

COUNTY OF MARIN



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF ADMINISTRATION AND PLANNING**

**REQUEST FOR PROPOSALS (RFP)
Version 1**

Strategy Team: CalAIM

RFP-HHS-2026-16

DATE ISSUED:

August 25, 2026

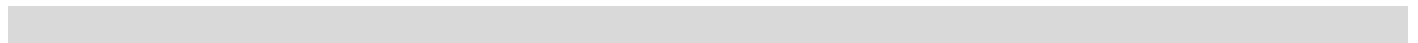
DEADLINE FOR SUBMISSIONS:

September 24, 2026 before 3:00PM

The County of Marin Health and Human Services Department does not discriminate on the basis of sex, race, color, religion, age, sexual orientation, disability, marital status, national origin, citizenship status, genetic information, gender identity and expression, AIDS/HIV, medical condition, political affiliation, military or veteran status, or status as a victim of domestic violence, assault, or stalking in employment or in its educational programs and activities. Requests for disability accommodations may be made by phoning (415) 473-4381(Voice), CA Relay 711 or by e-mail at disabilityaccess@marincounty.org.

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I. BACKGROUND

A. County of Marin Department of Health and Human Services (HHS)

Marin County is located in the San Francisco Bay Area, immediately north of the Golden Gate Bridge. Covering 520 square miles, the County is home to approximately 262,321 residents. Most residents live in urban areas along the Highway 101 corridor within 11 incorporated cities and towns, while rural communities are primarily located in West Marin.

Marin County has one of the highest median household incomes among California's 58 counties. According to the [2022 County Health Rankings & Roadmaps](#) report by the University of Wisconsin and the Robert Wood Johnson Foundation, Marin ranks among the healthiest counties in the state, scoring highly in areas such as quality of life, clinical care, and social and economic factors. At the same time, the [Race Counts](#) report identifies Marin as having some of the largest racial disparities in California across health, housing, income, and education.

The Department of Health and Human Services (HHS) is committed to promoting and protecting the health, well-being, self-sufficiency, and safety of all Marin County residents. HHS plays a critical role in providing safety net services, including those for individuals who are uninsured, enrolled in Medi-Cal or Medicare, or in need of crisis services.

The [2025–2028 HHS Strategic Plan](#), Future Forward: Redefining Health and Wellness in Marin County, outlines key priorities and commitments to guide the department's work. The plan emphasizes:

- Using data to identify and address disparities
- Engaging communities in shaping solutions
- Supporting staff and partners in delivering culturally responsive services
- Collaborating across sectors to reduce barriers and promote equity-driven change

These commitments are organized around five strategic priorities:

1. **Advance Racial Equity** – Lead with race to address and reduce systemic disparities
2. **Improve Community Conditions and Services** – Expand access to inclusive, place-based services
3. **Foster Community Partnerships** – Strengthen collaboration and trust with community organizations
4. **Optimize Workforce** – Build and support a diverse, resilient HHS workforce
5. **Boost Data Collection and Analysis** – Leverage data to support equity and continuous improvement

This strategic plan reflects both the department's ongoing efforts and the input of community members, staff, and partners. It builds on prior achievements while setting a course for equitable and effective health and human services delivery throughout Marin County.

Currently, Marin HHS splits its operations across disconnected legacy software platforms, running a specialized system for in-custody Detention Health workflows and another standalone application for community-based Behavioral Health and Recovery Services (BHRS). To dismantle these structural data silos, streamline care navigation, and implement California's modern health equity transformations, Marin HHS is executing this procurement for a unified, integrated enterprise Electronic Health Record (EHR) solution.

Only one proposal may be submitted from a single proposer. Collaborative proposals that show a strong inter-agency partnership to develop a robust program that does not lead to duplicative or fragmented services are highly desirable.

When preparing a proposal in response to this request, please:

- Carefully read the entire RFP document before you start and make sure that all procedures and requirements of the RFP are accurately followed and addressed.
- Review answers to questions posted by proposers (Pre-Submittal Conference and/or questions and answers from website), as noticed in this document.
- Carefully review the entire proposal prior to submittal and use the checklist provided in this RFP to make sure everything has been completed as instructed.
- Submit a complete proposal by the required deadline.

A. Checklist:

- Attachment A: Marin County Cover Page
- Attachment B: Marin County HHS EHR RFP Matrix Spreadsheet
- Attachment C: Marin County HHS Budget EHR 5 Year TCO Template
- Attachment D: Marin County HHS RFP EHR Scoring Tool
- Attachment E: Non-Collusion Affidavit

II. PROJECT DESCRIPTION AND EXPECTATIONS

A. Project Period

The contract award will be made on a competitive basis. The anticipated contract period is 60 months from (tentatively) 4/1/2027 to 3/31/2032. The County reserves the right to: increase or decrease the contract amount, fund the proposed service in whole or in part, and terminate or extend the program/contract based on funding availability.

B. Available Funding

Funding for this initiative will be supported through a combination of grant funding and organizational resources. The County has identified funding for the project, which may include a combination of grant funding received through the Department of Health Care Services' [Providing Access and Transforming Health \(PATH\)](#) and County funds. Respondents should provide a detailed and transparent cost proposal that identifies all one-time implementation costs, recurring subscription or licensing fees, billing rates for software support and commitment period, third-party costs, and any optional services or modules. Cost proposals should clearly distinguish between required and optional components and identify any assumptions that may impact pricing over the course of the implementation. The organization reserves the right to negotiate project scope, implementation approach, and pricing based on available funding, project priorities, and the selected solution.

C. Target Population

The target audience for this system comprises Marin County HHS staff members, with the ultimate goal of serving local residents. The primary user groups and beneficiaries include:

- Marin County residents: A total population of approximately 262,321 residents.
- Behavioral Health and Recovery Services Unit: Dedicated staff members within this unit.
- Public Health Division: Staff members operating across various public health programs.
- Social Services Unit: Staff members delivering essential social services.

The target population encompasses all residents engaging with Marin County's safety-net infrastructure, specifically focusing on complex multi-sector and vulnerable cohorts:

- Individuals in custody within the Marin County Jail requiring 24/7/365 acute clinical, nursing, and psychiatric care.
- Justice-involved individuals transitioning back into the community who are eligible for 90-day pre-release Medi-Cal screening and services.
- Vulnerable populations enrolled in Enhanced Care Management (ECM) and Community Supports (e.g., individuals experiencing chronic homelessness, complex medical-behavioral co-morbidities, or high-utilizer profiles).
- Low-income families, youth, and individuals receiving services via Public Health, Maternal and Child Health, Ryan White Case Management, and specialized county network programs.

D. Project Description

The County of Marin requires a comprehensive, ONC-certified, and modern relational database EHR architecture that unifies physical health, substance use disorder (SUD) tracking, case management, and financial revenue cycle operations into a secure framework. The selected solution must scale across external networks of contracted Community-Based Organizations (CBOs) and feature clinical partitions, automated multi-party electronic consent workflows, and strict compliance engines built for California's intersecting health-and-justice regulations.

E. Intended Outcomes, Goals, or Objectives:

In alignment with the County's mission to promote and protect the health, well-being, safety, and self-sufficiency of everyone in Marin, the ideal solution will serve as a central hub within a scalable, interconnected care ecosystem designed to seamlessly ingest, integrate, and query data across a network of connected partners, spanning the behavioral health (mental health and substance use disorders), justice, housing, and human services sectors

- **Interoperability Compliance:** Fulfill 21st Century Cures Act Interoperability, Information Blocking standards, and the ONC Health IT Certification Program Final Rule via open FHIR APIs.
- **Equitable Access Tracking:** Leverage embedded Sexual Orientation and Gender Identity (SOGI) data capture and language localization for the patient portal, client-facing forms, and consumer materials in the County's threshold languages to identify, track, and remedy service access disparities across racial, cultural, and demographic cohorts.
- **Continuity of Care:** Establish automated, bidirectional (or maximum vendor-supported interface capabilities, depending on the recipient system's API constraints) integrations with the Tiburon Jail Management System (JMS), regional Health Information Exchanges (SacValley MedShare), local Community Information Exchanges (CIE), and state outpatient EHR networks (SmartCare) to be verified functional prior to system go-live.
- **CalAIM Service Delivery:** Maintain real-time population health registries and risk-stratification rules to operationalize Enhanced Care Management (ECM) populations of focus and 90-day pre-release services efficiently and in strict compliance with California DHCS operational timelines.
- **Comprehensive Revenue Cycle Management (Billing):** Establish a fully integrated, Medicare and California Short-Doyle Medi-Cal compliant billing system capable of processing 837P/837I claiming formats, auto-mapping procedure codes to provider credentials, downloading Monthly MEDS Electronic Files (MMEF), and exporting the financial and operational data fields required to populate state cost reports.
- **In-Custody Detention Health Operations:** Deploy a fully secure, role-based correctional clinical workflow engine that supports continuous 24/7/365 intake health screenings, shift handoffs, and acute episodic clinical charting, while maintaining structural data partitioning between general custody nursing and jail mental health staff. The application must support resilient local caching or offline charting capabilities during facility network disruptions.
- **Closed-Loop Medication Management (Pharmacy & eMAR):** Deploy an electronic Medication Administration Record (eMAR) system tailored for correctional facilities that supports controlled substance e-prescribing, tracks patient medication consents, interfaces with third-party jail pharmacies, and coordinates the continuity of prescription dispensing upon an inmate's release into the community.

F. Reporting, Performance, and Analytics Requirements

This section establishes the core data infrastructure, self-service business intelligence (BI) expectations, and analytics framework for the unified EHR platform. To ensure data-driven decision-making, strict programmatic compliance, and proactive population health management, the County requires an enterprise solution that guarantees absolute data autonomy, unrestricted query access, and frictionless reporting interoperability.

The selected vendor must demonstrate mature, native capabilities across three core data layers:

- **Enterprise & Population Health Analytics** : Interactive dashboards featuring predictive trend tracking, longitudinal cohort outcome analysis, real-time facility census monitoring, and regional payer denial trend tracking.
- **Supervisory & Operational Workspaces** : Real-time administrative insights including provider productivity metrics, panel-management trackers, and automated unfinalized note flags, backed by configurable automated subscription routing.
- **Autonomous BI Access & Data Availability** : Secure, direct relational database or data lake access (via SQL, OData, or dedicated views) paired with a comprehensive data dictionary. The data layer must expose form configurations and clinical answer metrics in queryable tabular or JSON schemas, allowing County analysts to utilize external tools (i.e. Power BI/Tableau) without incurring data extraction surcharges, proprietary licensing dependencies, or mandatory vendor engineering interventions.

Mandatory Instructions to Proposers

Proposers must not respond to or provide descriptive narratives for these technical criteria within this text document.

The complete, granular list of reporting, analytics, database architecture, and technical support specifications is detailed strictly within the Analytics & Reporting tab of Attachment-B: **Marin County HHS EHR RFP Matrix Spreadsheet**. Proposers are required to complete all fields in that matrix according to the conformance codes and narrative constraints set forth in Section IX of this RFP.

III. REQUIREMENTS AND EXPECTATIONS FOR GRANTEEES

If you are an organization that does not meet these requirements independently, consider partnering with an organization that does.

A. Summary of Contract Terms, Conditions and Requirements

The contractor shall be required to comply with the Americans With Disabilities Act of 1990, Sections 504 and 508 of the Rehabilitation Act of 1973 as amended, and all other applicable Federal and State accessibility laws and regulations; this Request for Proposal RFP-HHS-2026-16; and the terms and conditions required by the original funding source for the programs and services described by this RFP. Contractor shall comply with any and all Federal, State and local laws and resolutions: including, but not limited to the County of Marin Nuclear Free Zone, Living Wage Ordinance, and Board of Supervisors Resolution #2005-97 prohibiting the off-shoring of professional services involving employee/retiree medical and financial data affecting services covered by this RFP.

B. Insurance Requirements for Agreements Involving Information Technology

Vendor shall procure and maintain for the duration of the contract insurance against claims for security breaches, system failures, injuries to persons, damages to software, or damages to property (including computer equipment) which may arise from or in connection with the performance of the work hereunder by the Consultant, its agents, representatives, or employees. Vendor shall procure and maintain for the duration of the contract insurance claims arising out of their services and including, but not limited to loss, damage, theft or other misuse of data, infringement of intellectual property, invasion of privacy and breach of data.

MINIMUM SCOPE AND LIMIT OF INSURANCE

Coverage shall be at least as broad as:

1. Commercial General Liability (CGL): Insurance Services Office Form CG 00 01 covering CGL on an "occurrence" basis, including products and completed operations, property damage, bodily injury and personal & advertising injury with limits no less than \$2,000,000 per occurrence. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this project/location (ISO CG 25 03 or 25 04) or the general aggregate limit shall be

twice the required occurrence limit.

2. Automobile Liability: Insurance Services Office Form Number CA 0001 covering, Code 1 (any auto), or if Consultant has no owned autos, Code 8 (hired) and 9 (nonowned), with limit no less than \$1,000,000 per accident for bodily injury and property damage.

3. Workers' Compensation insurance as required by the State of California, with Statutory Limits, and Employer's Liability Insurance with limit of no less than \$1,000,000 per accident for bodily injury or disease. (Not required if consultant provides written verification, it has no employees)

4. Cyber Insurance, with limits not less than \$5,000,000 per occurrence or claim, \$5,000,000 aggregate. Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by vendor in this agreement and shall include, but not be limited to, claims involving security breach, system failure, data recovery, business interruption, cyber extortion, social engineering, infringement of intellectual property, including but not limited to infringement of copyright, trademark, trade dress, invasion of privacy violations, information theft, damage to or destruction of electronic information, release of private information, and alteration of electronic information. The policy shall provide coverage for breach response costs, regulatory fines and penalties as well as credit monitoring expenses.

- **Technology Professional Liability Errors & Omissions** If Vendor is providing a technology service (data storage, website designers, etc.,) or product (software providers) this coverage is also required.

- Technology Professional Liability Errors and Omissions Insurance appropriate to the vendor's profession and work hereunder, with limits not less than \$5,000,000 per occurrence. Coverage shall be sufficiently broad to respond to the duties and obligations as is undertaken by the vendor in this agreement and shall include, but not be limited to, claims involving security breach, system failure, data recovery, business interruption, cyber extortion, social engineering, infringement of intellectual property, including but not limited to infringement of copyright, trademark, trade dress, invasion of privacy violations, information theft, damage to or destruction of electronic information, release of private information, and alteration of electronic information. The policy shall provide coverage for breach response costs, regulatory fines and penalties as well as credit monitoring expenses.
 - a) The Policy shall include, or be endorsed to include, property damage liability coverage for damage to, alteration of, loss of, or destruction of electronic data and/or information "property" of the Agency in the care, custody, or control of the vendor. If the vendor maintains broader coverage and/or higher limits than the minimums shown above, the County of Marin requires and shall be entitled to the broader coverage and/or the higher limits maintained by the vendor. Any available insurance proceeds in excess of the specified minimum limits of insurance and coverage shall be available to the County of Marin.

Other Insurance Provisions

The insurance policies are to contain, or be endorsed to contain, the following provisions:

Additional Insured Status

The County of Marin, its officers, officials, employees, and volunteers are to be covered as insureds on the CGL policy with respect to liability arising out of work or operations performed by or on behalf of the vendor including materials, parts, or equipment furnished in connection with such work or operations.

Coverage can be provided in the form of an endorsement to the vendor's insurance, at least as broad as ISO Form CG 20 10 11 85 or both CG 20 10 and CG 20 37 forms if later revisions used. For Vendors ISO Form CG 20 15 12 19 is acceptable.

Primary Coverage

For any claims related to this contract, the vendor's insurance coverage shall be primary and noncontributory, with coverage at least as broad as ISO CG 20 01 12 19 as respects the County of Marin, its officers, officials, employees, and volunteers. Any insurance or self-insurance maintained by the County of Marin, its officers, officials, employees, or volunteers shall be excess of the vendor's insurance, including any excess policies, and shall not contribute with it.

Umbrella or Excess Policy

The vendor may use Umbrella or Excess Policies to provide the liability limits as required in this agreement. The policies shall be provided on a true "following form" or broader coverage basis, with coverage at least as broad as provided on the underlying CGL insurance.

Notice of Cancellation

Each insurance policy required above shall state that coverage shall not be canceled, except with notice to the County of Marin.

Waiver of Subrogation

Vendor hereby grants to County of Marin a waiver of any right to subrogation which any insurer of said vendor may acquire against the County of Marin by virtue of the payment of any loss under such insurance. Vendor agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation, but this provision applies regardless of whether or not the County of Marin has received a waiver of subrogation endorsement from the insurer.

Self-Insured Retentions

Self-insured retentions must be declared to and approved by the County of Marin. The County of Marin may require the Vendor to purchase coverage with a lower retention or provide proof of ability to pay losses and related expenses within the retention. The policy language shall provide, or be endorsed to provide, that the self-insured retention may be satisfied by either the named insured or County of Marin.

Acceptability of Insurers

Insurance is to be placed with insurers authorized to conduct business in the state with a current A.M. Best's rating of no less than A-:VII, unless otherwise acceptable to the County of Marin.

Claims Made Policies

If any of the required policies provide coverage on a claims-made basis:

1. The Retroactive Date must be shown and must be before the date of the contract or the beginning of contract work.
2. Insurance must be maintained, and evidence of insurance must be provided for at least five (5) years after completion of the contract of work.
3. If coverage is canceled or non-renewed, and not replaced with another claims-made policy form with a Retroactive Date prior to the contract effective date, the Consultant must purchase "extended reporting" coverage for a minimum of five (5) years after completion of contract work.

Verification of Coverage

Vendor shall furnish the County of Marin with original certificates and amendatory endorsements or copies of the applicable policy language effecting coverage required by this clause. All documents are to be received and approved by the County of Marin before work commences. However, failure to obtain the required documents prior to the work beginning shall not waive the vendor's obligation to provide them. The County of Marin reserves the right to require complete, certified copies of all required insurance policies, including endorsements required by these specifications, at any time.

Subcontractors

Vendor shall require and verify that all subcontractors maintain insurance meeting all the requirements stated herein, and vendor shall ensure that County of Marin is an additional insured on insurance required from subcontractors.

Special Risks or Circumstances

County of Marin reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

Insurance can be waived in some instances by submitting Exhibit C – attached to a Professional Services Contract.

Some valid reasons for waiving insurance include:

- No employees/ sole contractor – Workers Comp can be waived
- Not driving on county business or on county property – Auto Insurance can be waived
- Not a certified/ licensed "professional" – certain professional liability can be waived

C. Administrative and Legal Requirements

1. Vendors will be paid on a monthly basis, following the submission of an invoice for services performed to County's satisfaction. Specific instructions will be provided to the vendor upon award of a contract. Services will be reimbursed for contracted services provided on the monthly invoices, not to exceed the total contract amount. It is the responsibility of the vendor to track expenditures and any services provided by contractor and/or subcontractors. Expenses that exceed the allocation will not be reimbursed.
2. This RFP and any resulting agreement, contract, and purchase order shall be governed by all applicable federal, state and local laws, codes, ordinances and regulations, including but not limited to, those promulgated by CAL-OSHA, FED-OSHA, EPA, EEOC, DFEH, the California State Department of Health Services, and the County of

Marin. All matters and subsequent contract shall be governed by, and in accordance with, the substantive and procedural laws of the State of California. The applicant agrees that all disputes arising out of or in connection with the Professional Services Contract and the procurement process shall be construed in accordance with the laws of the State of California and that the venue shall be in Marin County, California.

3. Nuclear Free Zone: The County is a nuclear free zone, in which work on nuclear weapons or the storage or transportations of weapons-related components and nuclear material is prohibited or appropriately restricted. The County is prohibited or restricted from contracting for services or products with, or investing County funds in, any nuclear weapons contractor.
4. Non-Appropriations: The County's performance arising from this RFP process is contingent upon the availability of funds. Should funds not be appropriated or otherwise made available to the County, any contract entered into pursuant to this RFP will be terminated with respect to any payments for which such funds are not available.
5. Vendor must be legally authorized to conduct business in the State of California and have established administrative and program resources to provide services in Marin County. The vendor must also have appropriate federal, state and local permits or certifications necessary to perform the services that are the subject of this RFP.
6. Prior to executing a contract, the applicant (and any subcontractors/partners) must be able to provide the following written policies and procedures that comply with and are otherwise acceptable to the federal, state and local statutes, laws, regulations, and ordinances:
 - a. Conflict of interest policy for staff and governing boards, if applicable.
 - b. Grievance procedure for customers and clients.
 - c. Does not discriminate against nor deny employment or services to any person on the grounds of race, color, religion, sex, national origin, age, disability, citizenship, political affiliation or belief.
 - d. Complies with the 1990 ADA, the Americans with Disabilities Act, Sections 504 and 508 of the Rehabilitation Act of 1973 as amended, and all other applicable Federal and State accessibility laws and regulations.
7. Applicants must have proven fiscal capacity including capacity for fund accounting.
8. Applicants must have access to non-County funds sufficient to cover any disallowed costs that may be identified through the audit process.
9. Applicants must agree that state, federal, and local monitors or auditors may review provider facilities and relevant financial and performance records to ensure compliance with funding requirements.
10. Applicants must be eligible to receive Federal funds.
11. Applicants must comply with the Levine Act and all applicable laws regarding political campaign contributions.
12. Contractors must comply with all reporting requirements set forth by the Marin Department of Health and Human Services and the State Department of Health Care Services.
13. Applicants must have the demonstrated ability to collect outcome data, which measure performance to plan.
14. If applicable, Contractor shall maintain medical records required by the California Code of Regulations. Notwithstanding the foregoing, Contractor shall maintain beneficiary medical and/or clinical records for a period of ten (10) years, except that the records of persons under age eighteen (18) at the time of treatment shall be maintained: a) until one (1) year beyond the person's eighteenth (18th) birthday or b) for a period of ten (10)

years beyond the date of discharge, whichever is later.

15. Contractor agrees to administer/utilize any and all survey instruments as directed by the County Department of Health and Human Services, including outcomes and satisfaction measurements if applicable. Contractors must also comply with all reporting requirements set forth by the Department of Health and Human Services and the State Department of Health Care Services, including, but not limited to, completion of cost reports, annual provider self-audits and site visits.
16. Cultural Competency: All program staff shall receive at least four hours of in-service training per year on some aspect of providing culturally and linguistically appropriate services. At least once per year and upon request, Contractor shall provide County with a schedule of in-service training(s) and a list of participants at each such training. Programs should implement National Culturally and Linguistically Appropriate Services (CLAS) Standards.

Applicants who do not meet these minimum requirements may be deemed non-responsive and may not receive further consideration. Any proposal that is rejected as non-responsive will not be evaluated and no score will be assigned.

IV. Tentative Time Schedule

All applicants are hereby advised of the following schedule and will be expected to adhere to the applicant- related deadlines below:

RFP Advertised	August 25 2026
RFP Released to Prospective Applicants	August 25 2026
Question/Answer Period Opens	August 25 2026
Pre-Proposal Conference	September 3 2026
Question/Answer Period Closes	September 10 2026 before 4:01PM
RFP Answers Posted	September 15 2026
RFP Due	September 24 2026 before 3:00PM
Proposal Review and Selection Process (Tentative)	September 18 -November 20, 2026
Notification of Intent to Award (Tentative)	November 23 2026
Protest Period (Tentative)	December 7-11 2026 4:01 PM
Public Announcement (Tentative)	December 14 2026
Board of Supervisors contract approval* (Tentative)	March 16 2027
Contract Start Date** (Tentative)	April 1 2027

*Date subject to Board of Supervisors schedule and County budget and contract processes.

**Contract start date is contingent upon the approval of the Board of Supervisors.

V. PROPOSAL INSTRUCTIONS

In responding to the RFP (the submission is hereinafter referred to as “proposal”) use the outline as it appears below and label your responses accordingly. If the total number of pages exceeds the parameters stated below, the additional pages will be discarded and will not be reviewed by the Proposal Review Committee. A non-response will result in disqualification of the Proposal. Ensure that all applicable fields are completed and that the cover page is signed.

A. Cover Page (Attachment A – See template)

Complete and sign the attached Cover Page (Attachment A) to the County of Marin. Include (1) Legal Name of

Individual or Organization Submitting Letter of Interest, (2) Address, (3) Telephone Number and E-mail, (4) Contact Person, (5) Contact Person's E-mail Address, (6) Type of Organization, if applicable, (7) Date of Submission, (8) Federal Tax ID, and (9) Funding requested.

B. Applicant Capability (Limit 6 pages per Proposal)

Instructions to Proposers

While the Marin County HHS EHR RFP Matrix Spreadsheet validates individual functional checkboxes, this Narrative Section is your opportunity to pitch your system's operational philosophy, enterprise architecture, and partnership model.

Your responses must go beyond feature summaries. For each section below, provide a cohesive, high-level overview detailing *how* your solution orchestrates these complex environments and how your organization plans to support Marin County as a long-term strategic partner. **Proposers must explicitly cross-reference the exact Requirement IDs from your Excel matrix within your narrative response to ensure technical cohesion.**

1. Unified Clinical & Programmatic Operations

- **1.1 Longitudinal Client Record Coordination:** Explain your platform's architectural approach to consolidating fragmented clinical data from Public Health, Home Visiting, Enhanced Care Management (CaAIM/ECM), Detention Health, and Behavioral Health into a single, cohesive client timeline. Detail your native system logic for automated record de-duplication to eliminate duplicate entries within these core programmatic domains (REQ-001).
- **1.2 Correctional Healthcare Partitioning & Clinical Safety:** Describe how your role-based access control framework balances strict data privacy with clinical safety in justice-involved settings (REQ-SEC-002). Specifically, explain how the system isolates sensitive behavioral health or psychotherapy narratives from general medical staff while maintaining a unified, real-time electronic Medication Administration Record (eMAR) visible to all authorized care team members.
- **1.3 Care Transitions & Active Workspace Buffering:** Detail how your platform automates workflows during critical justice-system transitions. Focus on how the system ingests external Jail Management System (JMS) triggers to maintain an active operational workspace buffer window of at least 48 hours following an inmate's release to facilitate safe discharge planning and continuous care workflows (REQ-008).

2. Enterprise Consent, Security, & Compliance Controls

- **2.1 Dynamic Consent Architecture (42 CFR Part 2 & HIPAA):** Explain the underlying data segregation model that programmatically isolates Substance Use Disorder (SUD) data from general physical health records. Detail how your consent engine natively supports combined HIPAA/Part 2 consent pathways for Treatment, Payment, and Healthcare Operations (TPO).
- **2.2 Real-Time Pipeline Interception & Automated Workflow Suppression:** Detail the automated security controls that actively monitor outbound data exchanges. Explain how the system automatically and instantly suppresses data-sharing workflows, masking or dropping specific clinical data elements immediately upon the expiration or manual revocation of a client's consent (REQ-CON-002).
- **2.3 Element-Level Auditing & Emergency Overrides:** Describe your system's capability to tag and mask data at the element level (diagnoses, labs, medications) within a chart. Detail the immutable electronic audit trail and logging protocols triggered when a provider executes an emergency 'Break-the-Glass' workflow, specifically highlighting how real-time notifications are automatically dispatched to the County Compliance Officer (REQ-SUD-003).

3. State Interoperability & Disconnected Field Operations

- **3.1 Open Interoperability & Unlimited Transaction Capacity:** Document your platform's native adherence to United States Core Data for Interoperability (USCDI) standards. Pitch how your open FHIR API architecture facilitates seamless data exchange with state networks (such as the California Data Exchange Framework [DxF]) while providing unlimited transactional capacity exempt from volume-based licensing fees (REQ-ECO-008).
- **3.2 Resilient Offline Field Operations:** Describe your secure, encrypted offline charting cache utility for outreach workers and jail clinical teams operating in cellular or Wi-Fi dead zones. Explain how data is secured via local

encryption on mobile devices and how the system executes automated cryptographic synchronization upon reconnecting to the network (REQ-ECO-009).

4. Revenue Cycle Management & Managed Care Staging

- **4.1 Automated Split-Billing Rules Engine:** Detail how your revenue cycle engine processes complex, multi-disciplinary encounters. Explain the automated logic used to split and route a singular clinical milestone into separate, distinct Short-Doyle Medi-Cal, justice-involved billing streams, and standard Medi-Cal FFS/MCP claims based on provider credentials, delivery settings, and California mode/service codes (REQ-RCM-004).
- **4.2 Retroactive Eligibility Correction & Reconciliation:** Describe your platform's mechanism for ingesting and parsing the Monthly MEDS Electronic File (MMEF) (REQ-RCM-009). Detail the system logic that processes the MMEF to systematically flag active versus suspended benefits, identify historical eligibility mutations, and automatically recalculate impacted historical claims while maintaining a strict financial audit trail.

5. Implementation, Integration, and Partnership Framework

- **5.1 Collaborative Project Governance:** Detail your implementation methodology for complex, multi-agency county rollouts. Describe how your project governance model structures readiness assessments, mitigates deployment risks, aligns with county project governance structures, and utilizes shared tools like Microsoft Teams and SharePoint for synchronized delivery tracking (REQ-IMP-002).
- **5.2 Network Panel Management & Centralized Referral Engines:** Pitch your product's underlying architecture for tracking multidisciplinary client pipelines. Detail how your centralized referral and waitlist engine manages cross-departmental workflows (REQ-IMP-005) and how your caseload assignment and panel engine enforces staff threshold limits and balances provider networks (REQ-IMP-004).
- **5.3 Training Autonomy & Sandbox Workspace Operations:** Outline your organizational strategy for workforce readiness, training, and platform adoption. Describe how your training model and administrative documentation empower county staff to build, modify, and deploy custom templates, forms, and workflows autonomously within a secure sandbox environment without requiring vendor engineering interventions (REQ-IMP-007).

Required Equity Questions:

1. What is your experience with and current capacity to provide services through an equity and inclusion perspective which meets the diverse linguistic, cultural, gender and other needs of the target population, as appropriate?
2. In what ways does your agency promote equity within the organization itself?
3. Please describe the system's ability to collect, manage, analyze, and report demographic, language, disability, and social needs information. Please identify which data elements are configurable and how the system supports appropriate use of these data to advance health equity. Describe the configuration process, limitations, and associated costs.
4. Please describe the system's capabilities for stratifying clinical, operational, and patient measures by demographic and other relevant characteristics to identify disparities. Include examples of available reporting, dashboards, and visualization characteristics. Can users create and save custom criteria and reports without vendor intervention?

Budget (No Page Limit)

C. Required Supplemental

1. Resumes of all proposed personnel for this project;
2. Provide a minimum of 3 references for which your agency has provided services similar to those described in this RFP. References shall include: entity, contact name, address, title, phone number, and term of contract;
3. Samples from previous related efforts that could serve as an example of your work; and

4. Letters of commitment if you/your agency is proposing to subcontract or establish a formal collaboration to provide services.
5. A copy of the proposed software agreement

VI. PROPOSAL SUBMISSION REQUIREMENTS

A. General Policies

1. The County assumes no obligation for any of the costs associated with responding to this RFP including, but not limited to, development, preparation, and submission of proposals.
2. This RFP is in no way an agreement, obligation, or contract between County and any applicant.
3. The proposals will become the property of the County upon submission and may be subject to the terms of the California Public Records Act ("PRA"), as required by law.
4. By submitting an proposal, applicants acknowledge and agree as follows: that the County is a public agency subject to the disclosure requirements of the PRA; that applicants must clearly identify all proprietary information that is contained in the proposal submitted to the County, if applicant claims that such information falls within one or more PRA exemptions; that applicants must mark said proprietary information as "CONFIDENTIAL AND PROPRIETARY" and must identify the specific lines containing the information; that the County will make reasonable efforts to provide notice to the applicants prior to such disclosure in the event of a PRA request; that applicants are required to obtain a protective order, injunctive relief, or other appropriate remedy from the Marin County Superior Court, before the County's deadline for responding to the PRA request; that if an applicant fails to obtain such remedy within County's deadline for responding to the PRA request, County may disclose the requested information without penalty or liability; and that applicants shall defend, indemnify, and hold County harmless against any claims, action, or litigation, including but not limited to all judgments, costs, fees, and attorney fees that may result from denial by County of a PRA request for information arising from any representation or any action (or inaction), by the applicants.
5. After submission of the proposal and closing of the proposal period, no information other than what is outlined in this RFP will be released, until an award becomes final.
6. The County reserves the right to make an award without further discussion of the proposals received. Therefore, it is important that the proposal be submitted initially on the most favorable terms from both a technical and cost standpoint.
7. While it is the intention to award the contract to one applicant, the County reserves the right to split the award in any manner deemed most advantageous to the County. The County also reserves the right to increase or decrease the award amount.
8. The County reserves the sole right to interpret, change or terminate any provision of the RFP at any time prior to the submission date. Any such interpretation or change shall be in the form of a written addendum and shall become part of the RFP. The County also reserves the right to accept and reject any or all of the RFP, cancel the RFP in whole or in part, or terminate the process and elect to operate by other means.
9. An applicant may not be recommended for funding, regardless of the merits of the proposal submitted, if it has a history of contract non-compliance with the requirements of HHS or other funding source or poor past or current contract performance with any HHS or other funding source. The applicant may be given a provisions award with the stipulation that special terms and conditions regarding the areas of concern will be a part of the contract.
10. A proposal may be **immediately** rejected and disqualified for any of the following reasons:
 - a. The proposal is not received at the time and place specified in the RFP;
 - b. The proposal does not adhere to the required material elements of format and guidelines or substantive

requirements set forth in this RFP;

- c. Evidence indicates that the proposer, proposer's staff or consultants have in any way attempted to influence the confidential nature of the review through contact with Marin County staff or members of the selection review committee.

B. Submission Deadline and Format

Submittal Requirements

The Marin County Department of Health and Human Services has transitioned its bidding processes to the Bid Express® online platform. Please submit your proposal including all attachments by **September 24th before 3:00PM PST**. No verbal proposal will be considered.

Bidders can access current solicitations and a how-to guide for first-time Bid Express users County of Marin Bid Express home page at <https://www.bidexpress.com/businesses/53528/home> Bidders must register for a free Bid Express account to view project solicitations; download bid documents; see the plan holder's list and submit bid RFIs.

Submitted responses must include the form(s) provided with this solicitation package. All items shall be filled in and the signatures of all persons signing shall be written and printed in longhand. All proposals submitted must have a completed Offer form signed by a duly authorized officer of the proposing contractor. Proposals not submitted on the form(s) provided, unless otherwise specified, may not be considered by the County of Marin Procurement Division.

Electronic submissions via Bid Express® OR one (1) written original (marked as such) and one electronic copy on a USB are due on **September 24th 2026 before 3:00PM PST**. Sealed Proposals must be received by the due date and time. Once received, all original and/or copies of the proposal become property of the County of Marin and will not be returned. Proposals will be considered late if not received by the above due date and time, regardless of postmark date, and will be rejected and returned to the proposer unopened.

Proposals shall be submitted electronically via BidExpress or in-person by an appropriate date/time. An acknowledgement email will be sent to you when your proposal has been received. If you do not receive an email indicating "Received" it is your responsibility by **September 25th 2026 4:01PM** 24 hours from submission deadline to follow-up with staff at Procurement@MarinCounty.Gov to confirm receipt. If you do not obtain a "Received" email and also do not follow-up, staff is not required to consider your submission.

Delivery Address:

Marin County Department of Health and Human Services,
C/O: David Lawlor
3501 Civic Center Drive #304
San Rafael, CA 94903

All proposals shall be clearly marked "[RFP-HHS-2026-16] - Do Not Open" on the outside of the proposal package.

The County of Marin reserves the right to reject any and all proposals and to elect not to enter into any contract for the services described in the scope of work. The County reserves the right to make multiple awards of this proposal. The County of Marin also reserves the right to request clarification of information from the proposer.

1. Proposals must be received by the date and time recited above. It is up to the applicant to ensure that the proposal was received by the date and time recited above. Proposals, modifications, or corrections received after the deadline specified will not be considered, except if such modifications or corrections were at the County's request.
2. Only Proposals submitted in the format described within this RFP will be considered. Proposals must be submitted via website and uploaded via PDF on standard 8-1/2" x 11", typed, in no less than 12-point typeface, with 1" margins and pages numbered consecutively. Must be in accessible format.
3. A proposal may be rejected if incomplete, if it contains any alterations of form, or if it contains other irregularities of sufficient magnitude or quantity to warrant a finding of being substantially non-compliant.
4. The County may in its discretion, accept or reject in whole or in part any or all Proposals, may cancel, amend or reissue the RFP at any time prior to contract approval and may waive any immaterial defect in a proposal. The County's waiver of an immaterial defect shall in no way modify the Proposal requirements or excuse the applicant grantee from full compliance with the objective if awarded the contract.
5. The proposer agrees and certifies that they or any of their agents, servants, or employees is not an agent or employee of the County of Marin. The proposer is an independent solely responsible for proposer's acts. The resulting Contract and/or Purchase Order shall not be construed as an agreement for employment with the County. The Attachment E: Non-Collusion Affidavit shall be signed and returned with the submitted proposal.

C. Contact between Applicant and County

- (1) **County staff contact:** During the period from issuance of this RFP and the award of the contract to a successful applicant, contact regarding the specific subject of this RFP between potential or actual applicant and County staff is restricted under the terms of this section. Except as otherwise expressly authorized in this RFP, neither applicant nor County staff shall discuss, question or answer questions, or provide or solicit information, opinion, interpretation, or advocate or lobby regarding this RFP. A documented instance of such contact by an actual or potential applicant shall be grounds for disqualification from the process. County staff shall be defined as any County employees, agents or contractors involved in or connected with this RFP process.
- (2) **Questions regarding the RFP:** To maintain a fair and impartial process, all questions regarding this RFP must be submitted in writing via the County's website and contain a contact name and address. All questions and responses will be available on the County's website on or before **September 10th 2026**. No telephone consultation will be provided. **Questions must be submitted via email to Procurement@MarinCounty.Gov or via BidExpress.**
- (3) **Pre-Proposal Conference:** There will be a non-mandatory pre-proposal conference at the date and time listed below. Attendance is optional and not a pre-requisite for submission of a proposal. All questions asked and answers given will be posted via the County website at <https://www.marincounty.gov/contracting-opportunities>

Date: Thursday, September 3rd, 2026

Time: 10:00-10:30am PST

Location: Virtual Zoom meeting

<https://us02web.zoom.us/j/85654449663?pwd=2JNOU7ttqbAmcFPnwwC5SNXufOdxrY.1>

Meeting ID: 856 5444 9663

Passcode: 160868

VII. PROPOSAL REVIEW AND SELECTION PROCESS

A. Proposal Review and Selection

HHS staff will conduct an initial technical review to ensure that the format requirements outlined in this RFP have been fulfilled. If any of the material format or substantive requirements is missing or incorrect, the proposal may be disqualified. As part of this initial review, the County will evaluate whether the vendor demonstrates a willingness to negotiate in good faith using the County's standard contractual framework, including commercially reasonable performance assurances, business continuity provisions, data ownership and portability protections, transition assistance, and source code escrow or equivalent continuity mechanism where applicable based upon the proposed solution architecture. Proposals from vendors who refuse or fail to demonstrate alignment with these core legal protections will be deemed non-responsive and will not proceed to the selection committee for scoring.

All proposals that pass the initial technical review will be submitted to a selection committee that shall evaluate and rank the proposals. The committee will be comprised of parties knowledgeable about the services sought by this RFP from diverse backgrounds, **including persons with lived experience from the target population of this RFP**, representatives from other county departments, representatives from local advisory boards or community based organizations, and/or any other individuals that HHS deems capable and appropriate for the selection of potential providers. The committee shall not include any potential contractors, and no committee member may apply or assist others in applying for this contract.

The purpose of the evaluation is to determine which applicants demonstrate the skills, expertise and experience to successfully perform the tasks specified in the RFP. Each committee member will read and score each proposal using a standardized scoring instrument. The scoring instrument will reflect the requirements of the RFP. A copy of the scoring instrument that will be used can be found in Attachment-D: Marin County HHS E.H.R RFP Scoring Tool. The County reserves the right to seek clarifying or additional information from applicants, potentially including site visits or agency interviews.

Tie-Breaker Rule and Order of Precedence: In the event that two or more proposals receive identical total evaluation scores the County will determine the highest-ranked proposal by applying this order of precedence:

- Highest score in Category 1: Functional & Clinical Capability
- If still tied, highest score in Category 5: Implementation Methodology, Governance, & SLA Support
- If still tied, highest score in Category 2: Legal, Compliance, Privacy & Technical Architecture
- If still tied, the proposal receiving the highest score on the highest-weighted scored evaluation criterion within Category 1: Functional & Clinical Capability

If proposals remain tied after all these criteria, the evaluation leadership committee will conduct a documented comparative review of the tied proposals based solely on the published evaluation criteria and the contents of the submitted proposals. Following the review, the committee will recommend the highest-ranked proposal, documenting the distinguishing factors supporting their recommendation based exclusively on the published criteria.

The committee will make an award recommendation to the Director of Health and Human Services, or designee, who will make the final recommendation to the Marin County Board of Supervisors or County Executive.

Prior to making an award, the County may choose to conduct interviews with applicants. The purpose of the interviews would be to ask follow-up questions that may arise from the review committee and collect any additional information not gleaned from the Proposals. The County may also request additional information necessary to

determine the applicant's financial stability, ability to perform on schedule or willingness to incorporate additional features in the proposal, and any other relevant information necessary to make the award.

Once a decision is made, a Notice of Intent to Award and Non-Award Notice will be emailed to all applicants evaluated by the committee.

B. Protest Procedure

Within five calendar days of the issuance of a notice of intent to award the contract, any Applicant that has submitted a proposal may submit a written notice of protest. The notice of protest must include a written statement specifying in detail each and every ground asserted for the protest. The protest must be signed by an individual authorized to represent the Applicant, and must cite the law, rule, local ordinance, procedure or RFP provision on which the protest is based. In addition, the Applicant must specify facts and evidence sufficient for the County to determine the validity of the protest.

Delivery of Protest:

All protests must be submitted in writing and received by **December 11 2026, 4:01PM PST** by email to Procurement@MarinCounty.Gov or at the following address:

Marin County Department of Health and Human Services,
C/O: David Lawlor
3501 Civic Center Drive #304
San Rafael, CA 94903

If a protest is mailed via U.S. Mail, it must be postmarked within 5 calendar days of the notice issuance. The Applicant bears the risk of non-delivery.

The protest will be forwarded, through the appropriate administrative channels, to the Director of the Marin County Department of Health and Human Services, or designee. The Department Director or designee may review the original RFP Proposal(s), the public notice, the Request for Proposal document, and the scoring instruments of the Proposal review committee, and any other document deemed appropriate. The Department Director or designee will provide a written response to the protest, including any action that will be taken, if applicable. The decision of the Department Director or designee shall be final.

C. Post Award

Once the Notice of Intent to Award has been issued, the provider selected will be contacted to execute a Professional Services Contract. At that time, the selected provider and the County may negotiate contract provisions and adjustments to the budget and the scope of work.

The applicant grantee awarded a contract under this proposal process will be required to adhere to the reporting requirements set forth by HHS, as well as to provide any additional data needed to satisfy other County, state, or federal reporting requirements.

For the duration of the contract period, contract renewals are contingent upon the demonstration of progress in achieving measurable results to the County's satisfaction and compliance with all contract requirements, as well as the continued availability of contract project funding.

Award of a contract under this process does not preclude the County from conducting another RFP process for these services at a future date.

IX. RFP Questionnaire

A. RFP Instructions

The RFP questions can be found in the Marin County HHS EHR RFP Matrix Spreadsheet. When completing this spreadsheet, please adhere to the guidelines outlines in this section as well as the instructions provided on the 'Summary Guidelines' tab. Once completed, ensure the Matrix Spreadsheet is attached to your RFP application.

1. Review and fill out the absolute mandatory specifications across all 5 requirement domains (tabs).
2. Fill out the 'Conformance Code' column using the standard structural keys below:
A = Currently available (Out-of-the-box configuration)
B = In development (Fully deployed within 6 months of contract execution)
C = Available but requires user/client modification (County IT configuration)
D = Available via vendor modification (Custom code build included in implementation cost)
E = Available through 3rd party software (Requires separate licensing/integration)
F = Not available
3. Provide a detailed, legally-binding descriptive narrative of your technical approach in the 'Vendor Descriptive Narrative' column.

Failure to fulfill mandatory clauses or hidden transactional fee models will result in technical disqualification.