format using the input method supported by ICANotes. That is, the paper record is re-created in ICANotes by using ICANotes' buttons or by typing or dictating.

G. Solution Product History

RR-G-01 Please provide the following information about the solution product(s) that you propose.

# Product Name And Primary Function	When First Developed	When / Where First Deployed	Number Of Installations To Date
ICANotes, Software mental health clinicians use to create a variety of clinical notes and reports	1999	Internet Version deployed in 2004	Approx. 1000 users of Internet version

RR-G-02 For each solution product listed in the above table, please provide:

1. The history of the product including whether the product was internally developed or acquired from another source.

As previously noted, the ICANotes Company has one product: ICANotes, software mental health clinicians use to create a variety of mental health notes. It came onto the Market in 1999 and its internet version began in 2004. Currently approximately 1000 individuals use the internet based program, some of whom are individual clinicians and many of whom are members of clinical groups such as Community and County Mental Health Clinics, PHPs, IOPs, In Patient Psychiatric Units, group private practices.

ICANotes was internally developed and continues to be developed and supported internally.

2. The specific Industry standards that the product was designed to, including any exceptions to those standards.

ICANotes was designed to follow Medicare/Medicaid documentation standards. Headings are those specified by those standards. For example, the section of the note devoted to a review of general psychiatric symptoms is headed, "Problem Pertinent Review of Symptoms", a Medicare term. The chief complaint is in the patient's own words, the elements of the Mental Status Exam are those required by Medicare and Medicaid, and so forth.

Since Medicare documentation standards are the most rigorous and most clearly

defined of any certifying agency, it has been our experience that ICANotes notes easily meet all other documentation standards. Furthermore, by adhering to Medicare/Medicaid documentation standards, ICANotes is able to self-code, using the Medicare/Medicaid Evaluation/Management service codes.

3. Whether the product is CCHIT certified.

- a. If the product is CCHIT certified, for which category and year is it certified?
Examples would be "Ambulatory 2006", "Ambulatory 2007", etc.

CCHIT certification for specialty EHRs is not yet offered and ICANotes is, therefore, not yet CCHIT certified.

- b. If the product is not CCHIT certified, do you plan to acquire CCHIT certification and if so, in which category and when?

ICANotes will obtain CCHIT certification as soon as it is offered for specialty EHRs.

RR-G-03 How are enhancement and new release priorities determined?

Upgrades or new releases, as such, are not issued by ICANotes. Reason is that new features and enhancements are incorporated into the program at the ICANotes server, and are available to the user when they next log in to and use the program.

Enhancement priorities are determined by clinical usefulness and utility. ICANotes enjoys the services of a full time psychiatrist, who is one of the founders of the company and helps set feature priority based on his many years of clinical experience.

Also, development has, since the inception of the company, been driven by the requests and suggestions of users.

RR-G-04 How are clients supported during the release of an enhancement?

Enhancements and new features are announced to users in a variety of ways. For one, ICANotes maintains a blog (<http://blog.icanotes.com>) where enhancements and new features are announced and described. Also, an ICANotes Newsletter is sent by email to ICANotes users, with further announcements of new features. Finally, instructions and directions are often incorporated into the layout of the program itself.

Support and training is free and unlimited and provided on a group or individual basis via an interactive internet and telephone connection. Furthermore, ICANotes provides an extensive library of training videos (<http://www.icanotes.com/look.html>) for training purposes and in support of new features.

RR-G-05 Describe the size of the installed base of your solution. Include the number of users and the number of sites where the product is installed.

As previously mentioned, ICANotes has approximately 1000 users representing approximately 200 sites, varying in size from single clinicians to clinics where as many as 30 clinicians share the ICANotes program. It should be noted that, in a sense, ICANotes serves 1000 users simultaneously and that because its components are highly scalable there is essentially no limit to the number of users it can serve.

RR-G-06 Describe any regularly-held seminars or user group meetings available to users of your product and the time/place of the next gathering.

ICANotes does not provide this service.

H. Solution Product Technologies
Software Technologies

RR-H-01 Provide the technologies used for each solution product identified above.

Product Name	Product Type (Client Server, Web, Etc.)	Operating System (Windows, Unix, Linux, Etc.)	Database (SQL Server, Oracle, DB2, Etc.)	Application Language (VB6,VB.Net, C, C++, C#, Java Etc.)
1				
2				

ICANotes is a Web based Application. At the user's end only Windows Terminal Services is required. The following Operating Systems are supported: Microsoft Windows 2000/XP/Vista, Macintosh OS 10.4.9 or higher. Linux

Server Hardware Minimum Specifications

RR-H-02 In the following table, please provide the minimum server hardware technical specification levels for operation of your solution software products. Please consider all types of possible servers such as: database, fax, email, internet, backup, image management, etc.

N/A. Because the ICANotes system is Internet Based, end users do not need Servers. All users require are computers with any recent operating system (Microsoft Windows 2000/XP/Vista, Macintosh OS 10.4.9 or higher. Linux) and Windows Terminal Services installed. The latter is a free program. Connection to the ICANotes servers is via the Internet.

Client Hardware Minimum Specifications

RR-H-03 In the following table, please provide the minimum client hardware technical specification levels for operation of your solution software products. Please consider all types of client types including workstations, tablet PCs, PDAs, Browser

PDA's are not supported because the screens are not large enough to accommodate the ICANotes work screens. Tablet PCs, however, are well suited for use with ICANotes. Tablet PC handwriting recognition works with ICANotes, as does Dragon Voice Recognition software.

Any computer that can browse the internet has sufficient memory and processing speed to work well with ICANotes. The following operating systems are supported: Microsoft Windows 2000/XP/Vista, Macintosh OS 10.4.9 or higher, Linux . A minimum screen resolution of 800x600 is required.

A browser is not required.

RR-H-04 Provide the minimum peripheral hardware technical specification levels for operation of your solution software products. Please consider all types of peripherals such as printers, scanners, card readers, notepads, etc.

Any printer that works with the user's computer is supported by ICANotes. That is, the completed clinical note made by the web based ICANotes can be printed locally on the printer that the local computer uses.

Minimum Network/Communication Specifications

RR-H-05 Provide the minimum network/communication technologies employed by your solution software products.

As noted, ICANotes is an internet based program and therefore a broadband internet connection is a necessity. TCP/IP network connectivity is required with a minimum throughput of 56 kb/s per client.

System Backup/Recovery Considerations (Not to exceed 4 pages)

RR-H-06 Describe the system backup process for your core product.

See RR-H-08 below

RR-H-07 Can backup be completed in a dynamic mode so that the system can be operation 24 hours per day?

See RR-H-08 below

RR-H-08 Describe any automated backup features that allow rapid and unattended backup system and operational data on a user-scheduled basis.

As previously noted, ICANotes is an internet based system. The program and data reside on servers maintained and serviced by the ICANotes company. Back-up is one of the services provided by the ICANotes company in accord with company policies and procedures and therefore there is no user control over the back up system.

However, for information purposes, ICANotes is automatically backed up using proprietary back up software and procedures every fifteen minutes. Off site back ups occur daily. Back ups occur invisibly to the end users and do not interfere with operation of the system.

Back up of the Clinical Data: Back up of clinical data is automatically and electronically performed every fifteen minutes on-site (to a mirrored hard drive that performs only this function) and daily to an off-site location. The data sent to the off site location is encrypted before transmission, where it is burned onto CDs in the encrypted state and securely stored in a fireproof safe.

RR-H-09 Can the system be configured to support improved fault tolerance and system recovery (e.g., mirrored disk drives/servers)?

N/A since configuration is supplied by the ICANotes on its internet based computers. ICANotes configures its servers to provide maximum fault tolerance and in support of rapid system recovery. For example, RAID drives and redundant servers are in place.

Data Archiving Considerations
(Not to exceed 4 pages)

RR-H-10 What are the capabilities for archiving data?

See RR-H-12 below.

RR-H-11 What are the capabilities for restoring archived data?

See RR-H-12 below.

RR-H-12 What tools/media are used for archiving data?

Archiving back ups is a service provided by the ICANotes company.

As noted above, back ups of all data occurs every fifteen minutes. These back ups are stored for one week. A weekly back up is made and stored for one month. A

monthly back up is made and stored indefinitely. At present, there are no plans to ever destroy data. Archived data is encrypted before storage and stored on a RAID array of hard drives for rapid restoration, if needed. Restoration of data is managed by ICANotes personnel in accord with the specific restoration needs. Written procedures are in place and emergency recovery drills are regularly held.

System Interface Considerations
(Not to exceed 3 pages)

RR-H-13 Describe your overall approach to developing, testing, implementing, and upgrading system interfaces to other third-party systems. Describe the process you use to settle disputes over interfaces between your solution and others.

Preparing interfaces to and integrating with third party systems is, we have found, a highly individualized process which has become easier as interfaces have become standardized. We follow HL7 3.6 specifications for which we maintain documentation. These are capable of modification as necessary. The process of integration is a compromise and disputes, such as naming disputes, are settled on a case by case basis, If necessary, semi automatic ranking is used. However, these disputes are at the heart of the integration process and are routinely managed.

The testing of integrations are done in the usual fashion; that is, by a period of bench testing followed by a period of beta testing. When the system has, in the opinion of staff, been sufficiently tested it is released to users with the usual implementation of training.

RR-H-14 With what version of HL7 is your product compliant?

HL7 2.X

Data Security Considerations
(Not to exceed 3 pages)

RR-H-15 Discuss your approach to data/information security, especially with regards to Internet technologies. What level of encryption and authentication is supported?

Because ICANotes is an internet program...that is, the program and the data is stored on servers housed and maintained in Data Centers by the ICANotes company and that data is accessed by users via the internet..., security and in particular security in regard to internet technologies is a central concern of the ICANotes company.

ICANotes strictly adheres to HIPAA Security Standards; Final Rule. Feb. 2003([\)](http://www.wedi.org/snip/public/articles/HIPAA_Security_Final_Rule_Official_Version.)

The confidentiality of the medical information stored on the ICANotes server must be protected at three main points;

1. Risk Identified: During information transmission, particularly those between the local computer and the host computer over the internet during the use of ICANotes Internet Services. Packets of information can easily be intercepted by unauthorized third parties and, unless encrypted, can be read.

RISK MANAGEMENT PLAN For Protection of data during information transmission

The data that is sent and received from the ICANotes server is 128 bit encrypted. That is the highest level of encryption allowed by law and for all practical purposes is considered unbreakable. This prevents data from being intercepted and read during transmission from and to the clinician. The encryption algorithm for the secure connection is RC4-128.

2. In the case of Internet Version the Host Computer (and the information therein contained) must be protected against unauthorized access.

Unauthorized access may occur in three Ways:

A. : Risk Identified: Physical Access to the Host computer and information therein. An individual with physical access to the host computer may find ways to bypass electronic safeguards.

RISK MANAGEMENT PLAN for Protection against Physical Access

The ICANotes host computers are housed in a professional datacenter, FSIWebs, Glen Rock, N.J. where physical security measures, extra power systems, and other redundant safeguards are in place and where 24 hour staff support is available.

(See Security Regulations: FSIWEBS).

Only authorized personnel are allowed physical access to the host computer. This facility was visited by the Security Officer and the CEO, who were shown and experienced the security measures that are taken.

ICANotes Personnel who are authorized to visit the host computers have been selected by Security Officer in accord with Security Clearance Procedures. (See Security Clearance Procedures, below)

A record of the movement of all equipment which at any time contained PHI shall be kept, and measures taken for the protection of the PHI during the move reported to the executive committee.

A record shall be kept of the disposal of equipment which at any time contained PHI, including a report to the Executive Committee of measures taken to remove PHI prior to disposal.

B. Identified Risk: Unauthorized electronic access must be prevented. The ICANotes Servers are partially open to the Internet. An intruder who can electronically access the ICANotes host computer could obtain unauthorized medical information.

RISK MANAGEMENT PLAN For Unauthorized Electronic Access:

Terminal services is our only entry point to our system from the internet.

Only someone with the correct User Name and Password can enter the ICANotes database. The “strength” of the password (the number of characters and the type of characters) can be controlled, as desired by the ICANotes Company.

User Password Policy: A minimum six digit password consisting of mixed alpha and numeric characters, to be changed every 6 months.

Network Administrators Password Policy: A minimum 8 digit password consisting of mixed alpha and numeric characters (at least one of which has been capitalized) set to be changed every 70 days.

In the unlikely event that an unauthorized user was able to access the Terminal Server, the ICANotes’ User Name and Password are still required for entry to patient records. The User Name/Password are not subject to “brute force” methods of attack because the program freezes for some minutes after three incorrect entries are attempted. Outgoing web and ssl ports will periodically and briefly be opened up to permit the application of Microsoft updates to both servers, one server at a time. All other outgoing ports are blocked at all times. The restriction of outgoing traffic adds redundant security to our network.

C. Internal Security. Staff may obtain unauthorized access to PHI.

RISK MANAGEMENT PLAN for Internal Security Security Clearance Procedures: Each Staff Members Security Level is set by the Security Officer’s determination that the staff member needs to access those areas as part of job function. Furthermore, before being authorized to any security level the staff member must be fully trained in the **HIPAA Security Compliance: Policies and Procedures**, must have signed the Employee Security Agreement, (see below) and must have met Hiring Security Regulations. (See below.)

Staff Security Levels are as follows:

- Security Level 1: Have no access to Host Computers**
- Security Level 2: Have access to Host computers but user name and password do not permit access to PHI.**
- Security Level 3: Have access to Host computers and to PHI**
- Security Level 4: Level 3 plus Administrative privileges to access Host Computers operating systems and services.**

Hiring Security Procedures: Because ICANotes personnel

have the opportunity to obtain unauthorized PHI and to sabotage systems operations, their moral character must be judged. No personnel shall be permitted access to PHI unless their moral character is known to the ICANotes company. Towards this end the principals of ICANotes have, to date, hired individuals well known or related to them, or have given access only to individuals who's moral character and professional business practices are known to them, as a result of business relationships of some standing. References are carefully checked with moral character in mind.

Employee Security Breach Sanctions: Purposeful breach of security, except when a necessary part of the work process, shall result in termination of employment

Termination Security Procedures: At termination of Employment it shall be the responsibility of the Security Officer to cancel all passwords, user names and other authentication processes that allows that terminated employee to access ICANotes company host computers and, in particular, PHI.

Staff Security and Security Awareness Training: : All employees shall undergo security training by the Security officer on being hired and every six months thereafter. Training shall be scheduled, done and documented by the Security Officer.

Employee Security Agreement

At the time of training a new Employee Confidentiality Agreement shall be signed by trained employee and kept filed in the ICANotes company office.

Scalability Considerations
(Not to exceed 3 pages)

RR-H-16 Describe your product's ability to expand to accommodate increasing numbers of users, servers, etc.

The ICANotes system is designed to be entirely scalable. That is, additional users of any number can easily be accommodated by simply increasing the number of servers, all of which are configured identically.

RR-H-17 Provide any performance metrics that describe the maximum load(s) under which your system can continue to perform at an optimum level

We have found that our system continues to perform at optimum levels up to the maximum number of simultaneous users (250 per FileMaker Server) is reached. At that time, (in practice, well before that time) the addition of another server is required and easily managed, as described above. Through experience we have learned how many Terminal Servers are required to achieve maximum performance and we consistently exceed that number so as to ensure that maximum loads can be managed with optimum efficiency.

RR-H-18 It is possible that many counties will want to work with the same vendor. How would your company mitigate the impact from potentially high-volume purchases from multiple counties in California? Include in your answer the need to hire additional staff, increase locations and the possible impact to implementation and training schedules, and problem response times.

ICANotes currently has the resources to setup 50 users per day. Training is self paced with ample descriptive and highly detailed training videos. Currently 15 such videos are available on the ICANotes website. Also, ICANotes maintains a toll free helpline to assist new users via live web meetings . Alternative on-site training supervision is available through special arrangement.

Customization of unique forms requires 2 weeks development.

Our current workforce is ample to serve well beyond our current work loads and we do maintain strategic relationships with companies that are training specialists. Should additional staff be warranted, we have a reservoir of trained consultants available for staff augmentation.

A provisional office in San Francisco has been established and can be made permanent within a short time.

At no time will additional clients be enrolled unless there are sufficient resources to serve them without degrading service to existing customers.

J. Implementation Planning
(Not to exceed 5 pages.)

RR-J-01 Describe your suggested best-practice approach to implementing your solution. Please include details regarding data conversion and training, and how these activities contribute to your suggested approach.

We have found that it is best to familiarize staff with the program via demonstrations to the group prior to individual training efforts, with the emphasis on ease of use and the clinical and administrative advantages of the program. In this manner the implementation of the program will be anticipated favorably by users. Similarly, if staff has taken an active part in the selection of the program this will also predispose them to have a favorable attitude toward training and implementation. A staff that has been properly prepared and eagerly awaits the time when they can begin learning and using the ICANotes program is the best guarantee of an orderly and rapid implementation.

It is important to set a go-live date for the implementation of the program, after which point staff knows that the program must be used. We suggest that a one month period be selected during which training will occur and after which all clinical notes are made with the ICANotes program.

Training itself varies from one individual to the next. We take pride in the fact that ICANotes is intuitive to use, and many users simply sign on and begin using it, learning it as they go. Other users find our training material useful. By training material we refer to the fifteen training videos available on our web site, describing all aspects of the program's features.

For those users who require or request it, we provide individual training sessions. These are conducted via web meetings in which the same screen may be seen and controlled by both the user and the trainer, while they conduct a telephone conversation. In this way the user can be guided and directed as he or she uses the program. Or, the trainer can demonstrate the correct use or special features of the program.

Such individualized training sessions are included in the basic fee for ICANotes and are unlimited in length or number.

Follow up monitoring is an important part of the training and implementation process. With the permission of the facility, ICANotes personnel will review notes made by users. Based on a review of those notes users may be offered individual feedback regarding proper use of the program or information about special features of the program.

Data conversion is, of course, best performed before the go live date of the program and is addressed as a separate topic.

RR-J-02 What is the typical implementation timeframe for your solution? Express your answer as a range (6 to 12 months, 1 to 2 years, etc.) qualified by a size-of-project; factor such as number of users, total project cost, etc. An example would "6 to 12 months for a total project cost not exceeding \$500,000" etc. Please feel free to share any metrics that you typically use to estimate the timeframe for the implementation for your solution.

Regardless of the size or cost of the project, we would expect implementation within two months of a contract being signed. We have a great deal of excess capacity and our system is highly scalable, so the time needed to make any needed additions to our hardware is minimal. Also, the time required to set up users so that they can access and begin using our Internet based system is negligible. The only bottleneck is the training of users which is, of course, labor intensive when individualized training is needed. However, our experience has been that most users can self learn the program using our extensive and detailed video library, given the intuitive quality of our program. Should additional staff be needed for live training we have a reservoir of trained consultants available for staff augmentation Also, to date we have not had to go out of our company to meet training needs but should the need arise we have identified resources to

meet that contingency.

K. Training and Documentation

Training

(Not to exceed 2 pages)

RR-K-01 Describe the types of training offered, i.e., end-user, systems administrator, installer, etc.

Please see RR-J-01 above. Please note that installers and system administrators are not needed, except to maintain an adequate internet connection and to perform some basic initial procedures (such as ensuring that all work place computers have Windows Remote Desktop Connection installed.) An easily installed icon, delivered by email, is all that is need for a connection to occur.

RR-K-02 How often is training offered (as needed, or on a set calendar schedule)?

Please see RR-J-01 above. Individual, live training is offered on an as needed basis.

RR-K-03 Please give the duration of each class, the location of training and the recommended number of people that should attend training.

Please see RR-J-01 above. Individual training is provided via net meetings. Duration and frequency are flexible.

RR-K-04 Please describe if training is classroom style with an instructor, one-on-one, computer-based training, self-study, etc.

Please see RR-J-01 above. Individual training, when needed, is one-on-one via net meetings.

RR-K-05 Who provides the training: employees of your company or sub-contractors?

Employees of the company provide the training, although potential training sub contractors have been identified should exigencies require their use.

RR-K-06 Do you provide clinician-specific training?

Yes, ICANotes is used by a variety of clinical disciplines, including psychiatrists, nurses, group therapists, and counselors. Training videos and individual sessions are targeted to each such discipline.

RR-K-07 Do you provide fiscal-specific training related to billing Short-Doyle Medi-Cal in California?

At present we do not. If necessary we may include this in our training curriculum.

RR-K-07 Describe the documentation (both system and training) provided as part of standard installation approach including:

1. Manager and user reference manuals (applications).
2. User operator/system administrator manuals.
3. Hardware/OS manuals.
4. Network and Security.
5. Training manuals (initial and ongoing user self-training).

Please note that documentation and training of operators and system administrators and documentation of hardware/OS manual and Network and Security features are not needed. Because ICANotes is an internet based program these functions are performed by ICANotes personnel.

Manager and user reference material consists entirely of a series of training videos of which there are currently fifteen. These detailed videos describe all aspects of ICANotes' use and features and have proved useful and durable.

RR-K-08 Is the documentation available:

1. In hardcopy?
2. On CD-ROM?
3. On the Local Area Network?
4. On the Internet?

As noted, documentation in the form of training videos is available on our website, www.icanotes.com.

RR-K-09 How often is your documentation updated? How often are updates made available to the user? How is documentation updated (memo, revised manuals, on-line, CD, etc.)?

Documentation in the form of our training videos is updated on an as-needed basis. When new features require that the videos be updated, the update occurs by creation of a new video.

RR-L-01 Do proposed acquisition and/or ongoing maintenance/support costs include:

1. Future enhancements to acquired/licensed application modules?
2. Operating system and related environmental software?
3. Interface maintenance?
4. Architectural changes such as migration to emerging technologies and new methods of systems deployment?

If not, describe the conditions and terms under which enhancements/new releases are made available to existing customers.

As previously noted, there are no acquisition costs associated with ICANotes. It is paid for on a monthly subscription basis and the monthly fee includes any and all enhancements, architectural changes, interface maintenance, etc.

Also, because ICANotes is an internet program residing on company servers and maintained and service by ICANotes, new releases as such do not occur. Instead, new features are added to the program as they are developed and are available to users immediately after they are incorporated into the program.

There is no additional fees associated with the release of new features, although the ICANotes company retains the right to levy an additional fee for a new feature in the rare instance when a third party might levy a per user license fee for the use of a feature. To date, this has not occurred and all new features, including the recent addition of a scheduler, have been offered with no new or additional fees levied.

However, the maintenance of the user's work place computer, including possible upgrades to its operating system, and the maintenance of a broadband internet connection is the responsibility of the subscribing entity (ie, the Clinic).

RR-L-02 What are your normal support hours (specify time zone)? Where is support staff located?

Support staff are currently located on both coasts. Normal support hours are 5 am Pacific Time until 9 PM Pacific time. Emergency support is provided 24 hours per day, in that server status is automatically monitored and emergency notification and support is provided.

RR-L-03 Which of the following support features are available? Check all that apply:

1. Toll-free hotline **Available via toll free number, as described above.**
2. Remote monitoring **Available**
3. Remote diagnostics **N/A**
4. Training tutorials **Available**
5. Web-based support tracking **Available**
6. 24x7 software support **Please see RR-L-02 above**
7. 24x7 hardware support **Available**

RR-L-04 Provide the response time for problems reported during:

1. Regular business hours.

Under ordinary circumstances problem reports are received immediately by support personnel on duty. How long it takes to have the problem fixed depends, of course, on the nature of the problem.

2. Off-hours.

As previously noted, Emergency support is provided 24 hours per day, in that server status is automatically monitored and emergency notification and support is provided. Otherwise, off duty reports of problems are responded to during working hours which are 5 am Pacific Time until 9 PM Pacific time.

RR-L-05 Describe your problem reporting software and tools. Are they available via the Internet? Can a list of outstanding problems and enhancements by client be viewed on-line and downloaded?

Problem reporting software and tools are not required by users because ICANotes is an internet based software solution.

Reports of problems and enhancements are managed in a number of ways by ICANotes. For one, ICANotes maintains a developer's blog (<http://blog.icanotes.com/>) where problems and enhancements and new features are reported. Also, an ICANotes email newsletter is used to describe enhancements and new features and problems. Finally, when needed, announcements are posted on the ICANotes log-in screen.

RR-L-06 Describe your firm's approach to software maintenance agreements. Include how, and at what frequency, your firm provides maintenance and upgrade services in support of your system products.

As previously noted, upgrades, as such, are not needed with ICANotes. That is because ICANotes is an internet based software solution. The program and the data resides on servers under the control of the ICANotes company and do not reside on user's computers or servers. All users connect to the ICANotes software via the internet.

When an enhancement or a new feature has been tested and deemed ready for use it is simply incorporated into the program. Users have access to the enhancement or feature the next time they log on to the program.

Maintenance and enhancement to the ICANotes program is a continual process that has not stopped for ten years. Most of the enhancements and new features have been driven by user suggestions and requests.

M. Cost and Licensing (Not to exceed 3 pages)

RR-M-01 Describe your pricing and/or licensing models based on the various product functionalities listed above Do not provide specific pricing in your response, but information on how pricing is derived is pertinent. Examples of pricing models may be: module-based pricing, package or suite pricing, single price package, subscription based, package plus maintenance,

etc.

ICANotes is subscription based. That is, each user pays a monthly fee for the use of the program. The amount of the monthly fee is determined by whether or not the clinician-user prescribes medication, with the non prescribing clinician paying a lower fee. A different, and lower fee, is paid by clerical, administrative or other non clinical staff that need access to the program.

Users are determined on a full time equivalent basis. For example, two half time employees would be charged the same as one full time employee.

Subscription is on a monthly basis; there is no annual contract.

There is a one time start up fee, but this is transferable to another user should the original user no longer need access to the program.

RR-M-02 List any programs your corporation currently participates in, in which you provide a single pricing and licensing model for a large customer with decentralized purchasing (public or private sector), and functional descriptions of that model. Examples of this type of

**Cumberland County Mental Health Department, John Lesica, M.D. - 910-323-0601
The McGrath Clinic, Harold McGrath, M.D.708-226-1360
MSA Child and Adolescent, Martin Slutsky 443-259-0400
Rum River Counseling, Drew Holdridge - 763-482-9598**

O. Project References

RR-O-01 Provide a minimum of three (3) previous implementations of your solution that most closely approximate a CA County Behavioral Health setting. Include a California reference if available. Provide names and contact information of individuals who have sufficient experience to speak knowledgeably concerning:

1. The implementation process.
2. System functionality.
3. Vendor support.
4. Documentation.
5. Training.
6. Overall customer satisfaction.

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N. Risks and Issues

(Not to exceed 3 pages)

RR-N-01 It is fully expected that Counties will encounter risks/issues that they must manage and mitigate. Please identify the risks/issues that a County is most likely to

encounter when implementing your solution. Please include examples from prior implementations of your solution.

The greatest risk to users of the ICANotes system is that they will not have access to their records. This risk is, perhaps, greater because access to records is via an internet connection. However, experience has shown that the internet itself is robust and has never failed. When problems exist they are at either end of the system.

At the user's end, the internet connection may fail because of local service provider problems, such as failed switches. These have occurred to some of our users but have become increasingly rare. Working with a responsible and responsive internet provider is the best way to prevent or minimize such service interruptions.

At ICANotes' end there are a number of reasons for system failures during which the ICANotes server was down and records were unavailable. In the past such failures have included a Datacenter power failure from a severe thunderstorm. Also, technical problems have on occasion resulted in loss of service, typically from errors or problems incurred during system upgrades or from freak occurrences like the occasion when a technician inadvertently disconnected the power supply to all servers.

Happily, such occurrences have been rare and ICANotes has been up and active for 99.9% of the time for the monitoring period December 1, 2007 to December 1, 2008. Furthermore, outages when they occur have as a rule been brief, and usually amounting to minutes.

Furthermore, system monitors are in place so that any interruption in service is immediately and automatically reported on an emergency basis with 24 hour day coverage. Redundant servers and other system components and procedures for rapid transfer to back up equipment serve to minimize the time when data is unavailable.

Of course, for facilities that print their notes and maintain paper records, unavailability of the record is not an issue. For facilities that prefer to go paperless, CD copies of their records are available for a fee. A system whereby a completely synchronized and up to date record may be stored locally is under development.