Respondent:	Bamboo Health

Overview:

Request for Proposal (RFP) 22-70514 is a solicitation by the State of Indiana in which organizations are invited to compete for a contract amongst other respondents in a formal evaluation process. Please be aware that the evaluation of your organization's proposal will be completed by a team of State of Indiana employees and your organization's score will be reflective of that evaluation. The evaluation of a proposal can only be based upon the information provided by the Respondent in its proposal submission. Therefore, a competitive proposal will thoroughly address all components of the Scope of Work (SOW) – Attachment O. The Respondent is expected to provide the complete details of its proposed operations, processes, and staffing for the scope of work detailed in the RFP document and supplemental attachments.

Completion Requirements:

All Respondents must complete all sections of Attachment F – Technical Proposal Template and all tabs of Attachment K – Functional and Technical Requirements Matrix. Please review the requirements in Attachment O – Scope of Work carefully and address each section and requirement; the sections referenced below correspond to the sections in the SOW. Please describe your relevant experience and explain how you propose to perform the work in its entirety, addressing the question prompts in the template below. In addition, please fill out all tabs of Attachment K. The quality and nature of how a Respondent proposes to meet a requirement, as indicated in a Respondent's population of Attachment K, will be factored into the relevant section's scores below. Please submit your completed Attachment K in Excel – please do not PDF it.

Respondents are strongly encouraged to submit inventive proposals for addressing the Program's goals that go beyond the minimum requirements set forth in Attachment O of this RFP.

For all areas in which subcontractors will be performing a portion of the work, clearly describe their roles and responsibilities, related qualifications and experience, and how you will maintain oversight of the subcontractors' activities.

A completed Technical Proposal is a requirement for proposal submission. Failure to complete and submit this form may impact your proposal's responsiveness.

Submission Specifications:

Please use the yellow shaded fields to indicate your answers to the following questions. The yellow fields will automatically expand to accommodate content. Every attempt should be made to preserve the original format of this form. Respondents may reference attachments or exhibits not included in the boxes provided for the responses, so long as those materials are clearly referenced within the relevant answer field and included as legible attachments. Where helpful, Respondents are encouraged to insert screen shots of their proposed Future System.

1 **SOW Section 1 ,2, 3 - Proposal Overview and Experience**
- Provide an overview of your proposal and describe how you meet the Mandatory Requirements set forth in SOW Section 1.1. Provide a list of states to which you currently or in the past have provided similar services. In connection with this list, please provide information on:
- Products/Systems you have initiated in other states that can be replicable in Indiana to help the State meet its goals
- Products/Systems you intend to implement that would be specific to Indiana

- Examples of how you have worked with other states in a collaborative manner to address changing program needs and priorities
- How many customers currently receive similar to the services requested in this RFP from your company?
- Any sanctions or formal complaints that you have been subject to
- Any corrective actions that you have been subject to
- Experience with State and federal compliance
- How you have set your goals and performed against those goals
- How many active 988 software solicitations are you currently participating in?
- How many other states are you currently partnering with to implement a 988 software solution?
- Given any/all active 988 solicitations and implementations, explain how you will prioritize the delivery of the 988 software solution for Indiana by the 7/1/2022?
- Please include any risks on the timeliness and quality of the 988 software solution for Indiana as a result of other active solicitations and implementations and how you plan to mitigate those risks? How long has your company's subcontractor(s) (if applicable) been providing services related to this RFP?
- How long, and in what capacity, has your company been working with each of the proposed subcontractors (if applicable).
- Provide an overall project organizational chart that includes roles / responsibilities on your team as well as expected roles / responsibilities at the State to help ensure project success.
- Please complete a Resource Usage Template (Attachment Q) for the work contemplated by this RFP. Please account for ongoing work (*i.e.* work contemplated by SOW section 5.3) in column Q, labeling this work in the "Comments" column. This completed form may be attached to your technical proposal and referenced below – it need not be inserted into this template. Any assumptions related to the number of the Respondent Project Team and the State Team staff, roles of staff, and duration of involvement used in the development of the resource hour estimates should be identified in the proposal.
- Describe your company's recommended governance structure based on the organizational chart and roles / responsibilities for the governance groups.
- How many team members are trained or certified on the services related this RFP?
- Identify all KEY team members and provide a brief write up and resume that highlights their relative experience and expertise.
- In the event a team member is not meeting the State's expectation, describe the processes to replace team members?

Proposal Overview and Experience

- **Provide an overview of your proposal and describe how you meet the Mandatory Requirements set forth in SOW Section 1.1. Provide a list of states to which you currently or in the past have provided similar services.**

In the following response, Bamboo Health will share how we fully meet the Mandatory requirements, an overview of our OpenBeds Crisis Management Solution, our extensive client experience and how we provide some clear differentiators for this important Indiana initiative.

The OpenBeds Crisis Management technology is designed to expedite access to assessment and treatment for those in crisis, track their journey from call to treatment, and coordinate all stakeholders within a comprehensive crisis management system across the crisis continuum of care. The OpenBeds Crisis Management module, combined with our traditional OpenBeds Capacity Management and Referral

System **(live in Indiana)** and suite of services, supports collaboration with mobile crisis teams, law enforcement organizations, local community organizations, faith-based organizations, and other behavioral health stakeholders in their efforts to ensure the integrated delivery of culturally competent, strengths-based, and family-centered services.

The Bamboo Health team offers Indiana distinct advantages in selecting the OpenBeds Crisis Management Solution:

- **Proven crisis experience.** The OpenBeds Crisis Management Solution is live in New Hampshire as of 1/1/22, following an aggressive 3-month implementation. We have been supporting crisis lines and crisis stabilization units with the OpenBeds Capacity Management and Referral System in other states for years. We are the crisis technology partner of choice for Beacon Health Options, a leading crisis Administrative Service Organization (ASO) and Managed Care Organization. Note that Beacon Health Options is the crisis ASO in Georgia and runs their statewide crisis system. We are also the crisis technology vendor of choice for Netsmart, a leading behavioral health electronic health record (EHR) provider.
- **Established a network of Indiana treatment providers.** We are supporting 64 Indiana behavioral health treatment providers, 39 psychiatric units or hospitals, and 211 with OpenBeds today. As a result, our system can easily facilitate referrals to a wide array of mental health and SUD inpatient and outpatient services as of July 2022.
- **Extensive statewide behavioral health treatment and referral track record.** OpenBeds Inc. offers the nation's most comprehensive and connected technology solutions to enable crisis management and improve access to behavioral health treatment and services. Twelve states—Alaska, Delaware, Indiana, Maine, Michigan, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, Ohio, and Washington — rely on OpenBeds to connect providers and consumers to crisis, SUD, and mental health services, as well as social services.
- **Longstanding partnership with Indiana.** We continue to support the State with our OpenBeds and Prescription Drug Monitoring (PDMP) contracts since 2015. Our Indiana-based partners, Briljent and aFit, have also delivered high quality trusted services for the Indiana FSSA and DMHA.
- **Interoperability focus.** We apply efficiency wherever we can such as ADT integrations to assist providers to avoid double data entry and API integration with the Call Center as a Service (CCaaS) system delivering valuable telephony functions real-time.
- **HITRUST certification.** Bamboo Health offers the highest levels of security with an impeccable track record managing protected health data without incident. Our contract experience in Indiana is augmented with the billions of transactions we conduct nationally with PDMP and ADT data.
- **Modular COTS solution.** OpenBeds platform offers additional modules to deliver future expansion capabilities including delivering justice involved and other relevant salient clinical data at the point of care.

Per SOW Section 1.1, Bamboo Health meets the following Mandatory Requirements:

A. **The system being proposed must be in use for the same or a substantially similar purpose somewhere in the United States**

Proposal Overview
Bamboo Health's OpenBeds Crisis Management Solution offers the nation's most comprehensive and connected technology solutions to enable crisis management and improve access to behavioral health treatment and services. Twelve states—Alaska, Delaware, Indiana, Maine, Michigan, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, Ohio, and Washington —rely on OpenBeds to connect providers and consumers to crisis, substance use disorder (SUD), and mental health services, as well as social services.

The following is how Bamboo Health meets the Mandatory Requirements as set forth in SOW Section 1.1:

We recently established the first statewide digital crisis system in New Hampshire. Bamboo Health is supporting the state's rollout of the 988 initiative through a multi-year contract with Beacon Health Options from New Hampshire's Department of Health and Human Services. Our crisis management solution enables crisis call center professionals to do digital intake, validated assessment, dispatch of mobile crisis response teams using GPS-enabled technology, and referrals to urgent appointments. In its first month, the New Hampshire Rapid Response Access Point received 4,152 calls or texts for behavioral health support. The OpenBeds Crisis Management System helped facilitate:

- 144 same- or next-day appointments with a mental health provider, and
- 564 mobile crisis team responses within an hour directly to an individual's location.

While the mobile crisis teams existed previously, now the units are dispatched from a single location through the technology platform, so that if one team is unavailable to respond, the next closest unit can respond, reducing wait time for help to arrive.

We are currently deploying the same solution across eight (8) counties in Washington and statewide in Missouri and are in the planning phase or contracting with several other states. Crisis lines in several other states are using the OpenBeds Capacity Management and Referral System to connect people to crisis stabilization services, emergency inpatient care, and urgent outpatient care. For example, Delaware's crisis lines and crisis stabilization units have been using the system for years and are high utilizers, sending more than 20,000 referrals per year.

With the implementation of our system in multiple states, we have acquired tremendous knowledge and experience, distilling these learnings into a set of sharable best practices for the benefit of the state, its providers, and residents.

In March of 2018, Indiana and Bamboo Health launched the Indiana 211 OpenBeds Network statewide. Since the inception of the program, Indiana's primary focus is to increase timely access to mental health and SUD treatment by matching individuals to open treatment slots and provide treatment-on-demand (or as close to possible) for its state residents.

Comprehensive in reach and serving a diverse population, the *OpenBeds network in Indiana includes 64 treatment provider organizations; 22 hospitals; 17 inpatient psychiatric units; 14 outpatient mental health facilities; 31 SUD services facilities; 11 justice system programs, including many youth organizations; jails and corrections (parole/probation, pre-trial services, specialty courts); Veterans' services organizations; homelessness programs; and transitional housing programs.* In establishing and running this network, we've developed strong relationships with the providers and a keen understanding of Indiana's behavioral health ecosystem. This network of providers will be ready as of July 2022 to field referrals for inpatient and outpatient care from the crisis line personnel. No additional contracting or onboarding will be required, and we anticipate minimal top-up training for new use guidelines and workflows.

As part of the OpenBeds partnership with Indiana and 211, OpenBeds built four separate workflows with specialized views for Indiana 211. The OpenBeds technology enables 211 operators to accept calls from individuals seeking SUD and mental health treatment and provides a state-customized triage tool to identify a level of care and make a referral. Providers have been specially trained to work with 211's non-clinical navigators to contact the caller directly and discuss treatment options. Indiana 211 also uses OpenBeds to receive wrap-around referrals directly (as a listed service in the system) and indirectly (when another provider requests support services during a referral.) Additionally, OpenBeds established a workflow for particularly vulnerable individuals (such as pregnant women with SUD, women with SUD and children, or persons who inject drugs) who cannot be easily placed. If a provider is working with a patient

who fits these criteria, they may be referred to this 211 service for expedited placement at designated organizations. Another customization includes the 211 administrator's ability to view multiple call center referrals while maintaining distinct call center accounts.

B. The vendor proposed to implement and maintain the system must have implemented, supported or otherwise played a substantial role in the deployment which satisfies Mandatory Requirement A.

Our current experience with the New Hampshire 988 Crisis project description above satisfies the Mandatory Requirement A. Bamboo Health implemented and currently provides Maintenance and Operations (M&O) for the State under Beacon Health Options. The Design, Develop and Implementation (DDI) and M&O is a similar contractual responsibility as the required scope for the Indiana 988 Software project. The OpenBeds Crisis System supports New Hampshire's crisis lines to perform digital intake and assessment as well as dispatch mobile crisis responders to people in their communities that needed real-time intervention. Our crisis management system utilizes GPS-enabled technology and allows both the crisis line operators and mobile crisis response teams to make referrals to urgent appointments. Our Software as a Service (SaaS) subscription model for New Hampshire includes pricing based on a bundled annual recurring cost that includes Network Management; Maintenance; Customer Support; Technical Support; Ongoing Training; Ongoing Workflow Integration; Hosting; Operations; and Rolling Network Recruitment. In addition, the following is a summary of OpenBeds' experience supporting states through connecting providers and consumers to crisis, substance use disorder (SUD), and mental health services, as well as social services:

- **Alaska** – statewide OpenBeds launched in 2019 for mental health and substance use disorder (SUD) servicesn and used by the statewide crisis line
- **Delaware** – statewide digital referral system launched in 2017 used by all the major hospitals across the state, 90% of the behavioral health providers, state crisis lines, state clinics and psychiatric hospitals, and the Department of Corrections. Serves as the system of record for the crisis lines, mobile crisis units, and crisis stabilization units.
- **Indiana** – OpenBeds pilot launched in 2017 and statewide OpenBeds launched in 2018 for mental health and SUD services, along with integration with the statewide 211 system
- **Maine** – statewide OpenBeds launch for mental health and SUD, along with support for the state's statewide crisis system
- **Michigan** – statewide OpenBeds launch for mental health and SUD services pending in 2021, along with integration with the state's new crisis line
- **Nebraska** – regional OpenBeds launched in 2020 for mental health services and is now expanding across the state to include SUD services
- **Nevada** – statewide OpenBeds launched in 2020 for mental health and SUD services
- **New Hampshire** – statewide comprehensive crisis management system provided in conjunction with Beacon Health Options, coordinating care provided by the statewide crisis line, mobile crisis teams, and treatment providers
- **New Mexico** – statewide OpenBeds launched in 2020 for mental health and SUD services, used by the statewide crisis line and expanding use to include another statewide crisis line
- **North Carolina** – statewide OpenBeds Critical Resource Tracker launched in 2020. In contracting for use of the OpenBeds Capacity Management and Referral System and Crisis Management Module.
- **Ohio** – regional OpenBeds launched in 2020 for mental health services and is now expanding across the state including SUD services
- **Washington** – implementing the OpenBeds Capacity Management and Referral System and Crisis Management Module to coordinate crisis care among the 24/7 regional crisis lines, mobile crisis teams for adults and youth, involuntary commitment teams, and crisis stabilization units. It will also facilitate care access to inpatient psychiatric, residential, and outpatient care.

Please find more detailed information about these projects below:

New Hampshire (2021)

The New Hampshire Department of Health and Human Services (DHHS) partnered with Bamboo Health to implement the OpenBeds Crisis Management Solution, which expedites access to assessment and treatment for those in crisis. The solution acts and tracks a patient's journey from call to treatment and coordinates all stakeholders within an easy-to-use interface.

Delaware (2017)

The Delaware Treatment and Referral Network (DTRN) is a digital referral system that expedites placement of patients in mental health and SUD programs, eliminating the need for manual processes. We have established robust relationships throughout the State of Delaware with their regional crisis lines, mobile crisis teams, and crisis stabilization units to establish OpenBeds as the system of record for their referrals to treatment for individuals in crisis. The system is a critical system that is used by all the major hospitals across the state, 90% of the behavioral health providers, state crisis lines, crisis stabilization units, state clinics and psychiatric hospitals, and the Department of Corrections. The full spectrum of behavioral health services, inpatient and outpatient, is represented at DTRN. DTRN's automated system provides an online inventory of programs currently accepting patients to meet needs 24 hours per day, 7 days per week. Once available services are identified, care teams can electronically transition patients to services and programs around the state that match the level of care needed. DTRN's electronic referral process also allows the sending and receiving care teams to coordinate supporting services such as transportation, housing, and employment, making the patient's transition as smooth as possible.
The system currently averages 900 referrals per week and 66% of referrals are acknowledged within 30 minutes. The data from the system has helped the state improve access to treatment by identifying the most common rationale for denied treatment and most used substances and improve emergency department (ED) throughput of behavioral health patients at times of high utilization (e.g., winter months and COVID).

New Mexico (2020)

The state of New Mexico's Behavioral Health Services Division (BHSD) established a goal that 100% of clients experiencing a psychiatric and substance use crisis receive appropriate care without delay. The state's crisis line uses the system to connect people to crisis services and behavioral health treatment and use is being expanded to the other state crisis line. 211 is engaged to connect people in need of social services like temporary shelter and employment services. The state's court system as well as the Children, Youth and Families Department are highly engaged. Due to the pandemic, the state is focused on improving access to telehealth services by actively promoting them in OpenBeds.
 As utilization of behavioral health services increases in New Mexico during the pandemic, the State is also encouraging treatment providers to refer clients that don't have the capacity to treat to other treatment providers using a 'Pass the Baton' OpenBeds campaign. The system ensures that there is no delay in accessing the most appropriate 24/7 emergency, crisis stabilization, inpatient, and recovery services. The network is an important part of a statewide crisis services management system that allows a mental health and SUD service system to manage the flow of patients in crisis to appropriate levels of care, of which inpatient care is only a small part of a continuum and provide information that can allow a system to determine the appropriate service capacity for all levels of care.

Nevada (2020)

The Nevada Department of Health and Human Services, Division of Public and Behavioral Health, partnered with OpenBeds in 2020 to launch the Nevada Health Connection, a platform designed to enable real-time referrals and monitor the availability of inpatient and outpatient behavioral health services in Nevada. The system is currently used by Nevada's Lifeline, Crisis Support Services of Nevada. The application provides functionality to automate hospital reporting and assessment of acute psychiatric inpatient transfers and support care coordination for infants suffering from neonatal abstinence syndrome. The program includes almost 50 Nevada behavioral health programs and facilities with the ability to locate high-quality and available care sources. The state is also using TreatmentConnection.com, the public-facing portal for community navigation.

Alaska (2019)

The Alaska Department of Health and Social Services Division of Behavioral Health partnered with OpenBeds in 2019 to launch the Alaska Behavioral Health Referral Network to foster collaboration between healthcare providers with available inpatient and outpatient behavioral health services to improve patient access to treatment for crisis, mental health, and SUD services. The system is being used by Alaska's crisis line to find resources for those in need of mental health and SUD assessment and treatment services. Through this network, Alaska is using OpenBeds to help identify gaps in care delivery and ensure individuals can access appropriate and timely care. OpenBeds enables social workers, case managers, and other care team members to be more responsive to the people they serve in addition to spending fewer hours on the phone or faxing providers to try to find available treatment options for their patients. This secure network helps to overcome regional boundaries and create efficiencies for providers in the referral process.

Treatment Connection, a public-facing portal, is also an integral part of Alaska's network offering. The portal enables people seeking mental health and SUD treatment for themselves or others in the state to anonymously search for nearby providers, evaluate the type of care needed and submit confidential online referral inquiries to appropriate treatment providers vetted by the state.

Indiana (Pilot 2017); launch 2018

In March of 2018, Indiana and OpenBeds launched the Indiana 211 OpenBeds Network statewide. Since the inception of the program, Indiana's primary focus is to increase timely access to mental health and SUD treatment by matching individuals to open treatment slots and provide treatment-on-demand (or as close to possible) for its state residents. The OpenBeds network in Indiana includes inpatient psychiatric units; outpatient mental health and SUD services; courts; youth organizations; managed care organizations; jails and corrections (parole/probation, pre-trial services, specialty courts); Veterans' services organizations; homelessness programs; and transitional housing.

As part of the OpenBeds partnership with Indiana and 211, OpenBeds built four separate workflows with specialized views for Indiana 211 enabling 211 operators to accept calls from individuals seeking SUD and mental health treatment and use a state-customized triage tool to identify a level of care recommendation and make a referral. Additionally, OpenBeds established a workflow for particularly vulnerable individuals (such as pregnant women with SUD, women with SUD and children, or persons who inject drugs) who cannot be easily placed. If a provider is working with a patient who fits these criteria, they may be referred to the 211 service for expedited placement at designated organizations.

Maine (2021)

The State of Maine Department of Health and Human Services partnered with Bamboo Health to implement the OpenBeds solution in 2021 to establish a network of mental health and SUD providers. The Maine implementation includes the launch of Maine Treatment Connection.

We are working with the state to revamp their crisis care system and establish the OpenBeds Crisis Management module to coordinate crisis line professionals and mobile crisis teams across the state. The crisis module will enable crisis call intake, decision support regarding the right level of care, mobile crisis team location and dispatch, documentation of assessments and care plans and referral to assessment or treatment. We are supporting the State to automate reporting regarding youth in crisis, in keeping with legislation.

Michigan (2020)

The Michigan Department of Health and Human Services (MDHHS) partnered with Bamboo Health and is preparing to launch OpenBeds in 2021 across hundreds of mental health and substance use disorder treatment services. The system will also be used by Michigan's crisis line, MiCAL, and we are building dedicated integrations with their current CRM to facilitate this. Bamboo Health and the MDHHS are currently focused on the buildout of the network, so the State's substance use and mental health treatment providers are aware of the solution, comfortable using it, and understand the value not only to themselves, but also to patients in need across the state. Once the provider-facing side is implemented, the MDHHS will begin to run public-facing awareness and education campaigns statewide in preparation for the launch of Treatment Connection.

Nebraska (2020)

Residents of Omaha and the surrounding area have better access to inpatient mental healthcare resources as a result of the program launching in 2020 with the Nebraska Department of Health and Human Services' (DHHS) Region 6 Behavioral Healthcare and OpenBeds. OpenBeds helps providers in Cass, Dodge, Douglas, Sarpy, and Washington counties quickly connect patients to a network of inpatient mental health providers.

Nebraska has six behavioral health regions that provide services for people without private insurance or ineligible for Medicaid. This announcement follows Nebraska's selection in 2019 as one of 23 states in a national crisis intervention registry project to reduce wait times for ED patients urgently needing inpatient psychiatric care. With the OpenBeds behavioral health system in region 6, Nebraska's most populous behavioral health region, the State can become more responsive to the people it serves. Social workers, case managers, and other healthcare professionals can immediately identify treatment services and refer patients to care in a few clicks. The program is quickly expanding to cover all inpatient mental health organizations across the state and SUD resources within region 6.

North Carolina (2020)

At the height of the Covid-19 pandemic in the spring of 2020, the North Carolina Department of Health and Human Services (DHHS) integrated with the OpenBeds Critical Tracking solution. The online Covid-19 tracking and collection site was deployed to enable all North Carolina hospitals to submit their Covid-19 patient and resource data in one simple, easy-to-use location. OpenBeds created a standards-based web services API enabling health systems to publish their Covid-19 data easily and efficiently to the state in an automated format. This effectively replaced an online survey submitted daily by a hospital employee and ensures employee, bed, ventilator, and other equipment counts are always up to date. In addition to the benefit of data automation to the state, through the OpenBeds Critical Resource Tracker system NC DHHS is also submitting this information directly to the federal government on the hospital's behalf, eliminating another daily, manual survey. The State is also set to implement OpenBeds Emergency Patient Movement module, which accelerates the referral, transfer, and treatment of emergency patients across the state. With this module, providers at facilities with emergency patients who need prompt, specialized care can search for appropriate treatment options, find availability, and communicate with receiving facilities about the patient. This creates a convenient, streamlined process with the patient's mental health top of mind.

Bamboo Health is in contracting with North Carolina to deploy the OpenBeds behavioral health solution across the state.

"The integration was quick, streamlined, and efficient. The entire project took less than two weeks from inception to first data transmission. Resource requirements were light as well, using a single web developer and a SQL architect for the clinical data mining,"
Cameron Hurst, Director of Application Development, NC HCA Information Technology Group

"We went from a large number of hours each week doing manual reports, multiple phone calls, emails, following up, police reports, providing the information, to a much more automated streamlined process. The OpenBeds system has been a phenomenal partner to us throughout this whole response. And it has really helped us move forward in operationalizing the data and meeting all the other various requirements."
Kimberly Clement, MPH, Program Manager, NC Department of Health and Human Services

Ohio (2020)

The Ohio Department of Mental Health and Addiction Services (MHAS) system ensures there is no delay in accessing the most appropriate 24/7 emergency, crisis stabilization, inpatient, and recovery services. The network is an important part of a statewide crisis services management system. It allows a mental health and SUD service system to manage the flow of patients in crisis to appropriate levels of care (of which inpatient care is only a small part of the continuum) and provide information to determine the appropriate service capacity for all levels of care.

In its effort to develop and implement a recovery-oriented care system, OMHAS employed Bamboo Health to assist in the creation of a comprehensive behavioral health treatment network. Behavioral Health Connection (B-CON) aims to improve treatment entry across the continuum of both mental health and SUD treatment services. B-CON, using the OpenBeds system, accurately displays mental health provider availability and services to coordinate mental health and dual diagnosis referrals and allow for social services agency referrals, as needed.

The system is strongly supported and used by Ohio's major health systems, including University Hospitals and the Cleveland Clinic. The system is being used by NAMI Ohio to direct those in need to appropriate treatment resources and decision support. Ohio is actively expanding the network to include SUD services given demand from treatment providers and major hospitals, as well as public need. The State has invested to double the size of the network over the next several months. Once the SUD network is established, the public-facing-portal will be launched, allowing Ohio residents to peruse and seek out behavioral health treatment services vetted by the state, including telehealth services. We are currently exploring use of the system by the state's 211 and crisis lines.

Washington (2021)

The OpenBeds Crisis Management solution is being rolled out across eight counties in conjunction with Beacon Health Options, the Behavioral Health Administrative Services Organization (BH- ASO) in three regions of Washington State. Beacon is responsible for behavioral health crisis services for all individuals regardless of their insurance status or income level and for additional non-crisis services for low-income individuals who lack insurance coverage.

The OpenBeds system will support care provided by the 24/7 regional crisis lines, mobile crisis teams for adults and youth, involuntary commitment teams for individuals who are at risk of harming themselves or others and crisis stabilization units. It will also facilitate access to inpatient psychiatric, residential and outpatient care.

- **Products/Systems you have initiated in other states that can be replicable in Indiana to help the State meet its goals**

Bamboo Health partnered with Beacon Health Options in 2021 to launch our Crisis Management Solution in New Hampshire. This system enables the state's crisis line to perform digital intake, assessments, and dispatch mobile crisis responders to people in their communities that need real-time intervention. Our crisis management system utilizes GPS enabled technology and allows both the crisis line operators and mobile crisis response teams to make referrals to urgent appointments.

In New Hampshire, we have worked closely with the state's 10 Community Mental Health Centers (CMHCs) to train mobile crisis responders, establish workflow, and ensure users have the appropriate roles within the system. We began our engagement with the CMHCs by doing a series of demonstrations that displayed the functionality of each part of the OpenBeds platform and answered initial questions from the group. We then began collecting the appropriate agreements, user lists, and had small-group trainings that were focused specifically on workflow. Many of these discussions led to the creation of highly detailed user guides that are available for any OpenBeds user to reference at a given point should they need immediate, real-time assistance. While users began familiarizing themselves with their specific workflows, we were working with our Network Onboarding Specialist to create user accounts and get each provider and call center operator set up with the access that they needed.

We are currently working with our partner, Beacon Health Options, to launch our Crisis Management Solution in Washington State. We have supported our partner, Beacon Health Options, through implementation by doing extensive stakeholder engagement, providing demos, user guides, training sessions, and weekly program meetings with a small group of providers directly as they prepare to utilize the OpenBeds Crisis Management Solution. Efforts are underway to bring approximately 30 users on board and live with the system in April 2022.

In Missouri, we are preparing to launch our Crisis Management Solution in a phased approach. We will leverage the same program management methodology and implementation plan that proved to be successful in both New Hampshire and Washington. Some of these go-live readiness tasks include leader webinars, demonstrations, weekly program meetings with core crisis stakeholders, close collaboration with clinical leaders and subject matter experts to understand workflows, and live training and validation exercises with end users.

In March of 2018, Indiana and OpenBeds launched the Indiana 211 OpenBeds Capacity Management and Referral Network statewide. Since the inception of the program, Indiana's primary focus is to increase timely access to mental health and SUD treatment by matching individuals to open treatment slots and provide treatment-on-demand (or as close to possible) for its state residents.

Comprehensive in reach and serving a diverse population, the OpenBeds network in Indiana includes 64 treatment provider organizations, 22 hospitals, 17 inpatient psychiatric units; 14 outpatient mental health facilities and 31 SUD services facilities; 11 justice system programs; including many youth organizations; jails and corrections (parole/probation, pre-trial services, specialty courts); Veterans' services organizations; homelessness programs; and transitional housing programs. In establishing and running this network, we've developed strong relationships with the providers and a keen understanding of Indiana's behavioral health ecosystem. This network of providers will be ready as of July 2022 to field referrals for inpatient and outpatient care from the crisis line personnel – no additional contracting or onboarding will be required, and we anticipate minimal top-up training for new use guidelines and workflows.

As part of the OpenBeds partnership with Indiana and 211, OpenBeds built four separate workflows with specialized views for Indiana 211. The OpenBeds technology enables 211 operators to accept calls from individuals seeking SUD and mental health treatment and provides a state-customized triage tool to identify a level of care and make a referral. Providers have been specially trained to work with 211's non-clinical navigators to contact the caller directly and discuss treatment options. Indiana 211 also uses OpenBeds to receive wrap-around referrals directly (as a listed service in the system) and indirectly (when another provider requests support services in the course of a referral.) Additionally, OpenBeds established a workflow for particularly vulnerable individuals (such as pregnant women with SUD, women with SUD and children, or persons who inject drugs) who cannot be easily placed. If a provider is working with a patient who fits these criteria, they may be referred to this 211 service for expedited placement at designated organizations. Another customization includes the 211 administrator's ability to view multiple call center referrals while maintaining distinct call center accounts.

Crisis Management Module
A companion to the OpenBeds Capacity Management and Referral System is the OpenBeds Crisis Management module. The module expedites access to assessment and treatment for those in crisis, tracks their journey from call to treatment, and coordinates all stakeholders within a crisis management system. The Crisis Management module, combined with our core OpenBeds Capacity Management and Referral System and underlying network, supports collaboration between the state, law enforcement organizations, local community organizations, faith-based organizations, and other behavioral health stakeholders in their efforts to ensure the integrated delivery of culturally competent, strengths-based, and family-centered services.

In terms of workflow, the OpenBeds system provides a real-time connection between crisis call center professionals, mobile crisis response teams, and treatment providers, including crisis stabilization services. The Service Availability dashboard displays the availability and location of mobile crisis teams, along with the directory and availability of behavioral health providers. The Crisis Management professional at the call center can document their intake interview and perform a validated assessment, toggle between the Mobile Crisis Provider and Behavioral Health Provider dashboards, and select which pathway is

necessary for the client. Mobile crisis teams are quickly dispatched using GPS-enabled technology and can quickly view the caller's information, accept the dispatch, and document their assessment and plan at the scene. The mobile crisis teams can, in turn, use the Service Availability dashboard to find available crisis beds or refer to outpatient assessment or treatment.

A longitudinal record is kept for callers such that the call center professional can see the details of all calls, including prior assessments and outcomes, for a given consumer. The structured date and time stamps collected along the continuum of care drive the reporting of key metrics to provide timely insights.

No "Wrong Door" Access	Regional Crisis Call Centers	Mobile Crisis Team Response	Receiving and Stabilization Facilities

The Crisis Management module's framework —from fully understanding a patient with longitudinal records to final patient disposition—is based on the Substance Abuse and Mental Health Services Administration's (SAMHSA) crisis management best practices and core elements:

The technology provides situational awareness and connection to all crisis stakeholders so that crisis professionals can connect consumers to care more quickly.

- **Products/Systems you intend to implement that would be specific to Indiana**

Bamboo Health's OpenBeds crisis management system will integrate with the Genesys Cloud platform to be implemented by Avtex, the Call Center as a Service (CCaaS) vendor, to provide a simplified and efficient workflow for the NSPLs. This integration will provide NSPLs personnel with easy access to information from both the call center platform as well as the OpenBeds system. The integration between the OpenBeds system and the Genesys Cloud platform also allows Bamboo Health to provide end-to-end tracking from the initial call all the way until help is dispatched and/or the patient is referred for treatment.

- **Examples of how you have worked with other states in a collaborative manner to address changing program needs and priorities**

Bamboo Health values customer relationships and truly views these as strategic partnerships, with collaboration at the very center of what we do. With a committed team in place, Bamboo Health work in partnership with the state of Indiana to help manage changing program scope and priorities as needed to ensure a successful program implementation. To facilitate this effort, our Project Management Office will leverage and maintain contemporary change management methodologies such as Change Request Logs, etc. with all changes approved through the DMHA control board. The log will track the following:

- the reason for the change
- a complete description of work to be performed
- an estimate of time and cost to complete the task
- a completion date for the change
- an impact analysis indicating ramifications or impact to the project

New Hampshire Client Collaboration Example
Bamboo Health has refined and established new best practices to ensure project modifications identified are estimated for design and development efforts based on requirements defined by the DMHA. Bamboo Health combined change processes into a Change Management Plan that describes each phase of a change

request. The Change Management Plan is used as a guidance document to simplify what otherwise would be presented as an overly complicated project plan by a less experienced vendor. The purpose of this Change Management Plan is to define all processes, practices, tools, review bodies, and approvals necessary to monitor and control program performance, and identify changes and the potential impact of change on program objectives.

While we worked closely with New Hampshire leaders who were familiar with the Crisis landscape and collaborated on design of the Crisis Management System, there were several key features that are critical to workflow that we did not capture until post-go-live when clinicians were actively using the system in a day-to-day manner. For example, supervising operators needed a 50-mile search radius when they were looking for teams to dispatch. The 50-mile filter was not a part of the original design, but end users indicated that it was critical to their workflow and in determining which mobile response team should be sent to the consumer in crisis. **We were able to implement a fix within 1-2 days of the issue being raised, which immediately alleviated concerns from the operators and provided confidence that they were dispatching the mobile team to and from the correct region.**

Similarly, once end users began using the system day in and out, they began offering suggestions to the current role configurations and system in general that would improve the system and their workflow. We meet with our partner, Beacon, weekly to discuss issues as they arise. We keep a detailed issue log and assist in real time troubleshooting. This weekly meeting assists in prioritizing and ensures we keep in close communication with end users and state leaders.

- **How many customers currently receive similar to the services requested in this RFP from your company?**

Bamboo Health's OpenBeds platform offers **the nation's most comprehensive and connected technology solutions to enable crisis management and improve access to behavioral health treatment and services.** Twelve states states—Alaska, Delaware, Indiana, Maine, Michigan, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, Ohio, and Washington —rely on OpenBeds to connect providers and consumers to crisis, substance use disorder (SUD), and mental health services, as well as social services.

OpenBeds is a market leader in innovation for crisis, closed-loop, digital behavioral health treatment referrals, program execution, reporting, and the delivery of related outcomes.

We recently established the first statewide mobile crisis team digital tracking and dispatch system in New Hampshire. Bamboo Health is supporting the state's rollout of the 988 initiative through a multiyear contract with Beacon Health Options from the New Hampshire's Department of Health and Human Services. Our crisis management solution enables crisis call center professionals to do digital intake, validated assessment, dispatch of mobile crisis response teams using GPS-enabled technology and referrals to urgent appointments. In its first month, the New Hampshire Rapid Response Access Point received 4,152 calls or text for behavioral health support. The OpenBeds Crisis Management System helped facilitate:

- 144 same- or next-day appointments with a mental health provider, and
- 564 mobile crisis team responses within an hour directly to an individual's location

While the mobile crisis teams existed previously, now the units are dispatched from a single location through the technology platform, so that if one team is unavailable to respond, the next closest unit can respond, reducing wait time for help to arrive.

We are currently deploying the same solution across eight counties in Washington and statewide in Missouri and are in the planning phase or contracting with several other states.

Crisis lines in several other states are using the OpenBeds Capacity Management and Referral System to connect people to crisis stabilization services, emergency inpatient care and urgent outpatient care. For example, Delaware's crisis lines and crisis stabilization units have been using the system for years and are high utilizers of the system, sending more than 20 000 referrals per year.

- **Any sanctions or formal complaints that you have been subject to**

Bamboo Health has never been subject to any sanctions or formal complaints.

- **Any corrective actions that you have been subject to**

Bamboo Health has never been subject to any corrective actions.

- **Experience with State and federal compliance**

OpenBeds' parent company, Bamboo Health, has more than 25 years of experience providing scalable web-based solutions in highly sensitive areas such as public safety, criminal justice, regulatory compliance, and the insurance and healthcare sectors. As a partner to 45 states supporting the Prescription Drug Monitoring Programs (PDMP), we comply with State and Federal security and privacy regulations. OpenBeds is HITRUST certified and offers Indiana the highest levels of security. In addition, **OpenBeds has been operational as a Capacity Management and Referral system with DMHA since 2018 without incident.**

- **How you have set your goals and performed against those goals**

Prior to implementation of the OpenBeds system, our team will conduct an analysis of DMHA's needs and challenges regarding access to behavioral health assessment and treatment withing the crisis continuum. We will combine these findings with the requirements communicated in the RFP and tailor our technology and processes to meet unique needs. In addition, Bamboo Health selected a local Indiana consulting partner in Briljent to support an assessment post go-live in July 2022 to help validate goals and objectives around additional functionality release and associated business process recommendations.

Furthermore, with the implementation of the OpenBeds system in 12 states, we have acquired tremendous knowledge and experience, distilling these learnings into a set of sharable best practices for the benefit of the DMHA and the population served. Our experience is also reflected in our engagement, implementation, and marketing tool kits that we will share with the DMHA. We have enhanced our engagement and implementation processes and materials based on these experiences. Our implementation and network management teams will meet with State stakeholders on a regular basis pre- and post-launch. During these meetings, we will share best practices to maximize network engagement, review our progress toward DMHA stated goals and objectives, and review data reports.

- **How many active 988 software solicitations are you currently participating in?**

Bamboo Health is currently participating in two active 988 software solicitations which includes the Indiana 988 Software RFP.

- **How many other states are you currently partnering with to implement a 988 software solution?**

Bamboo Health is involved in two active 988 Software implementations. As OpenBeds is operational in 12 states, we are in discussions with several states that are interested in upgrading their systems to include the Crisis Management Module.

- **Given any/all active 988 solicitations and implementations, explain how you will prioritize the delivery of the 988 software solution for Indiana by the 7/1/2022?**

Bamboo Health manages new and existing customer commitments via a tightly controlled Product Roadmap to ensure adequate resourcing and capacity are in place to meet software delivery dates. Up front detailed product requirements gathering and definition in the Program Planning phase will allow the team to thoughtfully prioritize effort across development cycles in the most efficient way. In addition, Bamboo Health will work closely with our Indiana based partners, Briljent and aFIT, who have also delivered high quality trusted services for the Indiana FSSA and DMHA to ensure successful delivery of the 988 Software solution for Indiana. Bamboo Health has current staffing capacity and available options to expand resources internally and through our local partners that have delivered staff augmentation services for FSSA and DMHA if needed.

Bamboo Health will assign Project Management resources to coordinate all aspects of implementation of the OpenBeds Crisis Management solution and project management for the DMHA.

Beginning with Program Initiation, the Bamboo Health Project Management Office will develop a detailed project management plan for State approval sixty (60) days prior to the commencement of any services under this Contract. This plan will address how Bamboo Health will provide timely and quality services, quality and reliable technology, qualified staffing, project management tools, and ongoing collaboration between the Bamboo Health team, any subcontractors, State, State designees, and any other identified stakeholders. Bamboo Health will maintain the finalized management plan and make it available to Contractor staff, State staff, and State designees.

A single point of accountability ensures that a consistent set of management practices and techniques will be applied to all project activities. In addition to a qualified project manager, Bamboo Health allocates a project executive who provides corporate oversight and facilitates fast-tracking of resources and guidance, as needed. Bamboo Health assigns a dedicated Client Relationship Manager (CRM) who is responsible for overseeing all interactions and deliverables for the DMHA. The CRM will support the project team throughout the life of the contract. This includes a regular cadence of meetings and one-on-one follow-ups as well as opportunities to meet in person. DMHAs single point of contact/CRM will be:

The Project Manager will manage the project punch list to ensure timely completion of all deliverables and ensure the system is operational on July 1, 2022.

- **Please include any risks on the timeliness and quality of the 988 software solution for Indiana as a result of other active solicitations and implementations and how you plan to mitigate those risks? How long has your company's subcontractor(s) (if applicable) been providing services related to this RFP?**

As a part of our strong governance and planning practices, Bamboo Health carefully evaluates our current commitments, active procurements and product releases with our Sales, Product and Operations business teams. This has factored into our confidence for delivering the 988 Software for Indiana by the July 2022 timeframe.

Bamboo Health manages new and existing customer commitments via a tightly controlled Product Roadmap to ensure adequate resourcing and capacity are in place to meet software delivery dates. Up front detailed product requirements gathering and definition in the Program Planning phase will allow the team to thoughtfully prioritize effort across development cycles in the most efficient way.

The Bamboo Health Project Manager uses MS Project for the project schedule, which enables us to determine if the project is in jeopardy of not meeting deliverables. The Bamboo Health PM will provide a weekly status update report and schedule a weekly internal meeting to discuss project status and identify/remove any roadblocks. Frequent internal reviews will be scheduled, typically on a weekly basis, with a cross-functional team led by a senior executive to assess status and progress, develop solutions to problems as they occur, and attempt to eliminate or minimize the impact of anticipated future problems.

Sixty (60) days prior to the commencement of services under this Contract, Bamboo Health will provide a Risk Management and Mitigation plan which includes a process for documenting and reporting risks and risk status to the State. More specifically, Bamboo Health's plan will incorporate potential risk identification, recommendations for risk mitigation, management and tracking of mitigation steps, and any proposed tool(s) to track, manage, report risks, and identify points when risks could worsen if not mitigated. Additionally, Bamboo Health will include any tool(s) that would be used to facilitate its Risk Management Plan. The benefits of the recommended risk management and mitigation process to DMHA will be stated. DMHA reserves the right to retain access to all of Bamboo Health's risk management tools and reports. Bamboo Health will grant DMHA the right to approve the Risk Management Plan, process, and tools.

Bamboo Health's subcontractors have been providing services related to this RFP for many years as noted in the call box.

Briljent has provided training and assessment services for FSSA and DMHA respectively. Additionally, Avtex and aFit currently work together on an initiative for the Indiana Office of Technology supporting the Contact Center.

Please find company bios included as a separate attachment.

- **How long, and in what capacity, has your company been working with each of the proposed subcontractors (if applicable).**

The Bamboo Health Indiana Team:
- Briljent (WBE) – 23 years of experience
- aFit (WBE) – 25 years of experience
- S2Tech (MBE) – 25 years of experience
- Vespa (IVOSB) – 9 years of experience

Bamboo Health's subcontractors have been providing services related to this RFP for many years as noted in the call out box. Briljent has provided training and assessment services for FSSA and DMHA respectively. Additionally, Avtex and aFit are currently working together on an initiative for the Indiana Office of Technology supporting the Contact Center.

- **Provide an overall project organizational chart that includes roles / responsibilities on your team as well as expected roles / responsibilities at the State to help ensure project success.**

Organizational Chart

Bamboo Health recommends a joint governance structure in place through initiation, planning, and implementation phases of the OpenBeds Crisis Management solution project. This governance structure will be facilitated by the Bamboo Health Project Management Office PMO and will remain flexible, transparent, and accountable to reporting overall project health and status. Joint participation between Bamboo Health, sub-contractors, and the State is imperative to ensure transparent communications, facilitate clear decision making, and execute on a clear vision. Following is the Bamboo Health team project organization chart. Please also find this included as a separate attachment for better clarity.
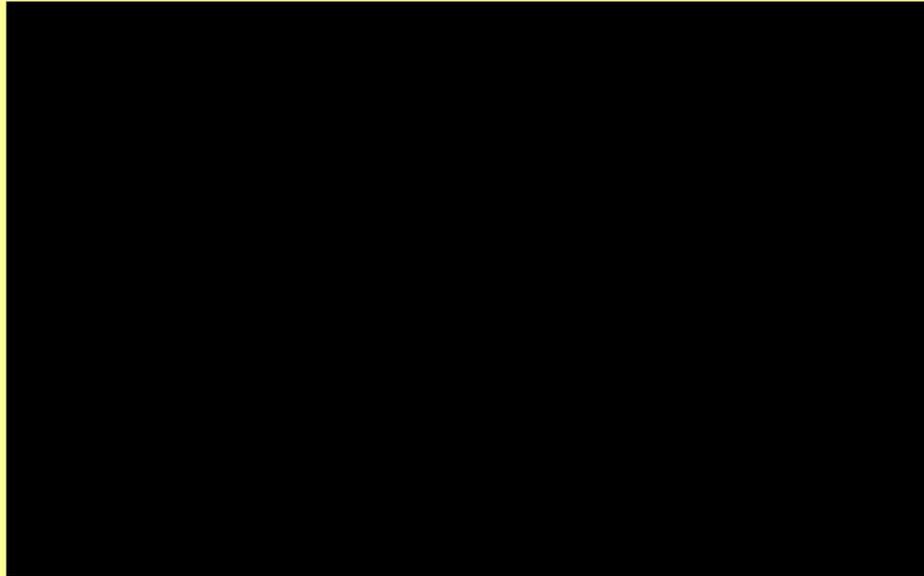
Roles and Responsibilities

Following are the project roles and responsibilities:

Role	Role Description	Specific Training and Knowledge for Role
Program Manager	Leads teams to deliver cross-functional programs and projects on time with the highest level of quality while building excellent relationships with all stakeholders. Well-seasoned program management experience with a strong implementation skillset through project delivery. Will exude a strong executive presence while still paying strict attention to detail and ability to communicate strongly, both written and oral. Interaction will involve extensive interaction with Sales, Systems Engineering, Product Development, and other members of cross-functional teams.	-8+ Years Program/Project Mgmt Experience -Project Mgmt Professional PMP Certification -Six Sigma Certification

Project Manager	Coordinates all aspects of OpenBeds/Crisis product and services offering project management for a client, from inception to installation. Typically involves extensive interaction with sales, systems engineering, product development, and other members of cross-functional teams. Project is typically focused on the delivery of new or enhanced products to improvement of customer satisfaction through the use of technology.	-5+ Years Relevant Project Mgmt Experience -Project Manager NH and WA Crisis Module implementation -Project Mgmt PMP Certification 1Q2022
Product Manager	Designs, prototypes, tests, and facilitates the success of critical customer initiatives. Provides daily guidance to the team to plan and clearly understand deliverables. Triages, prioritizes, and makes tradeoffs daily, balancing competing needs & interests. Works collaboratively with the team, internal stakeholders (operations, support, sales), and end users to drive effective execution and strategy. Utilizes user metrics and instrumentation to identify opportunities to unblock product growth and adoption.	-5+ Years Product Mgmt Experience
Software Engineer	Using PHP/LAMP framework, writes code, completes programming, and performs testing and debugging of applications. Additionally, may be required to write code for the web-based front-end using technologies, such as: HTML, CSS, JQuery, JS-Bootstrap, JS-React. Completes documentation and procedures for installation and maintenance. May interact with users to define system requirements and/or necessary modifications	
Manager, Software Engineering	Directs the activities of software applications developers for software application enhancements and new products. Oversees the analysis, design, programming, debugging, and modification of computer programs for end user applications. Analyzes and investigates engineering tasks and prepares design specifications, analysis, and recommendations as appropriate. Interacts with project managers, marketing, sales, and users to define application requirements and/or necessary modifications.	
Director, Quality Assurance	Responsible for planning, directing and coordinating all QA activities for Bamboo Health engineering teams, including the functional, integration, performance, and regression testing of Bamboo Health's software products. Works closely with senior management and third-party service providers to establish, implement,	

	and maintain best practice QA strategies for Bamboo Health.	
VP Engineering	Responsible for overseeing the lifecycle and planning with respect to the product line or business unit, engineering/R&D, marketing, and financial planning. Directs the activities of a software applications development function for software application enhancements and new products. Oversees the analysis, design, programming, debugging, and modification of computer programs for commercial or end user applications, such as materials management, financial management, HRIS or personal applications products. Analyzes and investigates applications engineering tasks and prepares design specifications, analysis, and recommendations. Interacts with project managers, marketing, sales, and users to define application requirements and/or necessary modifications. May also have responsibility for testing and documentation. Selects, develops, and evaluates personnel ensuring the efficient operation of the function.	
Consultant	Will lead the Briljent assessment post go-live. Reviews the success metrics of the launch and evaluates the remaining meaningful configuration and customizations for prioritization. Available to solicit input from Indiana providers and other states on the Crisis System and business process.	-20+ years' experience with public health and HIT consulting
Training Lead - External	Schedules and delivers end-user training using various tools, suited to the needs of the end-users. Training can be conducted via in-person sessions, live webinars, recordings and step through tutorials. Training will be tailored to the needs of the audience.	-3 yrs. experience conducting end-user training
Network Onboarding Specialist	Coordinates all aspects of end-user account creation and use-case testing and validation. Collects user account data, creates user accounts and communicates with end-users to provide necessary information for logging in to the system. Works with end-users to create a rehearsal plan for testing the system and signs off on completion of testing.	-2 yrs. experience facilitating end-user access and testing of the system
Call Center Support Manager	Coordinates all aspects of end user support and readiness. Oversees all aspects of training call center agents and documentation. Works directly with the training lead and PM for successful coverage at launch and continued end user support	

Training Lead - Call Center	Responsible for overseeing all aspects of training our internal support teams to support our end users. This person will own building out our LMS with the appropriate learning modules. They will also ensure our knowledge center docuementation is up to date.	
Info Security	Focused on threat detection and response. Supports and helps execute long-term strategic plan for security, cloud architecture, and network architecture also providing guidance on enterprise technologies, and compliance. Demonstrates security compliance leveraging frameworks including HITRUST, NIST, CJIS, and others. Implements security controls using innovative and repeatable solutions focused on automation and scalability.	-Certified Information Systems Security Professional (CISSP)
CRM	Acts as a point of escalation for the State if, in the event, project resources or deliverables fail to meet or are at risk of failure to meet project objectives.	-8 yrs. Client Management Experience
Crisis State Program Administrator - DMHA	Assists in identifying stakeholders and influencers in the state. Acts as a point of escalation throughout implementation. Establishes standards and guidelines for network participation and workflow. Identifies participating Crisis Administrators, call center operators, crisis mobile units and more. Provides contact information for system users and assists in facilitating execution of system Subscription Agreement with participating groups/providers. Responsible for ongoing compliance monitoring to ensure adherence to the program standards. Attends program orientations to answer questions related to standards and guidelines for network participation. Assists in developing program communications.	1 FTE
State Project Manager	Responsible for supporting the Bamboo Health project manager with implementation activities. This includes coordination between Bamboo, state stakeholders, and call center/crisis lines. Works closely with the OB State Network admin to identify providers for account creation.	1 FTE
State Clinical Workflow SME	Responsible for collaborating with clinicians throughout the state to identify workflows and best practices.	0.25 FTE

OB State Network Admin	Assists in identifying stakeholders and influencers in the state. Provides Bamboo Health with contact information for key stakeholders. Works with Bamboo Health to establish standards and guidelines for network participation and provide ongoing monitoring to ensure adherence to the program standards - Example: Ensure treatment providers update bed availability, appointment availability and respond to referrals in a timely manner and conduct outreach in the event of non-compliance. Identifies the sponsored treatment providers for the network and advise providers on required participation in the program. Provides Bamboo Health with contact information for sponsored treatment providers. Identifies key referring providers (i.e., courts, crisis lines, hospital emergency department contacts etc.) Providers Bamboo Health with contact information for key referrers. Attends program orientation meetings to answer questions related to standards and guidelines and convenor policy for network participation. Acts as a point of escalation throughout implementation when the Project Manager needs to expedite responses from network providers. Collaborates on program communications and assist in distributing to key stakeholders & associations.	0.5 FTE

- Please complete a Resource Usage Template (Attachment Q) for the work contemplated by this RFP. Please account for ongoing work (i.e. work contemplated by SOW section 5.3) in column Q, labeling this work in the "Comments" column. This completed form may be attached to your technical proposal and referenced below – it need not be inserted into this template. Any assumptions related to the number of the Respondent Project Team and the State Team staff, roles of staff, and duration of involvement used in the development of the resource hour estimates should be identified in the proposal.

Please find Bamboo Health's completed Resource Usage Template under Attachment Q. Assumptions related to the number of the Project Team and the State Team staff, roles of staff, and duration of involvement used in the development of the resource hour estimates have been identified in the proposal.

- Describe your company's recommended governance structure based on the organizational chart and roles / responsibilities for the governance groups.

Bamboo Health recommends a joint governance structure in place through initiation, planning, and implementation phases of the OpenBeds Crisis Management Solution project. This governance structure will be facilitated by the Bamboo Health Project Management Office PMO and will remain flexible, transparent, and accountable to reporting overall project health and status. Joint participation between Bamboo Health, sub-contractors, and the State is imperative to ensure transparent communications, facilitate clear decision making, and execute on a clear vision.

Organizational Chart

Please find Bamboo Health's governance structure based on the organizational chart and roles and responsibilities included as a separate attachment.

- **How many team members are trained or certified on the services related this RFP?**

The Bamboo Health Indiana Project Team is comprised of a group of professionals who are highly trained and skilled in their areas of expertise such as PMP (Project Management Professional), CISSP (Certified Information Systems Security Professional), Six Sigma Process Training, etc.

- **Identify all KEY team members and provide a brief write up and resume that highlights their relative experience and expertise.**

Following are key Bamboo Health Indiana crisis project team members:

Please find resumes included as a separate attachment.

- **In the event a team member is not meeting the State's expectation, describe the processes to replace team members?**

In the event the DMHA requests the removal of a staff member from all work on the project, Bamboo Health will comply with any such request immediately. Replacement for any staff removed, or staff that leaves the project for any reason, Bamboo Health will match, or exceed the replaced staff member in terms of skill level and experience. Bamboo Health acknowledges that replacements are subject to DMHA approval at the time of the assignment and again 90 days later.

NOTE: No staff members of Bamboo Health's tenured project team have ever been requested to be removed or have left a project. This is a team that has worked together multiple times and, as such, enjoying working together and have proven results.

4 SOW Section 4 – System Capabilities and Requirements

Explain how you propose to execute SOW Section 4 in its entirety by answering the question prompts in the boxes below. In answering these questions, please provide any relevant experience you may have.

Responses in the form of screenshots and figures are encouraged. They can be can be pasted in the answers or referred to at the end, so long as they are clearly labeled. In addition to the below questions, complete Attachment K.

- **4.1 – Functional Requirements – Overview**
  - o Provide an overview of the Proposed System and its components and features.
  - o Describe how the Proposed System meets the objectives for "Air Traffic Control" (ATC) capabilities and supportive technology specifications.
  - o Describe what, in your Proposed System, is a commercial-off-the-shelf (COTS) solution.
  - o Describe what percentage of your Proposed System you estimate will be available "out of the box", with configuration, or through customization.
  - o What requirements may not be available at the initial go-live on 7/1/2022, if any? Please provide an estimate on when they will be available.

Functional Requirements – Overview

- **Provide an overview of the Proposed System and its components and features.**

Bamboo Health, the nation's most comprehensive solutions and referral networks for behavioral health treatment and services, is a market leader in innovation for crisis management, closed-loop, digital behavioral health treatment referrals, program execution, reporting, and the delivery of related outcomes. Steeped in behavioral healthcare knowledge, experience, and research, we continually work with customers, users, and stakeholders in the market to identify and execute opportunities for innovation that increase our ability to drive behavioral health outcomes improvement. This strength is perhaps best demonstrated by the number of new features that we have added to the OpenBeds system in the last three years as well as the number of OpenBeds system features that have been replicated by others in the market.

The OpenBeds Crisis Management Solution is designed to expedite access to assessment and treatment for those in crisis, track their journey from call to treatment, and coordinate all stakeholders within a comprehensive crisis management system. The OpenBeds Crisis Management Module, combined with our traditional OpenBeds Capacity Management and Referral System and suite of services, supports collaboration with mobile crisis teams, law enforcement organizations, local community organizations, faith-based organizations, and other behavioral health stakeholders in their efforts to ensure the integrated delivery of culturally competent, strengths-based, and family-centered services. **Today, our Crisis Management Solution is being used in New Hampshire and will soon be deployed in Washington, Missouri and Maine.** For years, crisis lines in Delaware, Alaska, Nevada and New Mexico, have used the OpenBeds Capacity Management and Referral System for situational awareness regarding the availability of behavioral health resources and to connect individuals to care. The combination of the OpenBeds Capacity Management and Referral System and Crisis Management Module is what we call our OpenBeds Crisis Management Solution.

➤ **Real-time impact**

The OpenBeds Crisis Management Solution provides real-time situational awareness and connection to all crisis system stakeholders. The Service Availability dashboard displays the availability and location of mobile crisis teams, along with the directory and availability of behavioral health providers at two distinct dashboard tabs. The Crisis management professional at the call center can easily toggle between the Mobile Crisis Provider and Behavioral Health Provider dashboards and select which pathway is necessary for the client. The dual dashboard view can expand and collapse as needed, bringing into focus the necessary services to quickly serve the consumer.

Crisis management professionals can quickly document a consumer intake interview and conduct validated assessments, which then populate a longitudinal consumer profile. At the Mobile Crisis Provider dashboard, the Crisis management professional can view crisis mobile team status, location, and dispatch information, including a high-level overview of the case, whether law enforcement is present, and the number of responders on both map and list views within the dashboard. They can also see the cases of their colleagues; in case they need to intervene. They can digitally communicate with and dispatch a mobile crisis team from the dashboard, and reassign cases (e.g., due to cancellation), as necessary. The OpenBeds Crisis Management Solution can be easily integrated with call distribution software. For Indiana, we are pursuing an integration with the Genesys Cloud software. An "in-pane" view integration which prevents crisis operators from having to switch windows, will be available by the July launch and a deeper embedded integration, including the transfer of data from Genesys to OpenBeds, will be available during Phase 2 of the deployment.

At the Behavioral Health Provider dashboard, the crisis management professional can search for the appropriate type and level of treatment for the consumer. They can view availability of inpatient and outpatient treatment services, along with detailed clinical inclusion and exclusion criteria. They can also quickly send a digital referral for assessment or treatment from the dashboard. Finally, they can quickly schedule an appointment on behalf of the client, as appropriate.

Our cloud-based solution allows authorized users to access the solution via all the major web browsers. It is iOS and Android mobile device-enabled through dynamic design, which allows full platform functionality and access to the network 24 hours per day, 7 days per week, without the need to download an app.

> **Mobile Crisis Team and Provider Tracking capabilities**

OpenBeds tracks mobile crisis and behavioral health treatment services at two distinct dashboards. It is easy to toggle between the two dashboards and we offer both List and Map views. Access to the two dashboards depends on the user's role and workflow needs. For example, crisis management professionals at the call centers can view both dashboards, while treatment provider users only view the Behavioral Health provider dashboard.

The mobile crisis team locations are tracked by GPS technology, and their positions and availability can be viewed at the Mobile Crisis dashboard, as detailed above. The crisis teams can quickly accept dispatches, review demographic and incident information, indicate when they are on scene and change their status (available or not available, checked in or out) from a mobile device. Their status is immediately updated at the Mobile Crisis dashboard to provide full transparency to the other mobile crisis teams and call center crisis professionals.

The behavioral health treatment availability and capabilities are tracked at the Behavioral Health Provider dashboard. In terms of breadth, our state customers typically include the full spectrum of treatment services, inpatient and outpatient, at the OpenBeds network. At the outset of an implementation, we work with the State to determine the breadth of services and organizations to be included in the network and represented at the Behavioral Health Provider dashboard. The capacity of the inpatient services is characterized by number of beds. The beds could be further represented at the dashboard by other characteristics including, but not limited to, gender, age, and payment type. The capacity of the outpatient services is characterized by next available appointment and/or available walk-in hours. At launch in Indiana, providers can display available appointments times and appointments can be scheduled by messaging. We plan to build a scheduler for Indiana which will be available during the Phase 2 timeframe. Note that these capabilities are already deployed throughout Indiana's treatment providers and hospitals. We are currently automating inpatient capacity management using ADT data to further reduce manual data entry by providers and improve the quality of real-time data available to providers.

The Behavioral Health Provider dashboard also details the providers' capabilities, including types and demographics of clients served, including specific populations, types of clinicians on-site, payment types accepted, substances treated, medications used in treatment (e.g., methadone, buprenorphine), and operating hours. Users can search for treatment using filters related to these capabilities and easily drill down to see a summary of a provider's capabilities. A provider's capabilities can easily be updated or modified by the provider administrator role, state administrator, or OpenBeds network administrator. Using the two dashboards, the crisis management professional at the call center can search and refer to assessment or treatment and schedule an appointment. They can also quickly search for an available mobile crisis team in proximity to the consumer and dispatch the crisis team. Following their assessment, mobile crisis teams can use the Behavioral Health Provider dashboard to search and refer to assessment or treatment in one of these ways:

- Refer to crisis beds if mobile crisis team cannot de-escalate.
- Refer for assessment.
- Refer to inpatient or outpatient treatment.

➤ **Mobile dispatch with GPS enabled functionality**

The mobile crisis team locations are continuously tracked by GPS technology (as seen below) and their positions and availability are visualized at the Mobile Crisis dashboard, as detailed above. The crisis teams can quickly change their status (available or not available, checked in or out) from a mobile device. Their status is immediately updated at the Mobile Crisis dashboard to provide full transparency to the other mobile crisis teams and call center clinicians.

At the Mobile Crisis dashboard, the crisis management professional at the call center can quickly find an available mobile crisis team that is in proximity to the consumer in need. They can then quickly dispatch a mobile crisis team from the same dashboard and communicate the caller's details and status with the team in a digital manner. A longitudinal record is kept for callers such that the call center professional can see the details of all calls, including prior assessments and outcomes, for a given consumer.
Note that from the Behavioral Health Provider dashboard, the Crisis management professional can also send referrals directly treatment providers, depending on the desired workflow, for assessment or treatment.

➤ **Bi-directional system to support a digital referral process and information sharing**

Digital referrals to behavioral health providers for assessment or treatment. Leveraging technology to replace ineffective and inefficient manual access and referral processes with digital equivalents has definitively resulted in patients rapidly connecting to appropriate levels of care at facilities appropriate for them and to the community services they need to achieve a successful treatment outcome in our state networks. The digital referral format and content is the result of a cooperative design effort with over 150 behavioral health clinicians and captures the right type and amount of patient information without burdensome data entry. The form is used for both inpatient and outpatient treatment referrals and comprises a combination of drop-down menus, selection buttons, and free text. It can also include multiple attachments of various file types. The form will be customized based on input from the State and its provider stakeholders. The breadth of behavioral health services included at OpenBeds is at the State's discretion, as detailed above. The system also includes a real-time messaging capability following the submission of a referral.

Clinical documents can be attached to subsequent messages. Users are notified regarding referrals and messages by the notification method of their choice (e.g., text or email).

Closing the Loop. OpenBeds makes it exceptionally easy for the crisis line professionals and mobile crisis team users to receive updates on their referral status. Referring users learn whether a referral has been accepted or declined, along with the rationale for that disposition (this is a hard entry and entered in a structured manner with over two dozen rationales for why a consumer is being "declined" assessment or treatment). In addition, referring users are notified whether their clients appeared for their assessments or appointments with the "Show" and "No-show" functionality. At the regional level, our real-time analytics capture the frequency of treatment denials, rationale for denials, and payment mechanism involved to determine why patients may be "falling through the cracks." For example, for inpatient behavioral health referrals, data from one of our current state clients demonstrates that when facilities decline to accept patients, it is not usually because of insurance denials or an absolute lack of capacity as anecdotal accounts suggest, but rather because there is a mismatch between patients' medical needs and the degree of medical services provided by the behavioral health providers. The real-time nature of our analytics enables customers to rapidly act on new data trends.

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Data dashboards with real-time outcomes

OpenBeds offers three different types of reporting capabilities. First, we offer a real-time analytics dashboard that tracks crisis call and mobile team time intervals and outcomes, behavioral health provider service capacity and utilization, access to treatment, and referral patterns at the regional and local (organization and service) levels. State and regional officials have real-time access to all operational data across the network via dedicated views. The nature of the access (de-identified or identifiable data) is based on federal and state-specific privacy regulations, along with state agreements with organizations in the network. Reports can be generated at the Tableau dashboard and exported to multiple different formats.

Second, we offer local real-time dashboards and a mechanism to extract data to the call centers, mobile crisis teams, treatment providers and other referring organizations at the network and treatment organizations. Account administrators at each network member location have dedicated privileges to access the capacity and referral analytics for their organizations.

Treatment administrators can differentiate the data associated with referrals received and referred out of their organizations. Specific data elements and a summary of all data from a given timeframe can be exported to a Microsoft Excel spreadsheet for further analysis and reporting.

The state, regional, and local dashboards are configurable to the needs of the stakeholders.

Third, we currently deliver custom, deep-dive reports to our state customers and can do so for state leadership at regular intervals. We also operate a Tableau reporting dashboard that allows regional officials to self-generate these deep-dive reports on demand.

Tracking and Interfacing with a Bed Tracking Inventory System

A key component of the OpenBeds system is its capability to annotate, track, and record the capacity of mental health and SUD treatment beds and outpatient services. Inpatient treatment resources are characterized by the number of available beds, while outpatient treatment resources are characterized by next available appointment and/or walk-in hours, with a scheduling system to be deployed during Phase 2. The primary reason for including capacity management is to eliminate the need for "calling around" to find available treatment and to preclude the rejection of referrals for capacity reasons. Capacity data is easily entered into the system by treatment professionals or staff via a desktop or mobile device; it is a 20-second process. Users may also register for automated text notification reminders to update availability. There is an audit trail of who has updated the system for local users, and the time of last update is displayed at the Behavioral Health Provider dashboard.

We provide capacity data for all organizations, and most importantly, we have experience working with the following organizational types across our state customers:

- Medically supervised SUD withdrawal management and treatment facilities
- Inpatient psychiatric units at psychiatric hospitals (state and private) or within hospitals that also provide medical services
- Crisis stabilization units
- Inpatient SUD treatment programs
- Residential treatment providers, mental health, and SUD
- Opioid treatment programs
- Individual and group physician practices, including Federally Qualified Health Centers/Rural Health Clinics that include one or more DEA X-waivered providers
- Community mental health organizations
- Independently licensed SUD treatment clinicians
- Recovery residences
- Temporary shelter
- Group homes

Through our experience with these organization types, we provide best practices to integrate use of the system into their workflow based on organization type and size.

Public-Facing and Provider-Facing Portals

Our platform offers separate and complementary public- and provider-facing systems. The public-facing system allows consumers to make a more informed decision regarding treatment by reviewing educational resources regarding SUD and mental health and using a level-of-care decision support tool that we built with the American Society of Addiction Medicine (ASAM.) They can peruse the trusted and state-vetted treatment services and express interest in

treatment in an anonymous way or ask for a provider to reach out to them at the contact method of their choice. The platform has easy to use interactive tools including visual maps in both our provider- and public-facing systems with proximity calculators. Users can filter by varying distances from a zip code, referring entity, or patient's location.

The public-facing system conveniently draws in and displays data from the provider-facing one. As a result, providers only need to access the provider-facing system to customize their profile and services in the public-facing system and field digital public inquiries. 211 and crisis call lines typically use the provider-facing system to make referrals, but they also direct callers to the public-facing system.

Note that the public-facing system is already available in Indiana. It could serve as another 'door' for people in need of crisis care via text or chat.

Public-Facing View

27
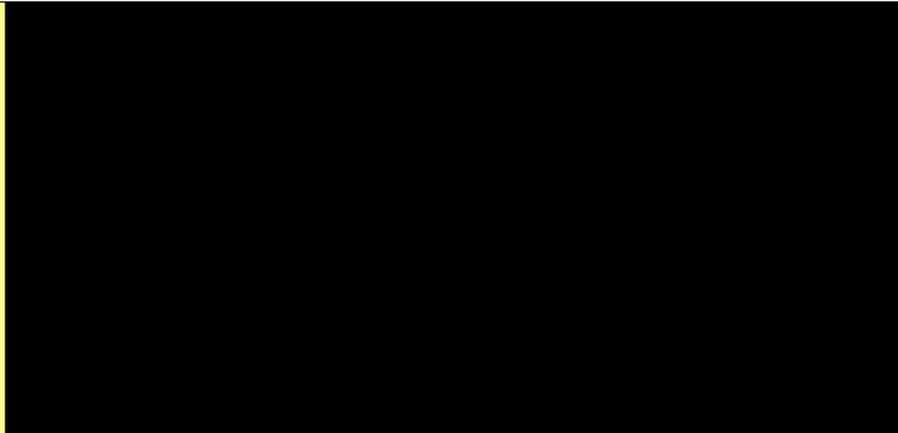
Additional System Features

Integrations and Collaboration

An additional key feature of the platform is the integration with EHR and HIE platforms to provide seamless access to the system. Bamboo Health **maintains active integrations with more than 130 of the nation's electronic health records (EHR) vendors** such as Cerner, Epic, MEDITECH, NextGen, and eClinicalWorks as well as independent pharmacy management systems, CVS, Rite Aid, Kroger, Walgreens, Walmart, and more. Through PMP Gateway, Bamboo Health facilitates clinical workflow **integrations for over 1 million clinicians** throughout the United States and U.S Territories, representing **over 110 million patient encounters per month** integrated directly within the clinician's workflow.

In Indiana, OpenBeds currently collaborates with other state agencies, law enforcement organizations, local community organizations, faith-based organizations, and other behavioral health stakeholders in their efforts to ensure the integrated delivery of behavioral healthcare services. We have been working with these organizations for years and have developed and refined dedicated workflows over time for several of these organizations, such as Management Service Organizations (MSOs) and judicial services. Many of these stakeholder organizations use the provider-facing system. Given the breadth of the associated public-facing system, however, a broader range of stakeholders have access to the treatment registry, educational resources, and the ability to reach out to treatment providers using the public-facing system, e.g.., public defenders.

➢ *Social Service Referrals*

Referral to social services such as housing or food assistance, directly or indirectly (as part of referral to mental health or SUD) is available through the OpenBeds system and currently deployed in Indiana in conjunction with 211. OpenBeds enables referring users to refer clients directly or indirectly to one or more social services. For example, referring users can make referrals directly to community organizations offering housing support. They can also request transportation support amid their behavioral health referrals. This results in a notification being

sent to the community organization responsible for fielding these enquiries. At this point, they can contact the client.
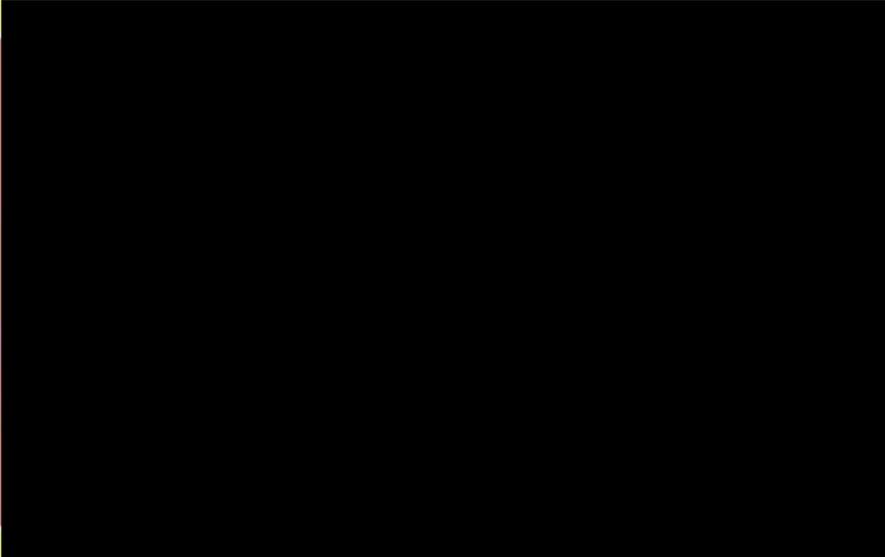
> *Digital Authentication and Role-Based Access*

OpenBeds ensures only authorized users can access the platform. OpenBeds provides a role-based access control model with specific roles and viewing privileges for crisis operators, mobile crisis respondents, crisis line administrators, mobile crisis team administrators and state administrators. There are also distinct roles for users at the treatment organizations and other referring organizations at the system. For example, the crisis line, mobile crisis, treatment provider and other referring organization administrators have dedicated privileges to manage users, access data, and analytics for their organizations. They can edit provider accounts and user and service information; access the analytics dashboard; and extract data from the analytics dashboard. In Indiana, 211 personnel have dedicated roles and views of the system.

During our implementations in New Hampshire and Washington, we elucidated the need for many users to have several roles. For example, a crisis operator may also need an administrator view, a crisis operator may need to dispatch themselves as a mobile crisis team respondent, or a mobile crisis team respondent may also need to accept an outpatient appointment as a treatment provider. As a result, we built a 'multi-account' setting such that a given users can access multiple roles using a single set of credentials, thus preventing the need for multiple accounts and credentials at the system.

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- **Describe how the Proposed System meets the objectives for "Air Traffic Control" (ATC) capabilities and supportive technology specifications.**

Through its broad experience in crisis system development and management, the OpenBeds Crisis Management Solution fulfills the "Air Traffic Control" function as described in the Substance Abuse and Mental Health Services Administration's (SAMHSA's) National Guidelines for Behavioral Health Crisis Care (SAMHSA 2020). The system provides situational awareness, digital communication and connection, tracking and reporting for the clinical services across the crisis care continuum, ensuring that callers are connected to definitive assessment and treatment. It serves as the basis for a responsible and accountable crisis system to serve any state resident with a behavioral health crisis and avoid unnecessary law enforcement, emergency medical services, and emergency department involvement. The OpenBeds solution is scalable and can be configured and customized to meet defined state needs.

- **Describe what, in your Proposed System, is a commercial-off-the-shelf (COTS) solution.**

Bamboo Health offers a web-based commercial solution for crisis management that can be configured and customized to specific provider workflows and the state's needs. Bamboo Health has chosen Amazon Web Services cloud hosting solutions for all our provided applications. Bamboo Health utilizes the standards required by HIPAA and HITECH using the NIST 800-53 framework to create the security model that is used by our Health ecosystem of products. We adhere to industry standard security practices and have obtained, and are committed to retain, both SOC2 and HITRUST security certifications. Bamboo Health leverages internal and third-party security assessment to identify risks to systems and data. By implementing security controls at multiple levels and by having outside experts evaluate our controls, Bamboo Health can provide compliant solutions with robust security and operational soundness for managing Health data systems. Bamboo Health leverages several best-in-class strategies to ensure the health ecosystem of products are scalable, highly available, and fault tolerant.

- **Describe what percentage of your Proposed System you estimate will be available "out of the box", with configuration, or through customization.**

We estimate that approximately 80% of our Proposed System is currently available out of the box and approximately 20% is available with configuration or through customization.

- **What requirements may not be available at the initial go-live on 7/1/2022, if any? Please provide an estimate on when they will be available.**

Based on our significant crisis management experience, Bamboo Health proposes a phased rollout as follows:

Phase I: July 1, 2022

- Lifeline operators could use our Crisis Management Module as a CRM for calls.
- Superficial integration with Genesys Cloud, providing an in-pane view of the Crisis Management Module, such that the Lifeline operators do not need to switch windows.

- Lifeline operators use OpenBeds to refer to outpatient mental health or SUD care, leveraging the existing outpatient network.
  - Scheduling involves the following:
    - Designated outpatient providers to display their weekly and fixed available slots for crisis (this will require OB customization to display multiple dates and times).
    - Lifeline operators can schedule via messaging
- Onboard the 6 state psychiatric units at the OpenBeds Capacity Management and Referral System
- Reporting related to calls and referrals at OpenBeds delivered as static reports to state
- Briljent assessment on system launch capabilities, provider input and prioritization regarding next phase of functionality

Phase 2: July to December 2022

- Computer telephony integration (CTI) regarding our Crisis Management Module with Genesys such that their system is embedded at ours (if not already done in Phase 1).
- Onboard mobile crisis teams to Crisis Management Module and Capacity Management and Referral System (accept dispatches, document assessments, and refer to crisis stabilization and outpatient care).
- Onboard crisis stabilization units to receive referrals from mobile crisis teams and refer up or down the continuum of care.
- Build out scheduler (if state desired) or integrating with major provider EHR scheduler.
- Build granular bed management system for state psych hospitals and crisis stabilization units to capture wait lists and times.
- Build out necessary real-time reporting dashboard with necessary metrics (add Indiana-specific metrics to current core sent of reporting metrics)
- Launch mobile crisis unit dispatching, urgent appointment scheduling and granular bed tracking at some point between September and December 2022.

Bamboo Health intends to partner with two (2) subcontractors for additional Project Management, consulting and Training resources – aFit and Briljent; as well as S2Tech for technical staff and Vespa for analytics support. Project hours reflect Phase I delivery (inclusive of Bamboo Health and subcontractor hours), initial delivery of Crisis module and integration with Genesys Cloud (Avtex) with target July 2022 implementation. Phase 2, implementation date to completion is December 2022, and include appointment scheduling in addition to all Open Beds customizations noted in the product matrix. Additional assessment required in partnership with the State; depending on degree of customization required and breadth of network, additional hours may be allocated.

  - **4.1.1 – Intake –** Describe how the Proposed System will meet the following attributes and how each component will function.
    - Collects consumer demographics, including third party consumer information if applicable.

- Collects clinical mental health information, current and recent substance use disorder issues, and lethality assessment information to inform the consumer's need for active rescue.
- Displays and collects information about the consumer's choice of referral options, referral follow-up information, and consumer complaint or satisfaction feedback.
- Offers expanded form and automated report generation capabilities.

Intake

- **Collects consumer demographics, including third party consumer information if applicable.**

The system allows for recording and storage of demographics. See the screenshot below for the demographics gathered. Note that a separate intake form for youth gathers a modified set of demographics. The longitudinal patient record allows for ongoing maintenance of an individual profile with key identifiers and events. The Genesys call center platform can collect and store third-party data and pass data to the OpenBeds platform as well.
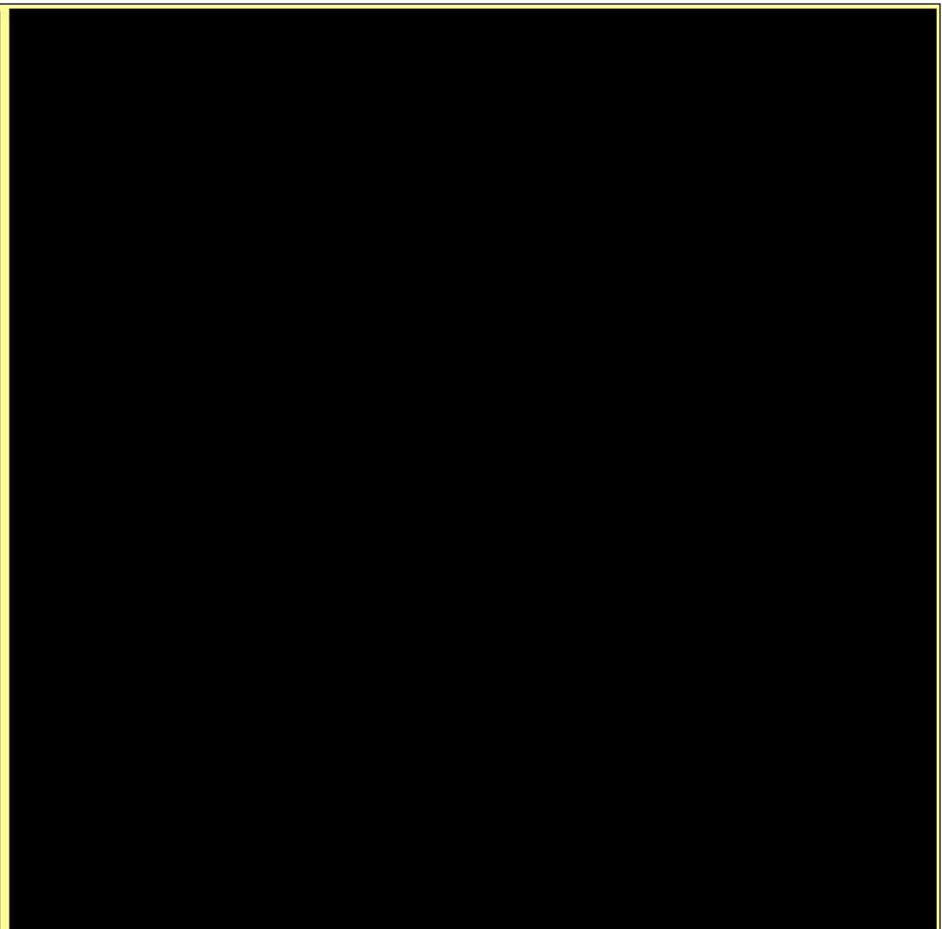
- **Collects clinical mental health information, current and recent substance use disorder issues, and lethality assessment information to inform the consumer's need for active rescue.**

- The OpenBeds intake form includes the ability to collect all relevant caller clinical and incident information including the following:
- Incident details
- Incident safety details
- Person's clinical history: active and prior mental health and SUD conditions, trauma history, impairments, history or prior hospitalizations, medications, safety and stability
- Person's care team
- Person's payor
- Attachments in the form of documents and photos.
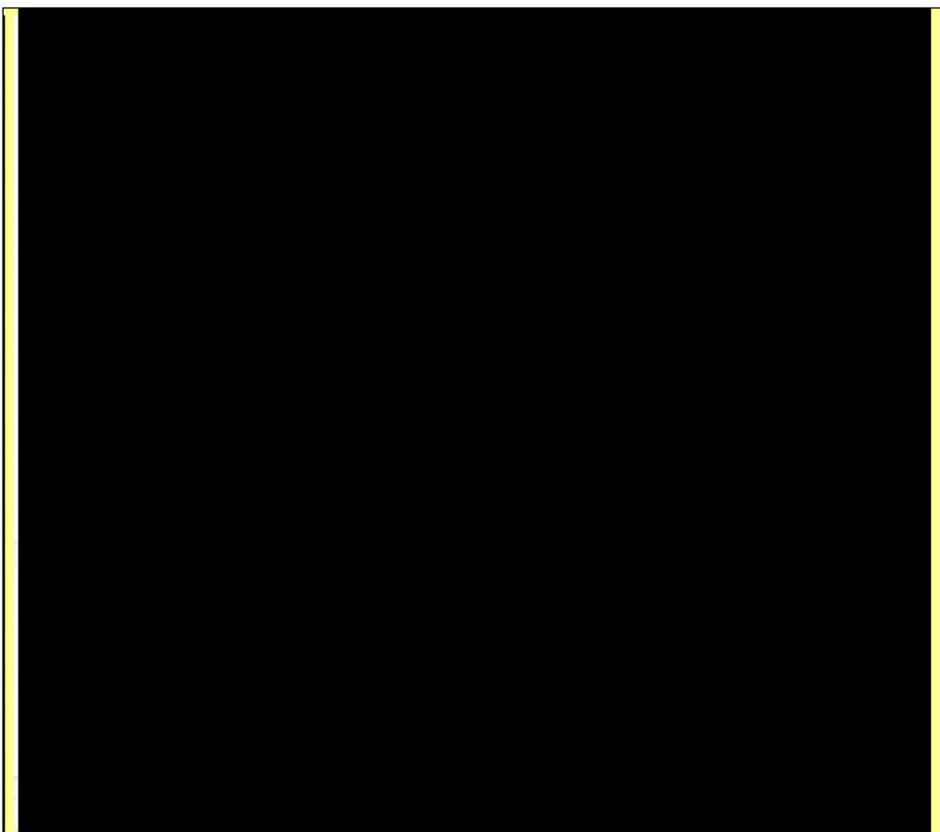
The crisis management professional can also complete the Columbia Suicide Severity Assessment.
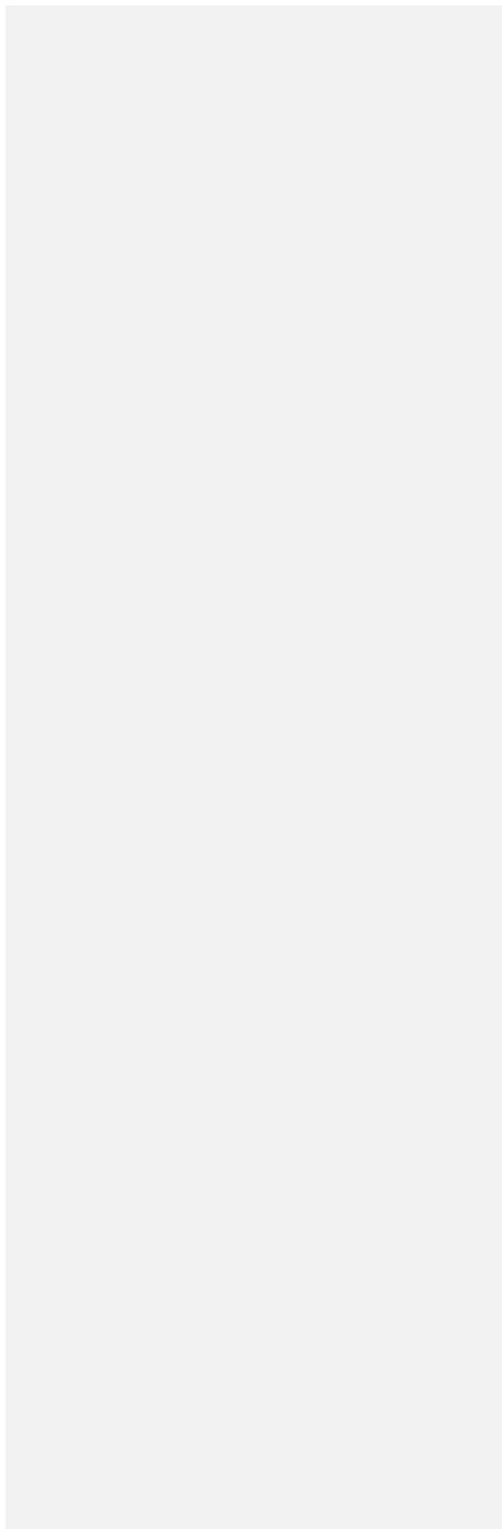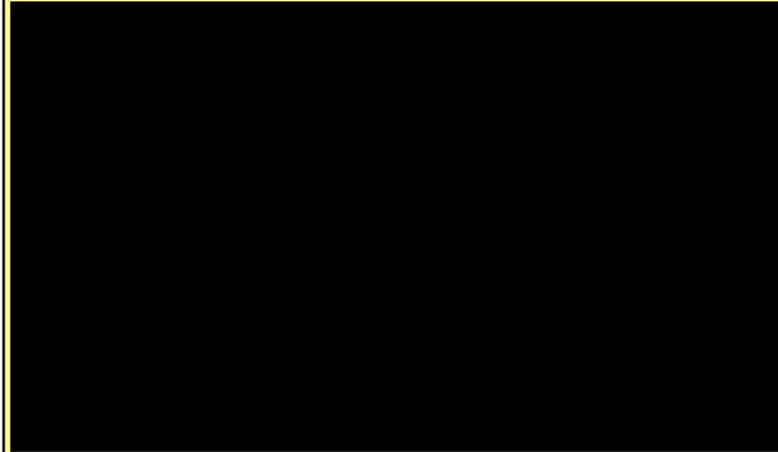
- **Displays and collects information about the consumer's choice of referral options, referral follow-up information, and consumer complaint or satisfaction feedback.**

All information provided by an individual, including referral options, will be collected and stored using a unique and secure patient identifier. OpenBeds uses this unique patient identifier and patient matching services to build and maintain a longitudinal patient record to maintain caller preferences, historical mental health or SUD treatment experiences, qualitative incident information, level-of-care treatment assessments, lethality assessments, referrals, and additional behavioral health-related information. Crisis management users have role-based access to all or appropriate parts of the patient record and history.

Genesys's comprehensive cloud-based call center solution tracks call status and completion, documents call information in real-time to the OpenBeds system, and supports follow up call workflows at 48 hours to check on an individual's status or to conduct questionnaires on satisfaction. This critical feedback loop allows for ongoing assessment and improvement.

- **Offers expanded form and automated report generation capabilities.**

OpenBeds offers three different types of reporting capabilities. First, we offer a real-time analytics dashboard that tracks crisis call and mobile team time intervals and outcomes, behavioral health provider service capacity and utilization, access to treatment, and referral patterns at the regional and local (organization and service) levels. State and regional officials have real-time access to all operational data across the network via dedicated views. The nature of the access (de-identified or identifiable data) is based on federal and state-specific privacy regulations, along with state agreements with organizations in the network. Reports can be generated at the Tableau dashboard and exported to multiple different formats.

Second, we offer local real-time dashboards and a mechanism to extract data to the call centers, mobile crisis teams, treatment providers and other referring organizations at the network and treatment organizations. Account administrators at each network member location have dedicated privileges to access the capacity and referral analytics for their organizations. Treatment administrators can differentiate the data associated with referrals received and referred out of their organizations. Specific data elements and a summary of all data from a given timeframe can be exported to a Microsoft Excel spreadsheet for further analysis and reporting.

The state, regional, and local dashboards are configurable to the needs of the stakeholders.

Third, we currently deliver custom, deep-dive reports to our state customers and can do so for state leadership at regular intervals. We also operate a Tableau reporting dashboard that allows regional officials to self-generate these deep-dive reports on demand

- **4.1.2 – Bed Registry –** Describe how the Proposed System will meet the following attributes and how each component will function.
  - Offers a clinical decision support tool to assess the Level of Care needed.
  - Displays current datapoints regarding facilities, including the number of Beds Occupied/Available and the current Length of Stay, Day Admissions, Day Discharges, Facility Name, and Level of Care that was provided at each location.

- Sends automatically generated and/or direct communications to registered facilities regarding bed vacancy numbers or questions.
- Collects data points of the individual needing a bed such as Demographics, Diagnosis, Support Needs, and Insurance.
- Collects data points of the Provider/Facility of the bed, such as Name of Program/Business, Location of Program, Beds Available by type and provider/facility demographic, Length of Stay, Admit date, Discharge Date, and Reason for declination.
- Collects system-level data points, such as Referral Source, Date/Time of Referral, Date/Time of connectivity to support, Screening Tool, and Waitlist for beds.
- Locates and displays available beds within the closest proximity of the individual needing care, with filters for proximity and facility demographic.
- Permits staff to decide which facility to send the individual in crisis' information to.
- Connects and/or exchanges pre-screening information to a facilities Electronic Health Records System.

Bed Registry

- **Offers a clinical decision support tool to assess the Level of Care needed.**

We offer three versions of a clinical decision support tool based on the American Society for Addiction Medicine (ASAM) criteria for decision support regarding the SUD level of care. There are two versions available at the provider-facing site: one for clinicians and another for non-clinicians. OpenBeds' Addiction Treatment Needs Assessment (ATNA) available through our public-facing portal, Treatment Connection, has been developed with and clinically validated by ASAM. It serves as an important door as Hoosiers are directed to this from the popular Google Recover Together site. A decision support tool based on LOCUS criteria is in progress and will be available at the time of launch.

Our decision support tools have undergone extensive user interface and experience testing with users. Screenshots of one of the tools is provided below.

Clinician-Facing Decision Support Tool for SUD Level of Care
The assessment and resulting recommendations are based on a proprietary and quantitative model derived from ASAM's Six Dimensions of Assessment. This assessment is patient-centered and uses non-discriminatory language focused on SUD.

It is optional to enter patient identifiers. The assessment begins with questions to assess whether the patient is a candidate for medications for opioid use disorder.
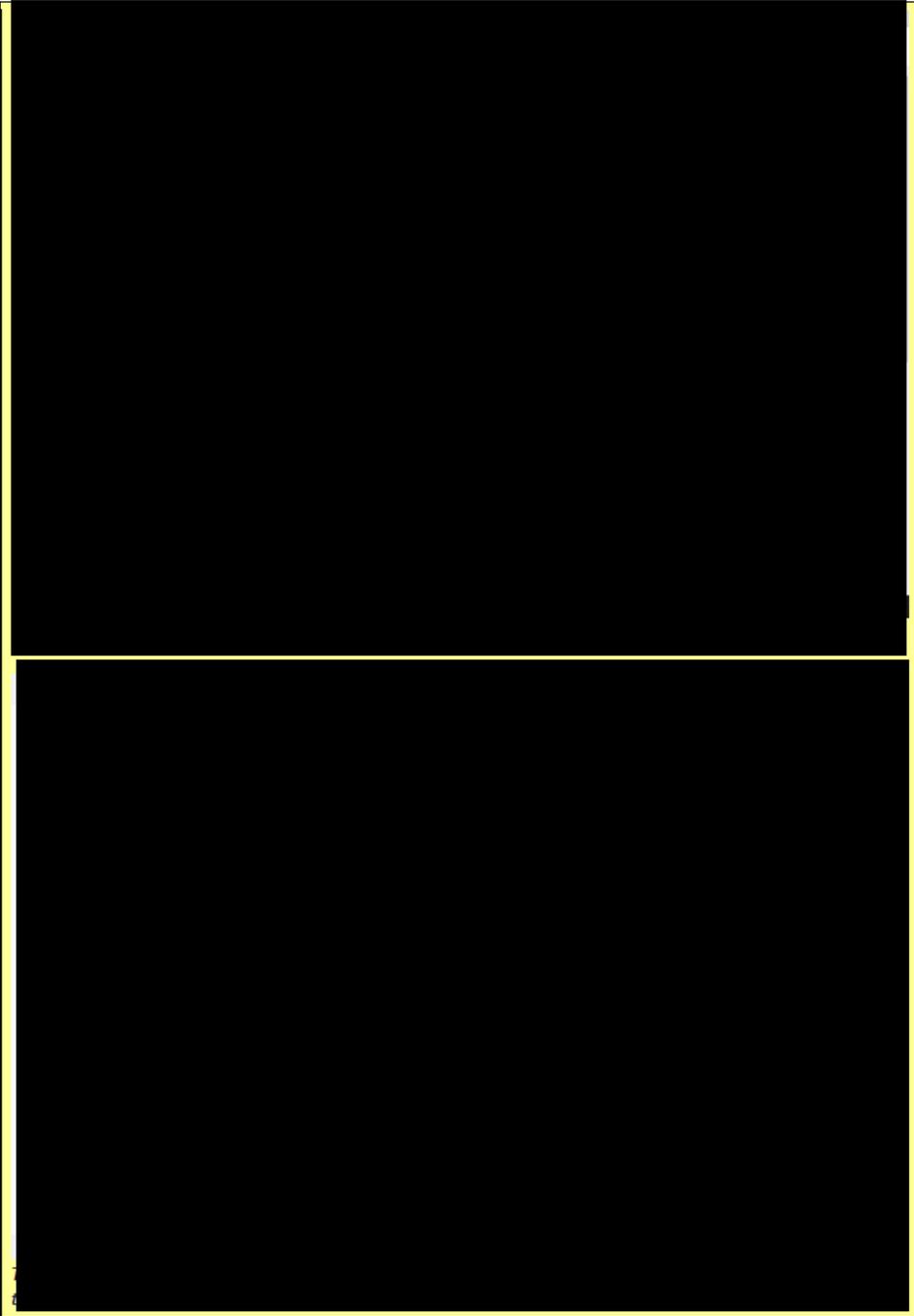
*made on this page, the responses are scored. Upon clicking the **Submit** button, the dimension is scored using our proprietary logic.*

- **Displays current datapoints regarding facilities, including the number of Beds Occupied/Available and the current Length of Stay, Day Admissions, Day Discharges, Facility Name, and Level of Care that was provided at each location.**

OpenBeds includes a capacity inventory of available psychiatric, crisis, dual diagnosis, withdrawal management, and residential treatment beds; inventory of available outpatient treatment services (including medication-assisted treatment); transparency of service capacities throughout the network across the full spectrum of mental health and substance use disorder treatment and recovery services, maintained by treatment providers, hospitals. and crisis units.

The OpenBeds system can collect and display the current Length of Stay, Day Admissions, Day Discharges, Facility Name, and the Level of Care that was provided at each location.

The system can be manually updated from a desktop or mobile device. The relevant users can set up mobile text prompts to update the system at given intervals. A current product enhancement supports ingestion of ADT data elements to auto populate bed availability and current bed use at facilities within the state network.

Bed availability can be filtered by multiple criteria including proximity to a specified zip code, treatment type, facility demographics, level of acuity, etc.

The OpenBeds system allows users to locate services near them in several ways. Users may filter by varying distances from a zip code; these distances are configurable by state. Referring users may filter by varying distances from the individual's location.

- **Sends automatically generated and/or direct communications to registered facilities regarding bed vacancy numbers or questions.**

The solution houses contact information for all individuals responsible for updating (where updates are done manually) and automatically texts or emails based on the State's requirements when information is not updated in a timely manner.

- **Collects data points of the individual needing a bed such as Demographics, Diagnosis, Support Needs, and Insurance.**

The system allows for recording and storage of demographics, treatment history, current support needs, diagnosis, and insurance provider information. The longitudinal patient record allows for ongoing maintenance of an individual profile with key identifiers and events.

- **Collects data points of the Provider/Facility of the bed, such as Name of Program/Business, Location of Program, Beds Available by type and provider/facility demographic, Length of Stay, Admit date, Discharge Date, and Reason for declination.**

The system includes a provider directory inclusive of all key data listed here. These data can be ingested from a state provider directory and/or easily entered by treatment providers. Providers can easily edit their directory entry at any time. OpenBeds network managers do a quarterly sweep of all provider/facility data to ensure that these are up to date.

- **Collects system-level data points, such as Referral Source, Date/Time of Referral, Date/Time of connectivity to support, Screening Tool, and Waitlist for beds.**

The system collects key time and date stamped data points throughout the entire referral workflow beginning at intake and ending with a close-the-loop functionality to report on "show/no-show". Throughout this workflow, assessment results and additional information can also be recorded.

The system records data points for referral initiation and any action taken by the provider agency to acknowledge accept, decline, or forward a referral. *Administrators can easily extract data for reporting at the individual facility, provider, or state level.*

- **Locates and displays available beds within the closest proximity of the individual needing care, with filters for proximity and facility demographic.**

The OpenBeds Crisis Management Solution offers built-in GPS functionality to support location related requirements. Bed availability can be filtered by multiple criteria including proximity to a specified code, treatment type, facility demographics, level of acuity and clinical inclusion and exclusion criteria.

The OpenBeds Crisis Management Solution allows users to locate services near them in several ways. Users may filter by varying distances from a zip code; these distances are configurable by state. Referring users may filter by varying distances from the individual's location.

- **Permits staff to decide which facility to send the individual in crisis' information to.**

The OpenBeds Crisis Management Solution allows call center staff the option to either refer an individual directly to a facility using our digital referral workflow or dispatch a mobile crisis team. Mobile crisis team users can easily send an individual's crisis information and refer to a facility, based on the individual's needs.

Call center staff can easily toggle between the Mobile Crisis Provider and Behavioral Health Provider dashboards and select which pathway is necessary for the client. The dual dashboard view can expand and collapse as needed, bringing into focus the necessary services to quickly serve the consumer.

At the Behavioral Health Provider dashboard, the crisis management professional can search for the appropriate type and level of treatment for the consumer. They can view the availability of inpatient and outpatient treatment services, along with detailed clinical inclusion and exclusion criteria. They can also quickly send a digital referral for assessment or treatment from the dashboard. They can then quickly schedule an appointment on behalf of the client.

At the Mobile Crisis Provider dashboard, the crisis management professional can view crisis mobile team status, location, and dispatch information, including a high-level overview of the case, whether law enforcement is present and the number of responders. They can digitally communicate with and dispatch a mobile crisis team from the dashboard. Finally, they can track the individual's progress through call to mobile crisis team arrival and eventual placement.

- **Connects and/or exchanges pre-screening information to a facilities Electronic Health Records System.**

Bamboo Health maintains active integrations with more than 130 of the nation's EHR vendors; OpenBeds is built to support bi-directional data sharing with Epic and any EHR using a standards-based approach. The OpenBeds platform can be integrated with EHRs such as Epic and Cerner to prepopulate important patient demographics data and/or to share critical treatment plan, assessment results, or other information specific to that individual to ensure a comprehensive view for whole person care. We are also developing a comprehensive relationship with NetSmart, one of the largest Behavioral Health EHR vendors in the U.S.

- o **4.1.3 – Mobile Crisis Units –** Describe how the Proposed System will meet the following attributes and how each component will function.
  - Detects and depicts real time data points regarding mobile crisis vehicles including location, length of time at a particular location, and the number of individuals occupying a mobile crisis vehicle at any given time.
  - Supports active rescue by displaying the geographic location of the nearest Emergency Department, law enforcement agency, or other resources of the local Emergency Response Framework.
  - Collects mobile crisis response and referral data points including the duration of the response to dispatch, transit time, mobile crisis intervention and assessment, and linkage to services as well as the final disposition by type.
  - Collects and displays consumer information including follow-up contact information, legal status, age, if the individual is within a special population, the location of the dispatch, the primary presentation and/or co-occurring presentation of the call (if applicable).
  - Identifies and displays risks that may be present at a dispatched location, such as safety concerns/issues.
  - Offers an automated notification/alarm system to alert dispatching center if no response has been received from the mobile team dispatched.

Mobile Crisis Units

- **Detects and depicts real time data points regarding mobile crisis vehicles including location, length of time at a particular location, and the number of individuals occupying a mobile crisis vehicle at any given time.**

Geolocation services provide a map view of all mobile crisis units by location and availability at all times. The map view can be altered depending on the desired geographic focus and distance from the caller.

The crisis call operator can easily access the Mobile Crisis dashboard when an on-premise mobile crisis response is needed. This map view provides the operator with a real-time view of all mobile crisis units within a given range and highlights proximity and availability for efficient decision making. It also highlights team capabilities, e.g., adult, youth, telehealth only, etc. During COVID, the telehealth only tag has been used due to short staffing.
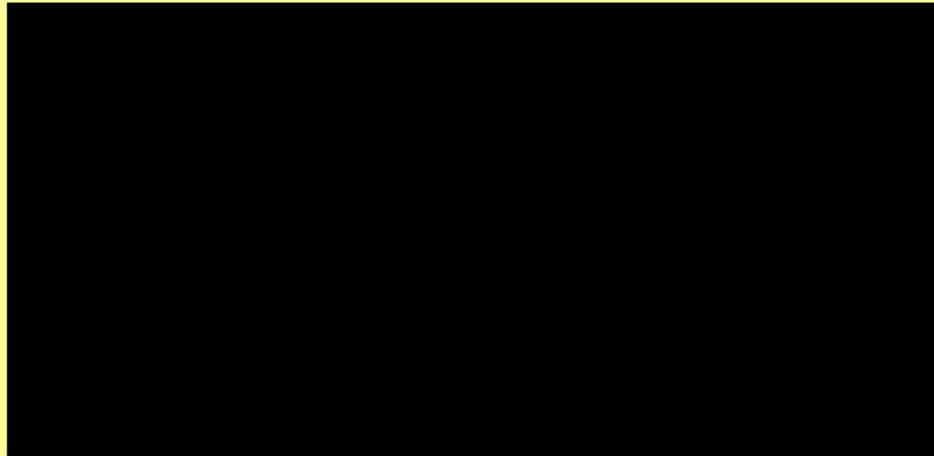
The Monitoring page provides the call center professionals with an overview of the mobile crisis team status, presence of law enforcement and the number of responders on the scene.

We could build capability to track the number of individuals in a vehicle.

- **Supports active rescue by displaying the geographic location of the nearest Emergency Department, law enforcement agency, or other resources of the local Emergency Response Framework.**

In addition to our base subset of local responders, we are constantly adding additional geolocation services are being added to include other key responding personnel within the Indiana network.

- **Collects mobile crisis response and referral data points including the duration of the response to dispatch, transit time, mobile crisis intervention and assessment, and linkage to services as well as the final disposition by type.**

Multiple response steps and time durations throughout the incident from call and intake through disposition, including the key ones cited above, are collected, calculated, and displayed via reporting and our analytics dashboard. Final disposition by type is collected and stored against that incident record, referral, and consumer longitudinal record.

- **Collects and displays consumer information including follow-up contact information, legal status, age, if the individual is within a special population, the location of the dispatch, the primary presentation and/or co-occurring presentation of the call (if applicable).**

The OpenBeds Crisis Management Solution offers a comprehensive collection of relevant consumer data at intake. During the call intake process, operators can log legal status in the system. During the call intake process, operators can log important demographic, service needs, and other information to inform the mobile team. Special population information captured includes pregnant, veteran, hearing impaired, homeless, and vision impaired. Age group information of the individual in crisis includes child, adolescent, adult, and senior. A distinct youth intake form is provided. The fields at the intake form are easily configurable by the state at the admin dashboard and could be customized as necessary.

Mobile crisis teams are also able to input data discovered during the incident response to update scene information and enhance the overall incident report.

For dispatch, the system allows for address and/or meeting location information recording. The meeting location is a hard entry at the intake to facilitate dispatch. Geolocation services present that information in real time to mobile teams for easy directions and location services, such as hospital, street, social services agency, residence, and jail.

- **Identifies and displays risks that may be present at a dispatched location, such as safety concerns/issues.**

Risks and safety concerns are communicated by the intake form to mobile units at time of dispatch and can be updated by responders. Responders can view the intake form prior to accepting a dispatch.

The OpenBeds Crisis Management Solution offers an optional module for search of an individual's incarceration history that can further provide insight on the individual in crisis. This is being deployed in Washington due to a regulatory mandate.

- **Offers an automated notification/alarm system to alert dispatching center if no response has been received from the mobile team dispatched.**

OpenBeds Crisis Management Solution offers configurable response alerts by email or text to inform users about key events. Configurations can be done at the State, regional or individual user level to ensure that

all personnel are properly informed with actionable data to drive efficient and effective crisis management response.

Configurable response alerts allow states to determine when to alert dispatch if no response has been recorded.

- o **4.1.4 – Appointment Scheduling –** Describe how the Proposed System will meet the following attributes and how each component will function.
  - Captures appointment information including Appointment Type, Start and End times, and day of the week, month, and year, check in time, no show/cancelled/rescheduled appointments, and notes associated with the appointment.
  - Captures consumer information including name and acuity level.
  - Captures the provider information including identification number, service location address, and the staff member who scheduled the appointment.
  - Sends e-mail appointment reminders to all parties listed on the scheduled appointment.
  - Offers an interactive scheduler with community providers that displays availabilities and secures time-slots in real time.

Appointment Scheduling

- **Captures appointment information including Appointment Type, Start and End times, and day of the week, month, and year, check in time, no show/cancelled/rescheduled appointments, and notes associated with the appointment.**

OpenBeds Crisis Management Solution currently captures appointment type, show/no show status and free text notes as to whether the appointment is canceled or rescheduled, along with any additional notes.

In Phase 2, we will build a scheduler that could capture appointment date, start and end times, and check in time. It is already in the current product roadmap.

At launch in July, we propose that appointments be scheduled using the out-of-the box system as follows: 1) providers display their next available appointments, or when they have reserved appointments for the crisis line and 2) appointments are scheduled and tracked using the messaging feature. Feedback about whether the patient is a Show/No-Show/Canceled/Scheduled and additional notes can also be communicated at the out-of-the box system, as detailed above.

- **Captures consumer information including name and acuity level.**

OpenBeds Crisis Management Solution captures name, acuity level and other demographic and clinical data, including but not limited to phone number, gender, urgency of need, if the referral is voluntary/non-voluntary, with room for additional notes.

- **Captures the provider information including identification number, service location address, and the staff member who scheduled the appointment.**

OpenBeds Crisis Management Solution captures the required provider data information above. In addition, all provider and corresponding service location addresses are entered into the OpenBeds database at implementation and can be kept up to date by the providers using an easy-to-use provider

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Service Management tool. Our network administration team does a quarterly sweep to ensure that all data are current and accurate.

- **Sends e-mail appointment reminders to all parties listed on the scheduled appointment.**

OpenBeds Crisis Management Solution out-of-the-box notifications are sent via the system to operators, mobile crisis teams and treatment providers. Configuration offers appointment reminders for the consumer.

- **Offers an interactive scheduler with community providers that displays availabilities and secures time-slots in real time.**

Out of the box, next available appointment or dedicated appointment slots for the crisis system can be displayed, and appointments secured via the messaging functionality. OpenBeds can provide an interactive scheduler through customization as well, as detailed above.

- o **4.1.5 – Tracking and Reporting Operations Data –** Describe how the Proposed System will meet the following attributes and how each component will function.
  - Offers real time displays of data in a dashboard view.
  - Enables reporting on all data fields within each module and provides reporting and query tools for end users to create and run real time reports.
  - Exports data in multiple formats such as Excel, Word, and XML.
  - Measures call center metrics such as call volume, average speed of answer, average delay, and abandonment rate.
  - Measures Mobile Crisis Services metrics such as number served, average response time, and percent of mobile crisis responses resolved.
  - Measures Stabilization Services metrics such as number served, percentage of referrals accepted, and average length of stay.

Tracking and Reporting Operations Data

- **Offers real time displays of data in a dashboard view.**

OpenBeds Crisis Management Solution offers the following attributes:
- The System has the option to display data in a dashboard view in real time.
- The System can report on data fields within each module.
- The System can export data in multiple formats, including but not limited to Excel, Word, and XML.
- The System can provide reporting and query tools that allow end users to create and run real time reports.

- **Enables reporting on all data fields within each module and provides reporting and query tools for end users to create and run real time reports.**

The OpenBeds Crisis Management Solution provides reporting using the core data fields at the system. The system can be configured to enable reporting using additional data fields, as the State sees fit.

OpenBeds Crisis Management Solution uses Tableau dashboards to produce real time and interactive reporting. Users can filter by different fields including organizations, service types, and date ranges. Users are also able to download and export the data to multiple formats.

- **Exports data in multiple formats such as Excel, Word, and XML.**

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Reports are generated at the dashboard and exported to multiple formats including Excel, Word, and XML.

- **Measures call center metrics such as call volume, average speed of answer, average delay, and abandonment rate.**

The OpenBeds Crisis Management Solution integration with Genesys Cloud, reports at the individual and aggregate level on call center call volume, performance and speed to answer, average delay, and abandonment rate, and percentage of calls resolved at the call center.

- **Measures Mobile Crisis Services metrics such as number served, average response time, and percent of mobile crisis responses resolved.**

OpenBeds Crisis Management Solution reports on the number of mobile teams dispatched, number served, average response times, percentage of calls responded to within 1 hour and 2 hours, longest response time, and percentage of mobile crisis responses resolved in the community.

- **Measures Stabilization Services metrics such as number served, percentage of referrals accepted, and average length of stay.**

OpenBeds Crisis Management Solution offers a robust set of reports regarding Stabilization Services including:
- Capacity
- Utilization
- Number served
- Time from referral to decision by service
- Frequency of referrals accepted/declined and show/no-show, along with proportions
- Frequency of referrals received and referred out
- Rationale for declined referrals
- Referral patterns across the state
- Demographics of patients referred: gender, age category, special programming, payment type, voluntary/involuntary, acuity, substance(s) involved.

- **4.2 – Technical Requirements –** Describe how the Proposed System will meet the following attributes and how each component will function.
  - Meets all requirements of the Federal government for 988 Crisis Call Center Data Platforms and complies with all State security standards.
  - Leverages a web-based platform using modern architecture standards capable of handling a large number of users.
  - Please provide an architecture diagram of the infrastructure of your Proposed System.
  - Offers Caller ID, chat, and text functionalities to interact with people in crisis.
  - Integrates with the Telephony system (*see* SOW Section 3.1) and offers call recording capabilities.
  - Offers configurable user provisioning to manage access for authorized users.
  - Supports redundancies between call centers.
  - Offers a reliable infrastructure including ongoing upgrades, maintenance, back-ups, and performance assessment.
  - Interfaces with other systems via API as applicable.

Technical Requirements

- **Meets all requirements of the Federal government for 988 Crisis Call Center Data Platforms and complies with all State security standards.**

The OpenBeds Crisis Management Solution was architected and designed to meet and, in some cases, exceed Federal and State security standards.

The OpenBeds system is fully compliant with HIPAA, 42 CFR Part 2, as well as applicable State and federal laws. We utilize the standards required by HIPAA and HITECH using the NIST 800-53 framework to create the security model that is used by our health ecosystem of products. We leverage internal and third-party security assessments to identify risks to systems and data. By implementing security controls at multiple levels and by having outside experts evaluate our controls, we provide compliant solutions with robust security and operational soundness for managing health data systems.

OpenBeds will ensure a SOC2 Type 2 audit covering the 5 Trust Services Criteria is performed annually. Results of audit and remediation action plans will be provided annually. We also will maintain certification using an industry recognized framework with equivalent or greater controls such as HITRUST.

We adhere to industry standard security practices and have obtained, and are committed to retain, both SOC2 and HITRUST security certifications. Bamboo Health leverages internal and third-party security assessment to identify risks to systems and data. By implementing security controls at multiple levels and by having outside experts evaluate our controls, Bamboo can provide compliant solutions with robust security and operational soundness for managing Health data systems. Bamboo Health leverages several best-in-class strategies to ensure the health ecosystem of products are scalable, highly available, and fault tolerant.

Bamboo Health has selected and supports the Amazon Web Services (AWS) Cloud Computing environment for storage, computing, and database to ensure our solutions are built leveraging industry best practices with a focus on security, high availability, and fault-tolerant design. AWS cloud computing center is a secure, durable technology platform with industry-recognized certifications and audits: PCI DSS Level 1, ISO 27001, FISMA Moderate, FedRAMP, HIPAA, and SOC 1 (formerly referred to as SAS 70 and/or SSAE 16) and SOC 2 audit reports. AWS services and data centers have multiple layers of operational and physical security to ensure the integrity and safety of the data.

Bamboo Health will maintain an information systems and data security policy and conform to the State's information systems security policy. This policy will meet the State's Information Security Framework. Bamboo will create and submit a plan for ensuring the security and protection of the State's data, which is not limited to member Protected Health Information (as that term is defined in HIPAA.) and submit a copy of this policy to the State sixty (60) days prior to the commencement of services under this Contract.

The plan will provide Bamboo Health's efforts to ensure that PHI is not used, disclosed, or maintained in a manner not in accordance with the law or best practices. Bamboo Health will maintain a policy (mentioned in the plan) for the secure destruction of information. In the plan, Bamboo Health will state the security and privacy features of the proposed technology and the types and frequency of security audits that the State can expect Bamboo to perform during the contact. Results will be shared with the State. Bamboo Health's solution will describe the State's Active Directory repository to authenticate users, where applicable. Additionally, Bamboo Health will expound the architecture utilized to authorize users within the system in the plan.

- **Leverages a web-based platform using modern architecture standards capable of handling a large number of users.**

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Yes, OpenBeds leverages web-based helpline software utilizing modern architecture standards capable of handling a large number (thousands) of users.

- **Please provide an architecture diagram of the infrastructure of your Proposed System.**

Following is an architecture diagram of the OpenBeds infrastructure:
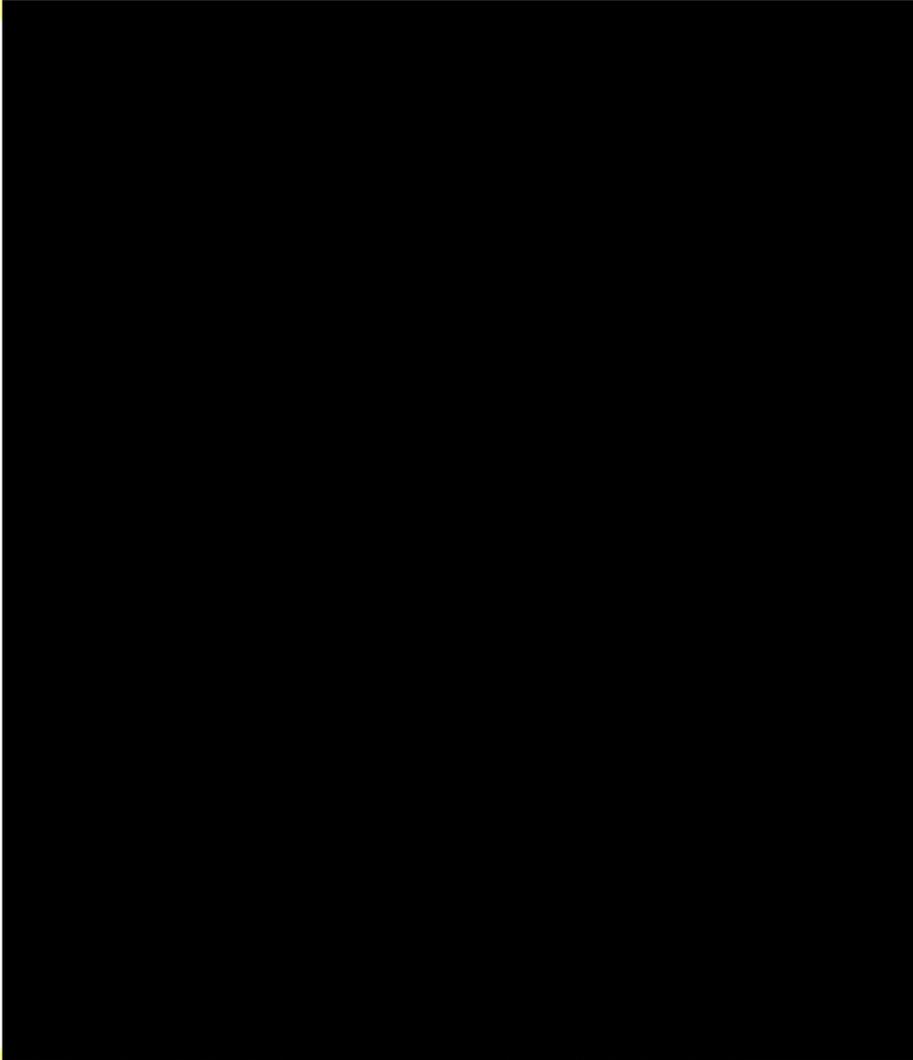
- Offers Caller ID, chat, and text functionalities to interact with people in crisis.

OpenBeds will integrate with the Indiana CCaaS as guided by Avtex. The CCaaS is Genesys Cloud, which enables intake specialists to communicate by phone, text, and chat. Texts and chats can be warmly transferred like a telephone call and allow us to support treatment coordination to meet the unique needs

of children, adolescents, adults, and older adults. All referrals and transmission of clinical triage summaries, safety plans, and shared care plans will be captured are captured and stored in the OpenBeds system.

- **Integrates with the Telephony system (*see* SOW Section 3.1) and offers call recording capabilities.**

OpenBeds will integrate with the Indiana CCaaS as guided by Avtex. The CCaaS is Genesys Cloud. The integration available at launch in July will be an 'in pane' view OpenBeds system to prevent crisis line staff from having to switch windows. OpenBeds will be able to report out on duration of calls, number of contacts received and answered, speed of answer, abandonment rate, total number of direct calls rolled over to the national 988 centers. During Phase 2, the Genesys system will be deeply embedded at OpenBeds to enable the transfer of data between the two systems.

- **Offers configurable user provisioning to manage access for authorized users.**

OpenBeds ensures only authorized users can access the platform. OpenBeds provides a role-based access control model with specific roles and viewing privileges for crisis operators, mobile crisis respondents, crisis line administrators, mobile crisis team administrators and state administrators. There are also distinct roles for users at the treatment organizations and other referring organizations at the system. For example, the crisis line, mobile crisis, treatment provider and other referring organization administrators have dedicated privileges to manage users, access data, and analytics for their organizations. They can edit provider accounts and user and service information; access the analytics dashboard; and extract data from the analytics dashboard. In Indiana, 211 personnel have dedicated roles and views of the system.

During our implementations in New Hampshire and Washington, we elucidated the need for many users to have several roles. For example, a crisis operator may also need an administrator view, a crisis operator may need to dispatch themselves as a mobile crisis team respondent, or a mobile crisis team respondent may also need to accept an outpatient appointment as a treatment provider. As a result, we built a 'multi-account' setting such that a given users can access multiple roles using a single set of credentials, thus preventing the need for multiple accounts and credentials at the system.

- **Supports redundancies between call centers.**

The Genesys Cloud platform supports redundancies between call centers.

- **Offers a reliable infrastructure including ongoing upgrades, maintenance, back-ups, and performance assessment.**

Bamboo Health offers state-of-the-art facilities and technologies delivering reliable services to our clients. As an example, we leverage a Private Cloud with AWS US-East and US-West regions for hosting, data processing and backups as well as many leading technologies inherent within AWS ecosystem. Bamboo Health will provide the following technology and specifications:

- Commercial-Off-The-Shelf (COTS)
- Interfaces and/or integration
- Web-based Custom Off-the-Shelf (COTS) application
- Maintenance/Support

- Reliability
- Queries and Reports
- Disaster Recovery
- Security
- Help Desk Support

Bamboo Health solutions are required to follow a strategic architecture that supports high availability and fault tolerance design to eliminate single points of failure across the ecosystem. All elements of the

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ecosystem are deployed to distributed, highly redundant infrastructure that is deployed across multiple Availability Zones (Data Centers). Storage requirements must provide distribution across multiple Availability Zones with near real time replication. Bamboo Health solutions must function with minimal to no customer impact due to a loss of an Availability Zones or application infrastructure. This strategy is solved by leveraging Cloud Architecture best practice, stateless application design, and containerized deployment strategies to several locations leveraging Kubernetes. No single points of failure exist in the overall Bamboo Health ecosystem concerning backup and recovery solutions and procedures.

Bamboo Health runs DB clusters with high availability enabled which enhances the availability during planned system maintenance and helps protect the databases against failure and Availability Zone disruption. In this configuration, the primary Aurora RDS DB instance is synchronously replicated across Availability Zones to Aurora RDS Replicas to provide data redundancy, eliminate I/O freezes, and minimize latency spikes during system backups.

Bamboo Health leverages microservices to separate disparate functionality and reduce the size of a fault domain. We also leverage ephemeral containers to allow for dynamic auto-scaling (horizontal) to ensure that the platform performs consistently regardless of load/volume. Additionally, Bamboo Health has a well-defined Disaster Recovery process that leverages an alternate AWS region.

Bamboo provides a robust selection of data retention options to abide by State law with records to be purged to Masked Analytics and Masked Archive.

Bamboo will enable a limit on data coming into PMP Clearinghouse, preventing data older than a predetermined number of months. This limit will be based on the "filled at" date. A new record is created in production and then copied to the Data Warehouse. Once a record's "filled at" date reaches the timeframe, that night, a copy of the record will be masked and placed into the Data Warehouse and Archive. The original record containing identifiable patient data will then be destroyed and made irretrievable from both production and the Bamboo Data Warehouse.

Bamboo Health understands that states may have nuanced data retention requirements and will work with the State to ensure that the system is compliant with state law.

We will provide a mutually agreed upon reloading process between Bamboo Health and the State. It should be noted that the timeline for archiving data may depend on the amount of data requested to be archived due to processing time.

- **Interfaces with other systems via API as applicable.**

The core capabilities within OpenBeds have been modularized so that features can be easily shared with other Bamboo Health systems to provide greater insight across the product suite. Additionally, OpenBeds uses a variety of APIs to interface with external systems. These include:

- FHIR integration that populates an OpenBeds referral form using data on a patient's EHR
- Automated pdf creation for attachments from the EHR necessary at the referral
- Support OIDC to perform bed availability search through an API
- SSO to support workflow integration to complementary 3rd party systems (i.e., EHRs, CRMs and transportation services)

In development are APIs to support automatic updating of bed availability inventory, creating referrals, querying referral status, and querying patient referral history.

5 **SOW Section 5 – Implementation Services, System Training, and Ongoing Support**

Explain how you propose to execute SOW Section 5 in its entirety, including but not limited to the specific elements highlighted below:

- **5.1 – Implementation Services**
  - Describe your plan for ensuring the Proposed System is available, on-line and operational in line with the service levels outlined in the Scope of Work. Specifically, what will be online on July 1, 2022 and what aspects of the system would require subsequent roll-out, if any.
  - Describe your approach to developing and submitting the Requirements Plan.
  - Describe your proposed testing activities. Describe your approach to developing and submitting a testing plan that covers all developed and Proposed System.
  - Describe your approach to developing, maintaining, and updating a 988 Software User Manual and Operating Procedures Manual in collaboration with FSSA staff to ensure the most up to date material.
  - Describe your approach to developing and maintaining a plan to ensure compliance with all current State and federal laws, policies, procedures, and regulations, including those explicitly mentioned in the Scope of Work as well as others not explicitly mentioned. Describe your plan to stay up to date with all relevant rules and regulations.
  - Describe your Proposed System for working with the State regarding enhancements or releases. Describe how this system secures state sign off.
  - How will you prioritize requests from the State of Indiana while balancing requests for other clients that have the same or similar timelines?
  - Describe your approach to issue resolution, including how you will log and report issues, address trouble-shooting tools, and measure the success of issue resolution efforts.
  - Describe your commitment and ability to attend and actively participate in required meetings.
  - Describe your approach to developing a Risk Management and Mitigation plan, including a process for documenting and reporting risks and risk status to the State. Describe how you will track, manage, and report risks to the State. Address any tools you will utilize.
  - What tools do you plan on using to document and track requirements, development work, configuration work, test cases, test scripts, and defects?
  - Describe how you will manage system defects during the project.
  - Provide a document to describe your company's project management approach and methodology for this project. This should be a high-level document that pulls everything together.
  - Provide an example of a high-level project schedule for this project. This should include your company's tasks, sub-contractor owned tasks (if applicable), and State-owned tasks in an integrated fashion. Include key tasks as part of development, testing, training, data conversion, other key areas of the project.
  - Affirm your commitment to helping the State obtain CMS certification for the Future System and provide your experience in supporting clients' obtaining such certification, if any.

Implementation Services, System Training, and Ongoing Support

Implementation Services

- **Describe your plan for ensuring the Proposed System is available, on-line and operational in line with the service levels outlined in the Scope of Work. Specifically, what will be online on July 1, 2022 and what aspects of the system would require subsequent roll-out, if any.**

Care coordination throughout the entire healthcare ecosystem is the cornerstone of our vision and central to the 988 Crisis initiative. The OpenBeds Crisis Management Solution is live in New Hampshire (NH), with the states of Washington and Missouri currently in implementation. We have been supporting crisis lines and crisis stabilization units with the OpenBeds Capacity Management and Referral System in other states for years. Based on our significant crisis management experience, Bamboo Health proposes a phased rollout schedule to realize the full vision and expansion of services with Indiana's 988 Crisis initiative including a 1) Phase 1 delivery by July 1, 2022, 2) System launch assessment by Briljent following Phase 1 launch and 3) Phase 2 delivery by December 2022 to be informed by assessment.

Bamboo Health proposes the following aspects of the Crisis Management Solution to be online in Phase I, by July 1, 2022:

- Lifeline operators could use our Crisis Management Module as a CRM for calls.
- Superficial integration with Genesys Cloud, providing an in-pane view of the Crisis Management Module, such that the Lifeline operators do not need to switch windows.
- Lifeline operators use OpenBeds to refer to outpatient mental health or SUD care, leveraging the existing outpatient network.
  - Scheduling involves the following:
    - Designated outpatient providers to display their weekly and fixed available slots for crisis (this will require OB customization to display multiple dates and times).
    - Lifeline operators can schedule via messaging and get feedback about the outcome of the referral using the Show/No Show functionality.
- Onboard the 6 state psychiatric units at the OpenBeds Capacity Management and Referral System
- Reporting related to calls and referrals at OpenBeds delivered as static reports to state
- Briljent assessment on system launch capabilities, provider input and prioritization regarding next phase of functionality.

Phase 2 delivery from July to December 2022:

- Computer telephony integration (CTI) for our Crisis Management Module with Genesys such that their system is embedded at ours (if not already done in Phase 1).
- Onboard mobile crisis teams to Crisis Management Module and Capacity Management and Referral System (accept dispatches, document assessments, and refer to crisis stabilization and outpatient care).
- Onboard crisis stabilization units to receive referrals from mobile crisis teams and refer up or down the continuum of care.
- Build out scheduler (if state desired) or integrating with major provider EHR scheduler.
- Build granular bed management system for state psychiatric hospitals and crisis stabilization units to capture wait lists and times.
- Build out necessary real-time reporting dashboard with necessary metrics (add Indiana-specific metrics to current core set of reporting metrics)

- Launch mobile crisis unit dispatching, urgent appointment scheduling and granular bed tracking at some point between September and December 2022.

Bamboo Health's Project Management Office will coordinate all aspects of the Crisis implementation and project management for the DMHA across all phases, including:

- Orientation
- Ongoing weekly meeting coordination between Bamboo Health project team and DMHA from contract execution through launch; bi-weekly maintenance meeting coordination post-launch
- Coordination and project management of all pre-launch and launch tasks
- Change control
- Network expansion

Additionally, the Project Management Office will track the following deliverables:

- Project Plan – no work will start without the DMHAs written approval of the Project Plan
- Test Plan
- User Acceptance Plan
- Training Plan
- User Guides (online or. Hard copies)
- Help Desk Support Plan
- Disaster Recovery/Contingency Plan
- Implementation Plan
- Operational Readiness Checklist/Hardware, software installation punch list

Bamboo Health will develop a detailed project management plan for State approval sixty (60) days prior to the commencement of any services under this Contract. This plan will address how Bamboo Health will provide timely and quality services, effective and reliable technology, qualified staffing, project management tools, and ongoing collaboration between Bamboo Health, any subcontractors, State, State designees, and any other identified stakeholders. Bamboo Health will maintain the finalized management plan and make it available to Contractor staff, State staff and State designees.

A single point of accountability ensures that a consistent set of management practices and techniques will be applied to all project activities. In addition to a qualified project manager, Bamboo Health allocates a project executive who provides corporate oversight and facilitates fast-tracking of resources and guidance, as needed. Bamboo Health assigns a dedicated Client Relationship Manager (CRM) who is responsible for overseeing post go-live, all interactions and deliverables for the DMHA. The CRM will support the project team throughout the life of the contract. This includes a regular cadence of meetings and one-on-one follow-ups as well as opportunities to meet in person. DMHAs single point of contact/CRM will be:

The project manager will manage the project punch list and work side by side with the Product and Engineering teams for timely completion of all deliverables and ensure the system is operational on July 1, 2022.

- **Describe your approach to developing and submitting the Requirements Plan.**

Within fifteen (15) days after the submission of the Project Plan and System Design, Bamboo Health will submit a plan for the gathering and validation of requirements from the State to be used in the design, testing and implementation of the OpenBeds Crisis Management Solution. The purpose of the Requirements Plan is to identify requirements and validate requirements with stakeholders. The Plan will include an approach to reaching an agreed upon system design and Acceptance Criteria with DMHA that will address all DMHA's requirements and ensure thoughtful and informed decisions by the State. Bamboo Health will establish the approach for addressing any new requirements identified between the release of the Requirements Plan and implementation date of the OpenBeds Crisis Management Solution. Bamboo Health will include all deliverables and major milestones to be achieved during design, development, and implementation (DDI) in the Requirements Plan.

Major steps in the implementation process and key parties responsible are outlined below:

Bamboo Health has accrued meaningful implementation experience with our crisis clients and our approach is continually evolving with each implementation. Indiana will benefit not only from our 12 existing state clients, NH Crisis project as well as the current Crisis implementations. The process below has generated successful metrics that Indiana can benefit from:

➢ *Kickoff meeting.* We will work with the State to schedule the meeting upon full contract execution to review implementation plan for the OpenBeds Crisis Management implementation. The OpenBeds Crisis Management Project Manager will coordinate with the State a mutually agreeable date and time for this meeting.

➢ *Identify software configuration and customization requirements.* We will define these unique requirements with the DMHA as soon as possible in order to complete development in time to produce a new instance of OpenBeds, which should be completed before we register and configure new member accounts. The OpenBeds Crisis Management Project Manager leads this task with support from the Senior Product Manager.

➢ *Define system configuration requirements.* In this step, we will work with you to define the values/nomenclature, such as the unique types of payments available in Indiana or

dispositions, for the forms, drop-down menus, and search filters. The OpenBeds Crisis Management Project Manager and Network Success Manager support this task.

➢ **Create a new instance of the OpenBeds Crisis Management Solution.** The DMHA system will be instantiated on its own servers within the greater Bamboo Health HIPAA-compliant environment. The OpenBeds Senior Software Engineer and the Software Engineering Manager will lead this task with oversight from the Senior Director, Software Engineering and Vice President, Software Engineering.

➢ **Create Indiana 988 crisis system goals, standards, and guidelines.** We strongly recommend that the DMHA define their goals and objectives for the system before the implementation begins so the State is prepared to share them with crisis system members, and so OpenBeds can use them to help produce a set of standards and guidelines that help achieve those results. The OpenBeds Crisis Management Project Manager will provide the State with sample set-up standards and guidelines.

➢ **Identify initial Indiana 988 crisis system members.** We will need from the State a list and contact information for the crisis lines, psychiatric hospitals, crisis stabilization units, treatment providers and mobile crisis teams to be added to the system. We will use the information to create the necessary agreements, facilitate initial and subsequent outreach, and track implementation tasks. *Some overlap with existing Indiana OpenBeds cus*tomers will be taken into account for planning purposes.

➢ **Crisis system member outreach.** The OpenBeds Crisis Management Project Manager will work with Indiana to create correspondence to introduce Indiana's crisis system participants' leadership the initiative and invite them to attend one of two orientations where they will learn more about DMHA's network vision, goals, the OpenBeds Crisis Management Solution, next steps, and expectations.

➢ **Executive and project leader orientation.** Orientations, which may be combined into one session, are exceptional opportunities to bring the crisis system participants together to share information about the system and implementation and gather their feedback and early support for the State's goals. The project leader is assigned by the facility executive and serves as the point of contact throughout the implementation process. Project leaders are provided instruction on how the OpenBeds Crisis Management Solution fits into their workflow, how to identify individuals from their facilities who should receive training, and

their responsibilities throughout the implementation process. The OpenBeds Crisis Management Project Manager supports this task.

➢ **_Contracting and BAA exchange with system organization._** In addition to contracting with the State, we will complete a no-fee subscription agreement and business associate agreement (BAA) with participating organizations. This is necessary due to the exchange of Protected Healthcare Information (PHI). We provide a generic BAA within the no-fee subscription agreement for smaller organizations that may not have their own, and we will use the facilities' BAA at their request. The OpenBeds Network Success Manager and Project Manager support this process.

➢ **_Organization registration and configuration for each system organization and their users._** We will complete registration and configuration with project leaders via webinar during pre-established date/time slots. OpenBeds Operations Manager and Network Manager will work with several project leaders during each session. They will log into and use the new instance of the Indiana network to create their own accounts online, then follow the instructions from our trainer to configure their respective organization's accounts and add their users. This must be accomplished prior to online training. Account and service configuration must be accomplished prior to online training

➢ **_User online training._** The OpenBeds Crisis Management Solution Trainer will complete online training with project leaders and their users via webinars, during pre-established date/time slots. Training generally lasts 60 minutes but may vary based on audience and topic. A train the trainer model is available for the call center users. Recorded materials will be made available online using Skyprep. An overview of audiences is outlined below:

Group to be trained	Delivery Method	Available Materials	Length of Training
Call Center Staff and Supervisors	Instructor Led Remote Training	Crisis Management Module Slide Deck + Crisis Admin/Operator Guides	1 hour
DMHA Staff	Instructor Led Remote Training	Reference Guides/ Quick Reference Videos	1 hour
Providers (Mobile Crisis Teams, Crisis Stabilization Centers, State Psychiatric Facilities, Community Mental Health Centers, and other outpatient providers)	Instructor Led Remote Training	Crisis Management Slide Deck + Crisis Responder Guide

OpenBeds Quick Reference Guides/Quick Reference Videos | 30 minutes

1 hour |

➢ **_Validation exercise._** Conducted prior to launch, the purpose of the validation exercise is to test the OpenBeds Crisis Management instance on the network, provide individual uers and facility-

level task practice and resolve access or other issues before launch. We will provide each participating organization with a list of individual tasks for each user to accomplish and a set of instructions to complete dummy intakes, dispatches, referrals, and appointment scheduling. This exercise is co-led by the OpenBeds Crisis Management Network Manager and Indiana project manager(s). The system will be live during the validation exercise; however, actual patient data will not be used.

➤ *Go live*. Pre-determined, mutually agreed upon date and time in which the system is live.

Dates and a project plan will be defined in agreement with the DMHA.

- **Describe your proposed testing activities. Describe your approach to developing and submitting a testing plan that covers all developed and Proposed System.**

Within fifteen (15) days after the submission of the Project Plan and System Design, Bamboo Health will submit a plan for the testing of all developed and proposed solutions, including but not limited to their functionalities, data feeds, integration with State systems, ability to query third party systems, user acceptance, and any other relevant feature, as well as the quality assurance processes and the ability to trace the origin of all requirements. The test plan will include but is not limited to:
- Test cases and test data. Bamboo Health will include proposed tools and procedures for tracking, managing, reporting, and resolving system bugs discovered during testing.
- Roles and Responsibilities for test processes and procedures.
- Bamboo Health's approach to User Acceptance Testing (UAT) of the platform environment prior to Go-Live in a production environment.
- Bamboo Health's approach for updating documentation based on test results and documenting and delivering testing deliverables to DMHA.
- Procedures for notifying DMHA of any failures to meet requirements and other problems discovered in testing, testing progress, and adherence to the test schedule.
- An approach for re-testing failed test cases after system modification and a description of regression test procedures.

Testing of Software Deliverables prior to submission for Acceptance Testing
- Bamboo Health applications are using an agile approach with bi-weekly iterations. The requirements identified for these iterations are delivered to QA Team for planning, estimation, and testing.
- Experience-based testing plays a larger part of the testing as the Test team possesses domain knowledge.
- Exploratory testing is carried out once the build is ready for testing.
- The test cases for planned functionalities are created and stored as we get iterations of the new and/or updated functionalities.
- All defects are tracked through Jira. Jira is the internal issue tracking product developed by Atlassian that allows bug tracking and agile project management. These defects are fixed by the Development team and tested by the QA team prior to final regression testing.
- All defects are tracked through Jira. Jira is the internal issue tracking product developed by Atlassian that allows bug tracking and agile project management. These defects are fixed by the Development team and tested by the QA team prior to final regression testing.
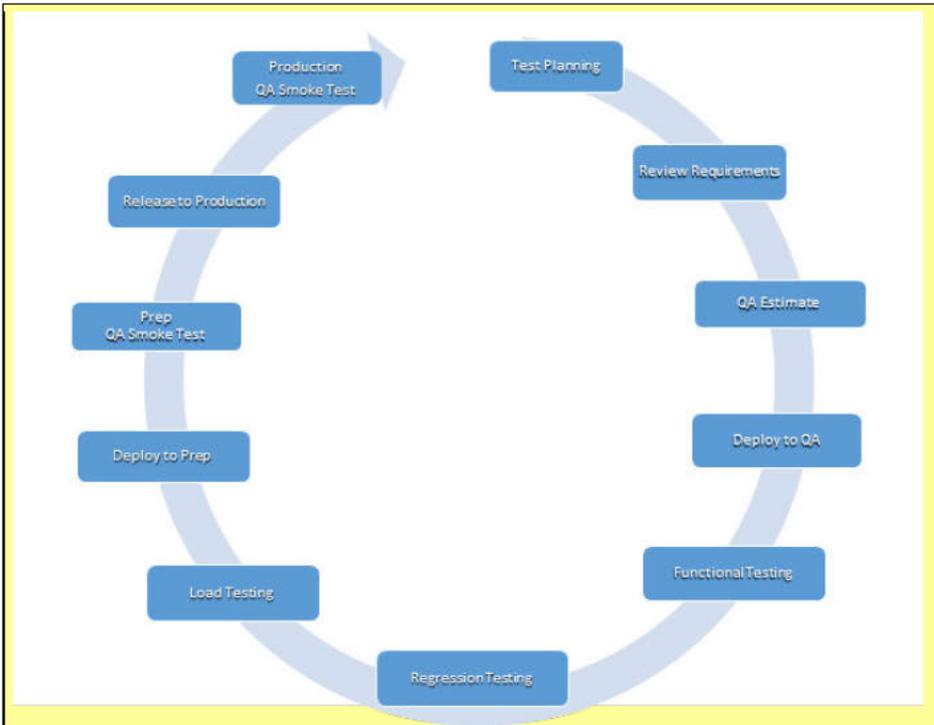
Test Region (mirroring the production environment)
Bamboo Health maintains a Configuration Management Policy that includes ensuring all information systems are maintained under a current baseline configuration. No systems are deployed into Bamboo Health's environments without proper approval. All changes are tested before they are implemented in production. An up-to-date inventory of systems is maintained and audited using Amazon tooling and VPC logging mechanisms. Bamboo Health utilizes Development, QA, and Prep environments that mirror production to assure proper function. All formal change requests require unique ID and authentication.

Test results (walkthroughs)
The Quality Control (QC) process starts by comparing the actual performance observed during the Quality Execution process with the quality objectives and target measures of the quality attributes defined in the Quality Planning process. Deviations from the target are analyzed, and it is determined by the Project Manager whether corrective actions are needed. This process is repeated on a regular basis throughout the entire project.

The QC process outputs are quality assessment documents and corrective actions. Quality assessment documents include formal evaluation reports, such as documentation of requirements reviews, design reviews, formal tests, walkthroughs, etc. The quality section of status reports and quality reviews are also examples of quality assessment documents.

Examples of corrective actions include adding resources to the critical tasks, modifying the design or project plans, implementing organizational changes, and resolving disputes. Corrective actions are deployed by the project team.

In quality assurance, prevention is always better than damage control after the fact. Bamboo Health testing processes can detect problems that can develop into serious quality problems early and solve the problems before they cause serious consequences.

- **Describe your approach to developing, maintaining, and updating a 988 Software User Manual and Operating Procedures Manual in collaboration with FSSA staff to ensure the most up to date material.**

The OpenBeds Crisis Management solution provides ongoing system training for end users along with user and training manuals, including quick reference guides and longer documentation. Bamboo Health provides training and support for new and existing network members through a combination of webinars and video media using SkyPrep. We will publish and issue updated training materials to customers and providers participating in the system in conjunction with regularly scheduled or ad hoc technical updates to the network software. Training materials will be available online to all system users via SkyPrep.

- **Describe your approach to developing and maintaining a plan to ensure compliance with all current State and federal laws, policies, procedures, and regulations, including those explicitly mentioned in the Scope of Work as well as others not explicitly mentioned. Describe your plan to stay up to date with all relevant rules and regulations.**

Bamboo Health will develop and maintain a plan to ensure compliance with all State and federal laws, policies, procedures, and regulations. The compliance plan will accommodate DMHA's right to:
- Review and approve Bamboo's compliance plan prior to the commencement of any services and as often as it may require throughout the duration of the Contract
- Review the compliance plan for a reasonable period after the termination of the Contract.
- The compliance plan will include Bamboo's responsibility to monitor for, and adjust to, changes in applicable State and federal laws, policies, procedures, and regulations.

- **Describe your Proposed System for working with the State regarding enhancements or releases. Describe how this system secures state sign off.**

We continually enhance the solution and introduce new features or improvements that DMHA may want to adopt into the State's network as we currently manage the existing OpenBeds network with DMHA staff. We will obtain approval and explain new features prior to introducing them into the network. We will solicit and capture feedback from users at regular intervals and work with the State to improve and further customize the system, as necessary.

OpenBeds operates on a bi-weekly release cycle. Releases are pushed at regular intervals and preempted by comprehensive release notes and any associated down times. Release timeframes are outside of normal business hours and at the lowest usage times to minimize impact to the end user.

The system averages uptime of 98.8%, excluding planned downtimes. OpenBeds provides a minimum of one (1) business day prior to any planned downtime to the customer and participating providers. OpenBeds shall make all attempts to schedule downtime for system maintenance during periods when traffic to the site is at a minimum. Scheduled releases occur bi-weekly and within the window of the least average utilization to minimize any potential for disruption. Release notes and details are provided prior to any changes made to the system.

We use Agile methodologies to address customer requests, enhancements, and new product development. We currently have two release cycles per month and focus on larger scale development to release once per month (typically on the second release of the month). Release notes will be provided to

the State. Hotfixes are coordinated and released on a necessary basis. Our testing and quality assurance process verifies that all functionalities work according to the specifications. Test cases are executed using known and controlled databases in secured environments. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome; otherwise, the test case is marked as "FAILED." Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

The OpenBeds team will accomplish the above tasks through a combination of remote work and in-person visits at state, provider, and stakeholder meetings, with the pandemic determining in-person visit frequency.

- **How will you prioritize requests from the State of Indiana while balancing requests for other clients that have the same or similar timelines?**

Bamboo Health will leverage our existing roadmap and change request processes to prioritize the State of Indiana's requests while balancing the requirements of other customers with similar timelines. New and existing customer commitments are managed via a tightly controlled Product Roadmap to ensure adequate resourcing and capacity are in place to meet software delivery dates. Collaborative product requirements gathering and definition within the Program Planning phase will allow the team to thoughtfully prioritize effort across development cycles in the most efficient way. In addition, Bamboo Health will leverage our local Indiana staff augmentation partners to complement our resource planning model for delivering high quality delivery of the 988 Software solution. Bamboo Health has current staffing capacity and available options to expand resources internally and through our local partners that have delivered staff augmentation services for FSSA and DMHA if needed.

- **Describe your approach to issue resolution, including how you will log and report issues, address trouble-shooting tools, and measure the success of issue resolution efforts.**

Bamboo Health will develop an issue resolution plan for State approval sixty (60) days prior to the commencement of any services under this Contract. This plan will provide a standard process that will be used to identify, track, and resolve issues which may arise between Bamboo Health and State in the performance of duties under the Contract. The plan will also include a section on risk management covering how risks will be mitigated to avoid issues from occurring. Such plan shall include:

- Any trouble-shooting tools and techniques that will diagnose issues with networks, services, equipment, software, and data.
- The approach and metrics to measure the success of its issue resolution efforts.
- DMHA's right to approve all issue resolution plans and procedures prior to implementation.

- **Describe your commitment and ability to attend and actively participate in required meetings.**

Bamboo Health will actively participate in several regularly scheduled meetings each month to coordinate with DMHA staff and relevant stakeholders to ensure the smooth operation of the program. Meetings include:
- **Ad hoc Meetings:** Bamboo Health will attend ad-hoc meetings with other DMHA contractors, State offices (e.g., Office of the Attorney General), or other entities as determined by DMHA may also be required. Meetings will be held at the Indiana Government Center but may be held virtually at the State's discretion. Bamboo Health will submit the meeting agenda and materials to DMHA at a minimum of one (1) day prior to the date of the meeting.
- **Kick off meeting:** The goal of this meeting is to make all necessary introductions between the State and the Bamboo Health Project Team, and to establish expectations and timelines for all deliverables.

- **Status Meetings:** Bamboo Health will meet with State staff and designees a minimum of every two (2) weeks, or as requested, to present status updates, discuss change requests, resolve challenges, and discuss progress on work plans and project plans. Bamboo Health will develop the agenda and provide the agenda and status report to the Program Integrity Director one (1) business day prior to the meeting. Bamboo Health will record and prepare meeting minutes and provide minutes to the State within two weeks after the meeting. The agenda and minutes will be subject to State review and approval.
- **Transition Meetings:** Bamboo Health will attend transition meetings, as reasonable and necessary.
- **Onsite Meetings:** We have deliberately partnered with local companies that will provide support including the Deputy PM from aFIT and training support, CMS certification, and assessment activities from Briljent.

A single point of accountability ensures that a consistent set of management practices and techniques will be applied to all project activities. In addition to a qualified project manager, Bamboo Health allocates a project executive who provides corporate oversight and facilitates fast-tracking of resources and guidance, as needed. Bamboo assigns a dedicated Client Relationship Manager (CRM) who is responsible for overseeing all interactions and deliverables for the DMHA project team. The CRM will support the DMHA project team throughout the life of the contract. This includes a regular cadence of meetings and one-on-one follow-ups as well as opportunities to meet in person. DMHAs single point of contact/CRM will be:

- **Describe your approach to developing a Risk Management and Mitigation plan, including a process for documenting and reporting risks and risk status to the State. Describe how you will track, manage, and report risks to the State. Address any tools you will utilize.**

The Bamboo Health Project Manager (PM) uses MS Project for the project schedule, which enables us to determine if the project is in jeopardy of not meeting deliverables. The Bamboo Health PM will provide a weekly status update report and schedule a weekly internal meeting to discuss project status and identify/remove any roadblocks. Frequent internal reviews will be scheduled, typically on a weekly basis, with a cross-functional team led by a senior executive to assess status and progress, develop solutions to problems as they occur, and attempt to eliminate or minimize the impact of anticipated future problems.

Sixty (60) days prior to the commencement of services under this Contract, Bamboo Health will provide a Risk Management and Mitigation plan which includes a process for documenting and reporting risks and risk status to the State. More specifically, Bamboo Health's plan will incorporate potential risk identification, recommendations for risk mitigation, management and tracking of mitigation steps, and any proposed tool(s) to track, manage, report risks, and identify points when risks could worsen if not mitigated. Additionally, Bamboo Health will include any tool(s) that would be used to facilitate its Risk Management Plan. The benefits of the recommended risk management and mitigation process to DMHA will be stated. DMHA reserves the right to retain access to all of Bamboo's risk management tools and reports. Bamboo Health will grant DMHA the right to approve the Risk Management Plan, process, and tools.

- **What tools do you plan on using to document and track requirements, development work, configuration work, test cases, test scripts, and defects?**

Bamboo Health will create a work plan containing the project charter, assumptions, risks, change management, and task list. The Bamboo Health PM, Emily Hunter, uses MS Project for tracking requirements, development, configuration, and testing.

- **Describe how you will manage system defects during the project.**

Identified defects are evaluated for a severity impact level and are prioritized within the appropriate release timeframe based on the results of the evaluation.

Defect Priority Level	Definition	Category	Resolution
1	Defects that render the OpenBeds service non-operational or affects mission-critical functions or information in the production environment and may include, but not be limited to, data loss or corruption, system crash, or missing major functionality. This may include any defect related to system availability, overall data integrity, or ability to serve the DMHA.	Described as defects that render the OpenBeds service non-operational or affects mission-critical functions or information in the production environment and may include, but not be limited to, data loss or corruption, system crash, or missing major functionality. This may include any defect related to system availability, overall data integrity, or ability to serve the DMHA.	Will deploy a "hot fix" outside of the standard release schedule.
2	Defects that have a large impact on the application's functionality but does not require immediate release into the production environment.	Defect allows continued use of the application, but there are known compatibility or operability disruptions with no known Subscriber-acceptable work-around or missing minor functionality	Usually given high priority and are either addressed prior to the next release or in the next release following the introduction of the defect.
3	Defects occur when the Bamboo Health service is operational with functional limitations or restrictions that are not critical to the overall system operation, and the defect has a moderate impact on the application's functionality. * The application remains usable by all groups.	A functional error exists for which there is a client-acceptable work-around.	Failures assigned this priority level cause no delays in production.
4	Defects have little impact on system operations. Include, but not be limited to, documentation errors. Has no impact on the ability to execute a production application.	Defects have a minor or cosmetic error in the application's functionality in a production environment.	Failures assigned this priority level cause no delays in production.

- **Provide a document to describe your company's project management approach and methodology for this project. This should be a high-level document that pulls everything together.**

All Bamboo Health projects are managed by an expert team that relies on a proven management process for project execution. To every project implementation, Bamboo Health assigns experienced and available individuals that are dedicated to the project for the life of the contract. Except for the company's executive, human resources, client relationship, and marketing staff, every remaining Bamboo Health resource is directly engaged in managing, developing, hosting, supporting, and maintaining the company's statewide solutions.

Bamboo Health deploys a proven process for requirements management that has been applied to hundreds of Software as a Service (SaaS) solution deployments across nearly every state.

The Bamboo Health Project Manager and the project team work together to control the scope of the project regarding the requirements. Bamboo Health utilizes an agile development methodology called SCRUM to implement solutions. This method has proven very effective, allowing Bamboo Health to provide quick, iterative, and tangible deliverables to our customers. The analysis, tracing, and prioritizing of requirements is iterative, involving Bamboo Health and project stakeholders.

Bamboo Health administers a highly successful project management methodology for implementation of product or if the engagement requires a future migration. The five core components of our methodology include:

- **A single point of accountability** ensures that a consistent set of management practices and techniques will be applied to all contract activities. In addition to a qualified project manager, Bamboo Health allocates a project executive who provides corporate oversight and facilitates fast-tracking of resources and guidance, as needed.

- **Frequent and open communication** with the state's project manager, business analysts, and integration specialists, to facilitate examination of business, technical, and management issues and anticipate potential needs as they relate to the project. Bamboo Health brings a proactive approach to communication and coordination that will provide the lead time necessary to coordinate the efforts of the state.

- **Standards integration methodologies**, such as the Bamboo Health product development life cycle methodology, into the project management plan and supporting programs. This creates greater visibility throughout the project for any upcoming releases and new capabilities.

- **Frequent internal reviews**, typically on a weekly basis, with a cross functional team led by a senior executive to assess status and progress, develop solutions to problems as they occur, and attempt to eliminate or minimize the impact of anticipated future problems.

- **Detailed planning and execution** to ensure timely completion of deliverable items by fully understanding requirements, planning the work activities, assigning the appropriate mix of personnel with the required skills, and obtaining the personal commitment of everyone involved in the task.

Progress Reporting, Decision Making, and Sign Off
Bamboo provides a comprehensive project management approach throughout the project life cycle. We begin our client interaction with an introductory meeting for all key project participants, scheduled by the Bamboo Project Manager (PM). At that meeting, we will schedule the formal kick-off meeting. At the kick-off meeting, all phases of the project are outlined along with agreed-upon milestone dates.

Further, a full review of the work plan will be conducted along with a gap analysis which will identify all requirements that are not 100% available upon go live. We will also determine a mutually agreeable

day/time to set-up weekly recurring status calls between Bamboo and the DMHA team. The weekly meetings will ensure both Bamboo and the DMHA team stay aligned on next steps and all project deliverable dates.

- o The Bamboo PM will also schedule a weekly internal meeting to discuss project status and identify/remove any roadblocks.
- o The Bamboo PM also utilizes a comprehensive project plan and task list/schedule to ensure the project remains on schedule.
- o The Bamboo PM uses MS Project for the project schedule, which enables us to determine if the project is in jeopardy of not meeting deliverables. The Bamboo PM will provide a weekly status update report.
- o The Bamboo PM will conduct a formal Gap Analysis meeting with the Board to identify all gaps and determine development work.
- o Upon determination of gaps, the Bamboo PM will provide demos of existing solutions to determine if an enhancement is required to satisfy the gap. Once it is determined that an enhancement is necessary, the Bamboo PM will compile a spec/sign-off document outlining the proposed solution.

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agreed to and signed off on the solution. If development work is required, the Bamboo Health PM will provide a UAT plan to the DMHA team as well as a detailed UAT for each feature. The DMHA administrator must sign-off on the feature before Bamboo Health will deploy the change or requested enhancement to production.

Upon project completion, the Bamboo Health PM will conduct a post-mortem (Lessons Learned) meeting internally as well as with the team. The Bamboo Health PM will then have a turnover meeting where the DMHA team will be transitioned from implementation over to their Client Relationship Manager (CRM). The turnover meeting provides a comprehensive look at the project overall, as well as any outstanding items requiring follow up.

Work Plan
Within thirty (30) days after the execution of this Contract, Bamboo Health will submit a proposed work plan (document) that explains the design, testing, and implementation of its solution and the transition from the current solution including:

- A description of all tasks, deliverables, schedules, task dependencies and identification of resource requirements necessary to commence the services and technology required by this contract.
- The proposed start and completion dates for each deliverable.
- A detailed description of all tasks requiring State resources, summary of the proposed use of State resources, and statement of assumptions regarding anticipated involvement of these resources. Bamboo will identify its task dependencies on State resources or tasks and will retain the final responsibility for performance of its obligations including the quality of the deliverables. To the extent that State review or approval is required of a document, plan or deliverable, the State will have ten (10) business days to review first drafts and five (5) business days to review any revised drafts.
- An architectural diagram and associated explanation of how each component works together to provide the proposed solution.
- A detailed description of how Bamboo's existing system will receive existing and future State data.
- Language permitting the State and State designee access to the OpenBeds system for as many users as the State deems necessary, including license access if applicable.

- **Provide an example of a high-level project schedule for this project. This should include your company's tasks, sub-contractor owned tasks (if applicable), and State-owned tasks in an integrated fashion. Include key tasks as part of development, testing, training, data conversion, other key areas of the project.**

We will work with the State to schedule the meeting upon full contract execution to review OpenBeds implementation. The OpenBeds Project Lead and Manager will coordinate with the State a mutually agreeable date and time for this meeting. This meeting is typically 60 minutes in duration. Please find our high-level project schedule included as a separate attachment.

- **Affirm your commitment to helping the State obtain CMS certification for the Future System and provide your experience in supporting clients' obtaining such certification, if any.**

Federal funding depends on building an MES that aligns with the MITA framework. While there are many benefits to the modular approach, there are also significant challenges associated with coordinating modules across Medicaid divisions, which, in some cases, operate separately and independently of one another. For this reason, it is becoming increasingly imperative that states follow the MITA framework to ensure CMS compatibility for funds and to drive a unified vision and review of business functions, needs, and system technologies to achieve a modular enterprise.

It is imperative that planning efforts be built around the MITA framework that is compliant with the Seven Standards and Conditions and that support reuse of common components across divisions. Our consulting approach is designed to be flexible and scalable to streamline the MITA SS A process across services, technologies, and organizations within the MES and health and human services landscape.

Briljent has assembled a highly qualified team that has collectively consulted and actively engaged with Medicaid Information Technology Architecture SS-A-related projects since their inception. Highlighted expertise includes:
- Leading the MITA 3.0 SSA for the state of Alaska
- Supporting MITA assessments in Florida, Washington, Alabama, and Indiana
- Serving on a Federal task group to develop solution mapping to MITA 2.01 & 3.0 requirements, including certification checklist and outcome-based certification

Bamboo Health and Briljent will work together to prepare for and participate in the certification of the 988 Software if needed, including but not limited to:
- Preparation of certification documents
- Generating Required reports
- Ensuring that all CMS certification requirements are met.
- In the performance of these duties, the Bamboo Health team will:
- Provide CMS certification to compile reports and data required for the preliminary letter submission to CMS.
- Provide CMS certification support to prepare required certification manuals, reports, forms, and documentation.
- Provide CMS certification support to provide Contractor staff to assist State personnel in certification procedures, 988 operations, and information needed for the State to make certification presentations.
- Provide CMS certification support to participate in CMS site visits including Contractor's operational facilities.
- Provide additional certification assistance as needed by the State.

As requested by the State, Bamboo Health will participate in the development or review of any MITA documentation to determine if changes to the Medicaid Enterprise operations need to be reflected. MITA

documents include SSA-A, Roadmap, COO, MMIS ConOps, or any alternate or successor obligations required by CMS. Bamboo will recommend updates to improve MITA SS-A capabilities and maturity as part of the change management process and, as requested by the State, participate in the provision of or contribution to any certification obligations, including documentation to demonstrate CEF, outcomes, or metrics.

- **5.1.1 – System Design, Development, and Implementation**
  - If applicable, please indicate in your response below which of the three sets of Additional Terms and Conditions (Attachment M) you believe applies to your proposed System.
  - Review these Additional Terms and Conditions and indicate acceptance and / or any redlined edits, via Track Changes to the applicable Terms and Conditions in Attachment M. It is the State's strong desire to not deviate from the Additional Terms and Conditions that are provided in Attachment M and as such the State reserves the right to reject any and all requested changes. Any or all portions of this RFP and any or all portions of your response may be incorporated as part of the final contract.
  - In addition to your response below, Respondents are also required to review and respond to the questions included in Attachment P, Cloud Questionnaire.

System Design, Development, and Implementation
- **If applicable, please indicate in your response below which of the three sets of Additional Terms and Conditions (Attachment M) you believe applies to your proposed System.**

This is not applicable.

- **Review these Additional Terms and Conditions and indicate acceptance and / or any redlined edits, via Track Changes to the applicable Terms and Conditions in Attachment M. It is the State's strong desire to not deviate from the Additional Terms and Conditions that are provided in Attachment M and as such the State reserves the right to reject any and all requested changes. Any or all portions of this RFP and any or all portions of your response may be incorporated as part of the final contract.**

Bamboo Health has reviewed the Additional Terms and Conditions and will adhere to additional Terms and Conditions related to Cloud-based systems. Bamboo agrees to the following Terms and Conditions:

- IOT Additional Terms and Conditions - Infrastructure as a Service Engagements (IaaS)
- IOT Additional Terms and Conditions - Platform as a Service Engagements (PaaS)
- IOT Additional Terms and Conditions - Software as a Service Engagements (SaaS)

- **In addition to your response below, Respondents are also required to review and respond to the questions included in Attachment P, Cloud Questionnaire.**

Please find our completed Attachment P, Cloud Questionnaire included as a separate attachment. Bamboo Health will be responsible for any design, development, configuration, implementation, or integration with the other State systems which may be required. This includes, but is not limited to, any requirements gathering, coding or configuration, testing (validation, user acceptance, etc.) and any other work required. Such activities will be completed in advance of the commencement of services under this contract. The OpenBeds system is a configurable commercial off the shelf (COTS) solution.

- **5.2 – Training**
  - Please provide your approach for the delivery of initial training for all users of the Future System.

- o Please identify all the types of users you will initially train and the proposed modality of that training (*e.g.* classroom, live training, pre-recorded training)
- o Please describe how you will support ongoing training needs.
- o Please include a draft, summary or synopsis of the Training Plan as contemplated by Section 5.2.2.

Training
- • **Please provide your approach for the delivery of initial training for all users of the Future System.**

System Training and Support
Bamboo Health will be responsible for the initial training of any State and State designee users for use of all proposed systems, including but not limited to on-demand web training, user manuals and in-person training if desired. Additionally, Bamboo Health will instruct select State staff on how to train future users. The State and Bamboo will agree on the method of training (i.e., in-person, remote instructor-led, or computer-based), its scheduling, and other logistics. Bamboo Health will provide training to both DMHA and DMHA-designated users. This will include any training requested by the State during the implementation activities as well as ongoing and as-needed training requested by the State.

Bamboo Health will be responsible for creating training curriculum materials (including manuals, techniques, and training aids) and ensuring that all training curriculum materials are up to date.

Bamboo will publish and update on a regular cycle (no less than semiannually) the User and Operating Procedures Manuals online and provide paper copies at no additional cost to FSSA when requested. These manuals will be developed in collaboration with DMHA staff to ensure the most up to date material is included. DMHA reserves the right to review any amendments or changes to the User and Operating Procedures Manuals before implementation. Initial materials will be submitted to DMHA no later than 60 days prior to the commencement of services under this Contract.

Any User and Operating Procedures Manuals and products produced under this contract are the sole property of the State and shall be transferred to the State electronically. Contractor use of any FSSA logo, Agency or Division name must adhere to the agency's FSSA Branding and Writing Style Guides.

Bamboo Health will also furnish ongoing support for users of their systems, including a toll-free support telephone line and a support e-mail address. Bamboo will provide ongoing training as new users are onboarded until such time that State staff is sufficiently trained to onboard new users. Additionally, Bamboo will provide refresher training or additional training as the solution changes.

Training Plan
Within fifteen (15) days after the execution of this Contract, Bamboo Health will provide a detailed training plan and training calendar that explains how Bamboo Health will deliver the training in the agreed upon methods at least thirty (30) days prior to the commencement of services under the Contract. Bamboo Health will provide an overview of the curriculum and audience for the respective curriculum, including training delivered to Bamboo team members and State users of systems. All users will be trained prior to gaining access to the systems created as a result of this Contract. Training will be hands-on and State staff and designees will be cross-trained to ensure that all staff are able to use the system and select staff are able to train future users (e.g., train-the-trainer).

Bamboo Health will be responsible for ensuring that all training curriculum materials (including manuals, techniques, and training aids) are up to date. Bamboo Health must provide initial and ongoing end-user training.

Bamboo Health is committed to offering a training program that ensures administrative users and data requestors have the tools and resources needed to successfully access and utilize the system.

Training will be provided no less than 14 days prior to feature enhancements and no less than 30 days prior to major enhancements. The client may request additional online or on-site trainings as needed. Bamboo will continue to provide and enhance various end-user training guides, documentation, and online training videos.

Our training objectives include:

End-User Training
- Ensure all users have the resources needed to access the system, including comprehensive electronic training materials for both data requestors and administrative users
- Ensure data requestors can navigate the system in accordance with state policy
- Provide ongoing help desk support that ensures additional assistance with OpenBeds functionality is available 24/7/365

Knowledge Transfer / Administrator Training
- Prepare administrators for key tasks performed within the system
- Perform configuration and train administrators to perform site configuration
- Train administrators on the types of technical issues to refer to the Bamboo Customer First Center

Train-the-Trainer Training
- Prepare state trainers to perform end-user training on the OpenBeds Crisis Management solution

Training also is supported by the Bamboo OpenBeds User Guide and State Standards and Guidelines, which serve as procedural guides and references for the staff. Both guides are customized to reflect the DMHAs system—including state-specific protocols and policies—and are periodically updated as changes are made to the system.

Bamboo Health will work with approved partners to contract, configure, train, and onboard them into the network. There are several key tasks and processes that must be completed to ensure a successful implementation and launch of the network, and our team at Bamboo Health will work closely with State personnel throughout the process.

We deliver training to State stakeholders and providers who are vetted by the State to participate in the network, and tailor our training content to each of these audiences' specific needs. We conduct specific training sessions for network providers who receive referrals and those who make referrals. In some cases, a provider can be both a receiving and a referring entity. In addition, OpenBeds offers workflow sessions to providers to help them map their organization's work- flows to optimize their use of the solution.

We have developed a deep body of best practices on training content and approach to reach diverse audiences and work closely with each provider to configure their account set-up to meet their needs. We also work with providers to ensure that they have contingencies in place to address staff turnover, etc. We have built educational materials for clinicians into our solution to help them make the most appropriate referral to care.

OpenBeds will publish and issue updated training materials to customers and providers participating in the system in con- junction with regularly scheduled or ad hoc technical updates to the network software. Training materials will be available online to all system users.

Education and training resources can be customized based on state needs and preferences. OpenBeds works with several 211 and crisis response lines across our current state customer base. We have developed specific training materials, including a "train-the-trainer" training regimen to empower users and account for staff turnover, workflows, and decision support for crisis line staff.

We offer to record all online webinar training sessions for each network member and provide those videos to the facilities for their use as they see fit using our online tool, Skyprep. Many of our customers take on the responsibility to train newly hired personnel at their organizations and they use the recorded videos as a supplemental resource. We can make samples of these videos available to the selection committee upon request.

- **Please identify all the types of users you will initially train and the proposed modality of that training (*e.g.* classroom, live training, pre-recorded training)**

Group To Be Trained	Training Topics	Current Delivery Method	Available Materials (Instructor Guides, Participants Guides, Manuals, Quick Reference Guides, etc.)	Length of Training
Call Center Staff	Crisis Module	Instructor Lead Remote Training	Crisis Module Slide Deck + Crisis Module User Guide(s)	1 Hour
DMHA Staff	OpenBeds	Instructor Lead Remote Training	OpenBeds Reference Guide(s) + Quick Reference Videos	1 Hour
Providers	OpenBeds + Crisis Module	Instructor Lead Remote Training	OpenBeds Reference Guide(s) & OpenBeds Quick Reference Videos + Crisis Module User Guide(s) & Crisis Slide Deck	1 Hour 30 minutes

Following are the types of users Bamboo Health will initially train. The Bamboo team will conduct training via a combination of remote work and in-person visits at state, provider, and stakeholder meetings, with the pandemic determining in-person visit frequency.

End User	• Increase awareness of system changes • Ensure all users have the resources needed to access the system, including comprehensive electronic training materials for both data requestors and administrative users • Ensure data requestors can navigate the system in accordance with state policy • Provide ongoing help desk support that ensures additional assistance with OpenBeds functionality is available 24/7/365
Administrator	• Prepare administrators for key tasks performed within the system

	• Perform configuration and train administrators to perform site configuration • Train administrators on the types of technical issues to refer to the Bamboo Customer First Center
Trainers	• Prepare state trainers to perform end-user training on OpenBeds
Security	• Security awareness training is conducted at least annually regarding the policies for information security and the privacy of confidential data. Employees authorized to access OpenBeds data complete additional HIPAA security training.

- **Please describe how you will support ongoing training needs.**

Bamboo Health provides ongoing system training for end users on existing functionality and newly released features via video tutorials and web trainings along with user and training manuals, including quick reference guides and longer documentation.

- **Please include a draft, summary or synopsis of the Training Plan as contemplated by Section 5.2.2.**

Within fifteen (15) days after the execution of this Contract, Bamboo Health will provide a detailed training plan and training calendar that explains how Bamboo Health will deliver the training in the agreed upon methods at least thirty (30) days prior to the commencement of services under the Contract. Bamboo Health will provide an overview of the curriculum and audience for the respective curriculum, including training delivered to Bamboo team members and State users of systems. All users will be trained prior to gaining access to the systems created as a result of this Contract. Training will be hands-on and State staff and designees will be cross-trained to ensure that all staff are able to use the system and select staff are able to train future users (e.g., train-the-trainer).

Bamboo Health will be responsible for ensuring that all training curriculum materials (including manuals, techniques, and training aids) are up to date. Bamboo Health must provide initial and ongoing end-user training.

Bamboo Health is committed to offering a training program that ensures administrative users and data requestors have the tools and resources needed to successfully access and utilize the system.

Training will be provided no less than 14 days prior to feature enhancements and no less than 30 days prior to major enhancements. The client may request additional online or on-site trainings as needed. Bamboo will continue to provide and enhance various end-user training guides, documentation, and online training videos.

Our training objectives include:

End-User Training
- Ensure all users have the resources needed to access the system, including comprehensive electronic training materials for both data requestors and administrative users
- Ensure data requestors can navigate the system in accordance with state policy
- Provide ongoing help desk support that ensures additional assistance with OpenBeds functionality is available 24/7/365

Knowledge Transfer / Administrator Training
- Prepare administrators for key tasks performed within the system
- Perform configuration and train administrators to perform site configuration

- **5.3 – Ongoing Support**
  - Describe your overall approach to maintenance including communication regarding any maintenance windows or potential system downtime, and release notes that the State of Indiana can expect.
  - Describe your approach to maintaining a HelpDesk and describe how the HelpDesk will function.
  - Describe your proposed ongoing user support approach.
  - Describe your approach to correct defects in the first 90 days post go-live?
  - Describe your approach to correct defects after the first 90 days post go-live?
  - What is your process for enhancement requests post go-live? Please include how you plan on balancing the State of Indiana's enhancement requests with request from other clients.
  - Describe your company's overall release management strategy and processes.
  - How frequently are new versions / patches released? Is there a regular release schedule?
  - Will release notes be available and how far in advance before the release will release notes be disseminated?
  - Provide an example of release notes that State can expect.
  - How does the State test and give feedback on existing releases?
  - What obligation does the State have to implement the new Release?
  - How many releases are supported? How many are maintained?
  - What is your process for the State to recommend future software changes?
  - Is there an emergency change process? Describe the process and associated timing.
  - How does your company prioritize future changes requested by the State and other customers?
  - Will training be updated and rolled out as needed for new versions of the software? Describe the process.
  - What authority will the State have to stop a production release if testing reveals an issue that the State deems critical?
  - How are updates to testing materials integrated into the release management process?

o How will the State request and receive any ad-hoc reports or queries? Please describe the process and/or functionally of your Proposed System to respond to ad-hoc requests.

Ongoing Support
- **Describe your overall approach to maintenance including communication regarding any maintenance windows or potential system downtime, and release notes that the State of Indiana can expect.**

System Availability and Maintenance

The OpenBeds system will be available 99.8% of the time each quarter, excluding planned downtimes. We will give notice a minimum of one (1) business day prior to any planned downtime to customers and participating providers. OpenBeds will make all attempts to schedule downtime for system maintenance during periods when site traffic is at a minimum.

Ongoing Product Improvement

OpenBeds is a Software as a Service (SaaS) system that serves as the host for other state behavioral health treatment access and referral networks. We continually enhance the solution and introduce new features or improvements that may want to adopt into their network. We will obtain approval and explain new features prior to introducing them into the network. We will solicit and capture feedback from users at regular intervals and work with the DMHA to improve and further customize the system, as necessary.

We use Agile methodologies to address customer requests, enhancements, and new product development. We currently have two release cycles per month and focus on larger scale development to release once per month (typically on the second release of the month). Release notes will be provided to the State. Hotfixes are coordinated and released on a necessary basis. Our testing and quality assurance process verifies that all functionalities work according to the specifications. Test cases are executed using known and controlled databases in secured environments. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome; otherwise, the test case is marked as "FAILED." Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

- **Describe your approach to maintaining a HelpDesk and describe how the HelpDesk will function.**

Bamboo Health provides support to network members during normal business hours to include addressing problems or issues resulting from non-technical issues associated with the platform software or network operations.

Bamboo Health publishes training materials and other support publications within the system in addition to contact information for network member support. Network support for critical issues, defined as those that completely prohibit use of the OpenBeds crisis management system, is available twenty-four (24) hours per day, seven (7) day per week.

Bamboo Health operates a 24x7x365 support center to receive incoming support requests from end users, data submitters, and State Administrators. Support is structured into two tiers, Tier 1 and Tier 2, which are described below:
- Help Desk Tier 1 Support Standard – Bamboo will provide Tier 1 help desk support on a 24 hour, 7 days per week, 365 days per year basis through our Customer First Center (CFC).
- Tier 2 Support – Any matter that cannot be resolved by Tier 1 help desk support from the CFC will be escalated to Bamboo' Tier 2 Support staff. The Tier 2 Support staff will target to

respond to each request for Tier 2 Support from the CFC based on the priority level assigned to the matter.

Jacob Cooper, DMHAs dedicated Client Relationship Manager (CRM), will be responsible for overseeing all interactions and deliverables for the 988 crisis management team. The CRM is available at any time as an escalation point for any matter that cannot be immediately resolved by the Help Desk and can coordinate with necessary internal support resources to see any issues through to resolution.

Support issues are tracked in our existing ticketing system. All support calls generate a ticket that retains a record of every issue. Support issues can also be submitted via our Zendesk knowledge center option that, upon submission, automatically creates a ticket in our ticketing system. All communication via a ticket in handled within the Zendesk which is HIPAA compliant. All calls are recorded, and our Quality Assurance (QA) department reviews calls and tickets on a scheduled basis to ensure proper handling.

Priority Level	Description	Response Time
1	The OpenBeds Service is non-operational, or users cannot access the system, or the functionality is significantly decreased or back up or other security of data can no longer be performed. The defect affects mission critical functions or information in the production environment and may include, but not be limited to, data loss or corruption, system crash or missing major functionality. This may include any defect related to system availability, overall data integrity, or ability to serve the Subscriber.	1 hour
2	The OpenBeds Service is operational with functional limitations or restrictions, but there is minimal business impact. Under a Priority 2, the defect will have a large impact on the functionality of the application but does not require immediate release into the production environment. This defect allows continued use of the application, but there are known compatibility or operability disruptions with no known Subscriber-acceptable workaround or missing minor functionality.	2 hours
3	The OpenBeds Service is operational with functional limitations or restrictions that are not critical to the overall system operation, and the defect has a moderate impact on the functionality of the application. However, the application remains usable by all groups. A functional error exists for which there is a Subscriber acceptable workaround. Failures assigned this priority level cause no delays in production.	8 hours
4	The OpenBeds Service is operational with problems or errors, which have little impact on system operations. Priority 4 shall include, but not be limited to, documentation errors. Priority 4 defects have a minor or cosmetic error in the functionality of the application in a production environment. Defect has no impact on the ability to execute a production application, however. Failures assigned this priority level cause no delays in production.	24 hours

- **Describe your proposed ongoing user support approach.**

Bamboo Health offers 24 hours a day, 7 days a week, 365 days a year customer support through our call center with automated monitoring and live staff. OpenBeds end user also have access to the Bamboo

Health Knowledge Center where users can browse our help articles as well as submit a ticket to support for technical assistance 24X7X365. Tickets are worked in priority order based on ticket symptoms.

Bamboo Health's ongoing user support will include:
- System enhancements, releases and maintenance as needed
- Release notes to the State ahead of any scheduled enhancement/release
- Coordination all maintenance windows with the State to minimize any impact on 988 operations
- Communications regarding anything that might impact system downtime to the State at least 24 hours before the performance of that activity
- Providing a history of maintenance and support releases to the State upon the State's request
- Maintaining a HelpDesk to support front end system issues and technical assistance questions. The HelpDesk shall be available 24 hours a day, 7 days a week.
- Continuously update the training manuals and materials to reflect the most up-to-date System information and provide periodic refresher training as requested by the State
- Supporting the State with any ad-hoc report or query development requests

- **Describe your approach to correct defects in the first 90 days post go-live?**

Our testing and quality assurance process verifies that all functionalities work according to the specifications. Test cases are executed using known and controlled databases in secured environments. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome; otherwise, the test case is marked as "FAILED." Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

- **What is your process for enhancement requests post go-live? Please include how you plan on balancing the State of Indiana's enhancement requests with request from other clients.**

Enhancement requests are collected by the Project Manager and registered into the enhancement queue to first be triaged by the Customer Success team and then shared with the Product team for consideration, level of effort estimations and prioritization into the roadmap. Solutions are made available to all clients where possible and implemented as configuration options where appropriate.

Many different factors are taken into consideration when an enhancement request is evaluated. These include level of effort, level of impact, timelines and existing commitments. Bamboo Health works with all clients to understand enhancement requests and determine a plan of action to approach a solution.

- **Describe your company's overall release management strategy and processes.**

Bamboo Health operates on a bi-weekly release cycle. Releases are pushed at regular intervals and preempted by comprehensive release notes and any associated down times. Release timeframes are outside of normal business hours and at the lowest usage times to minimize impact to the end user.

Bamboo Health maps all releases to a comprehensive test plan that includes QA for regression testing, feature testing, and test cases for UAT that can be leveraged by the end user. We will create, support, and provide Test Plans and Test Cases for UAT submission/sign off after completing and conducting successful unit testing in the development environment.

The system averages uptime of 98.8%, excluding planned downtimes. Bamboo Health provides a minimum of one (1) business day prior to any planned downtime to the customer and participating providers. Bamboo Health shall make all attempts to schedule downtime for system maintenance during

periods when traffic to the site is at a minimum. Scheduled releases occur bi-weekly and within the window of the least average utilization to minimize any potential for disruption. Release notes and details are provided prior to any changes made to the system.

- **How frequently are new versions / patches released? Is there a regular release schedule?**

Scheduled releases occur bi-weekly and within the window of the least average utilization to minimize any potential for disruption.

- **Will release notes be available and how far in advance before the release will release notes be disseminated?**

We currently have two release cycles per month and focus on larger scale development to release once per month (typically on the second release of the month). Release notes will be provided to the State. Hotfixes are coordinated and released on a necessary basis. Our testing and quality assurance process verifies that all functionalities work according to the specifications. Test cases are executed using known and controlled databases in secured environments. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome; otherwise, the test case is marked as "FAILED." Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

- **Provide an example of release notes that State can expect.**

Bamboo Health will provide release notes to the State ahead of any scheduled enhancement/release. Content of future releases is determined based on several factors including, but not limited to, contractual commitments, compliance, legislative requirements, approved product enhancement requests that align with product growth, and foundational maintenance. Bamboo Health will deliver detailed product release notes to DMHA Administrators prior to each bi-weekly product release. In addition, Bamboo utilizes KanbanFlow to provide our clients with details related to available system configurations, product roadmap items, upcoming release details, completed enhancements and all historical product release notes. Below is an illustration of the KanbanFlow Client Facing Roadmap used for PDMP implementations. This will be set up as needed for the Indiana 988 crisis project.
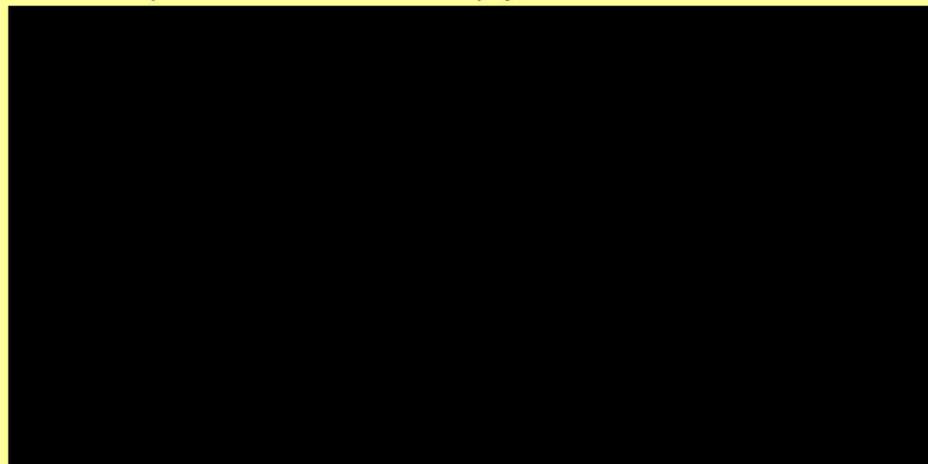
- **How does the State test and give feedback on existing releases?**

Bamboo Health provides several opportunities for clients to share input. All clients receive a dedicated Client Relationship Manager, in this case Jacob Cooper, who is responsible for understanding the needs of the state. DMHA meets with their assigned Client Relationship Manager on a weekly basis to discuss any open items and to share feedback related to all Bamboo Health solutions.

- **What obligation does the State have to implement the new Release?**

Bamboo Health currently delivers detailed product release notes to State DMHA Administrators prior to each bi-weekly product release. In addition, Bamboo utilizes KanbanFlow to provide our clients with details related to available system configurations, product roadmap items, upcoming release details, completed enhancements and all historical product release notes. This advance notice allows the State to provide feedback to Bamboo ahead of the release.

- **How many releases are supported? How many are maintained?**

OpenBeds is a software as a service solution and there is only one (1) release that is available to everyone at the same time.

- **What is your process for the State to recommend future software changes?**

Bamboo Health delivers detailed product release notes to State Administrators prior to each bi-weekly product release. In addition, Bamboo utilizes KanbanFlow to provide our clients with details related to available system configurations, product roadmap items, upcoming release details, completed enhancements and all historical product release notes. Below is an illustration of the KanbanFlow Client Facing Roadmap.

- **Is there an emergency change process? Describe the process and associated timing.**

Jacob Cooper will maintain a Change Request Log with all changes approved through the DMHA. The log will track the following:
- the reason for the change
- a complete description of work to be performed
- an estimate of time and cost to complete the task
- a completion date for the change
- an impact analysis indicating ramifications or impact to the project

Bamboo Health has refined and established new best practices to ensure project modifications identified by the state are estimated for design and development efforts based on requirements defined by the state. Bamboo Health combined change processes into a Change Management Plan that describes each phase of a change request. The Change Management Plan is used as a guidance document for the state to simplify what otherwise would be presented as an overly complicated project plan by less experienced vendor. The purpose of this Change Management Plan is to define all processes, practices, tools, review bodies, and approvals necessary to monitor and control program performance, and identify changes and the potential impact of change on program objectives.

Change Definitions

- **Enhancements**: Software enhancement change requests (CRs) are encouraged for submittal but are out of scope based on the service deliverables as specified within the agreement and may require additional funds. They may be submitted via the Change Request Form.

- **Defects**: The DMHA Team will submit defects to Bamboo Health via the Bamboo Support help form.

- **Contract Change Control**: Contract changes will follow DMHA procedures. Agreed-upon changes to the OpenBeds system that do not affect overall cost or time of the project do not need a change to the contract; however, the change request should be submitted and recorded.

- **Project Specific Change Request Process**: CRs may be initiated verbally; however, the OpenBeds administrator should submit a formal written request to include desired changes in design and/or functionality and include in- and out-of-scope requirements, assumptions, and known risks.

Change Request Steps

Submit formal request preferable via email to their Bamboo Health Client Relationship Manager (CRM). The request will be logged in the DMHA project tracking sheet with the status of "submitted."

If necessary, the DMHA Implementation Team will call a meeting with their CRM and include the following as needed for consultation: members of the Information Technology (IT) team, subject matter experts (SMEs), other stakeholders, and a Bamboo Health representative to determine the impacts of implementing the change or requested enhancement.

Changes that will require payment will be based on Level of Effort (LOE). These approved changes may require a request for additional funding.

Changes that are necessary/approved and affect the PDMP's scope, which may be the result of unforeseen requirements or were not initially planned for, may also have budget and scheduling impacts.

The Change Management approach consists of three areas for approval of CRs:
1. Ensure changes are within scope and beneficial to the project.
2. Determine how the change will be implemented and impact to project timelines.
3. Manage the change as it is implemented.

The DMHA administrator must ensure that any approved changes are communicated to the project stakeholders. Additionally, as changes are approved, their Bamboo Client Relationship Manager (CRM) must ensure that the changes are captured in the appropriate project documentation where necessary.

Bamboo Health Change Control: Change Requests (CRs) will be submitted to the Bamboo Health CRM. The Bamboo Inc. CRM will work with the Bamboo Inc. Development and Product teams to determine the impacts on the system, including risk, scope, cost, and schedule. Next, the Bamboo CRM will prepare a change request document that will detail the level of effort and cost and provide the document to the DMHA administrator. If the change request is approved by the Board's DMHA administrator, Bamboo Inc. will require a signed approval of the change order document to move forward.

Sixty (60) days prior to the commencement of any services under the Contract, Bamboo Health will develop a detailed change control plan that details the process by which CRs are identified, prepared, validated, monitored, approved, and reviewed, subject to DMHA approval. The change control plan shall detail the various steps, roles, responsibilities, and decision points of a change request process, including the relevant staff contacts.

Bamboo, in conjunction with the State, will determine a standard process for accessing the CR Pool. This process shall require, at a minimum, the State's written approval prior to Bamboo's ability to invoice for any funds in the CR Pool.

Bamboo will also maintain a history of all CRs, including the estimated and actual cost and duration for every change request as well as cumulative cost and schedule impacts for all changes for all periods DMHA specifies. Following the implementation of a change, Bamboo will continue to monitor the initial issue and report on the solution quality and effectiveness.

Enhancement Request and Action Plan: The Enhancement Request and Action Plan is a defined protocol meant to structure responses to situations in which the OpenBeds system requires that Bamboo provide functionality and/or support not specified as part of the operation and maintenance in the contract.

Functionality Definition – The DMHA team will create and submit a change order request to Bamboo Health. This request will define DMHA goal(s) for new functionality and program requirements as well as describe what the team believes the new functionality should be.

Enhancement Request Review – Bamboo will determine if they can provide the DMHA team with the desired enhanced functionality, outline the proposed design and level of effort required to provide the new functionality requested by the DMHA team, and provide a cost estimate associated with the level of effort.

Change Order Creation and Acceptance Criteria – Bamboo will draft and formally document the change or requested enhancement in a scope of work via change order. The DMHA team will review for accuracy and provide feedback, if necessary. Once the change order is signed by both Bamboo and the DMHA administrator, the change order will be considered the action plan for the enhancement, and Bamboo will need to meet the deliverables within the change order to receive payment for the work.

Progress Monitoring – Bamboo and the DMHA team will discuss the progress of the change during the established bi-weekly service review call to track work on enhancements and customizations. Bamboo Inc. will report on which action steps from the scope of work are (1) complete, (2) in progress, and (3) have not been started. Any missed deadlines are to be reported to the DMHA team.

User Acceptance Testing (UAT) – Unless otherwise set out in a change order statement of work or purchase order, allow the DMHA team ten (10) days for interim milestones and thirty (30) days for final milestones to review all future deliverables. If defects found during UAT cannot be fixed within a 15-day turnaround and additional time is needed, Bamboo will provide the DMA team with an updated timeline after the identification of defect.

Final Report – Upon completion of release for specific customization, Bamboo will close out the project by providing a final report as evidence of completeness and indicating any approved outstanding issues. Any unapproved outstanding issues shall be remedied prior to project closeout. A final report shall be submitted by Bamboo after the project completion.

Enhancement Support – Routine post-implementation support for enhanced and customized OpenBeds functionality begins when new functionality has been deployed in the production environment.

Depending on the nature of the change, the Bamboo Product, CRM, Marketing and Technical Support teams will collaborate with the state to determine the most effective approach to training and communication. To ensure training and communication aligns with the deployment of the planned change, Bamboo brings a proactive approach to communication and coordination that will provide the lead-time necessary to coordinate the efforts of staff.

When applicable, Bamboo will update training guides and tutorials to reflect user facing changes. For more significant enhancements, web-based training may be necessary. In this scenario, the Bamboo Client Relationship Manager will collaborate with the state to develop content and plan for communicating the training information to end users.

- **How does your company prioritize future changes requested by the State and other customers?**

Content of future releases is determined based on several factors including, but not limited to, contractual commitments, compliance, legislative requirements, approved product enhancement requests that align with product growth, and foundational maintenance.

Additionally, we have established an OpenBeds Advisory Committee which drives direct interaction with state administrators. This forum will allow Bamboo Health to receive real-time feedback and create a needs assessment catalog to help develop and inform current and future product roadmaps. By utilizing this top-down approach, Bamboo is providing the opportunity for the state to share their crisis management vision with us as well.

- **Will training be updated and rolled out as needed for new versions of the software? Describe the process.**

Bamboo Health is committed to offering a training program that ensures administrative users and data requestors have the tools and resources needed to successfully access and utilize the system.

Training will be provided no less than 14 days prior to feature enhancements and no less than 30 days prior to major enhancements. The client may request additional online or on-site trainings as needed. Bamboo will continue to provide and enhance various end-user training guides, documentation, and online training videos.

OpenBeds provides ongoing system training for end users on existing functionality and newly released features via video tutorials and web trainings.

- **What authority will the State have to stop a production release if testing reveals an issue that the State deems critical?**

Bamboo Health applications are using an agile approach with bi-weekly iterations. The requirements identified for these iterations are delivered to QA Team for planning, estimation, and testing. Experienced based testing plays a larger part of the testing as the Test Team possesses domain knowledge. Exploratory testing is carried out once the build is ready for testing. The test cases for planned functionalities are created and stored as we get iterations of the new and/or updated functionalities. All defects are tracked through Jira. These defects are fixed by development team and tested by QA team prior to final regression testing. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome, otherwise the test case is marked as "FAILED". Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

- **How are updates to testing materials integrated into the release management process?**

OpenBeds maps all releases to a comprehensive test plan that includes QA for regression testing, feature testing, and test cases for UAT that can be leveraged by the end user. We will create, support, and provide Test Plans and Test Cases for UAT submission/sign off after completing and conducting successful unit testing in the development environment. We will keep the DMHA Project Manager abreast of all statuses for each of the testing phases, according to the formatted request by the DMHA Project Manager. OpenBeds will publish and issue updated training materials to customers and providers participating in the system in conjunction with regularly scheduled or ad hoc technical updates to the network software. Training materials will be available online to all system users.

OpenBeds collects, captures, and maintains the comprehensive data set for internal quality assurance and delivers on any regular and ad hoc reporting needs. As new business questions and needs arise, they can be addressed through ad-hoc reporting based on existing resources. OpenBeds will provide reports to DMHA that meet State requirements in terms of content, format, and delivery time interval.

6 SOW Section 6 – Business Continuity and Disaster Recovery

Explain how you propose to execute Section 6 in its entirety, including but not limited to the specific elements highlighted below:

- Describe your approach to developing and maintaining a comprehensive, fully tested IT business continuity/disaster recovery plan.
- How often do you perform disaster recovery exercises?
- When was the last time you performed a disaster recovery exercise? At a high level, please provide the results, at a high-level results and action items as part of that exercise.
- Describe what you view as the key risks to this project and how you would mitigate those risks.

Business Continuity and Disaster Recovery

- **Describe your approach to developing and maintaining a comprehensive, fully tested IT business continuity/disaster recovery plan.**

Information systems are vital to Bamboo Health's mission/business functions; therefore, it is critical that services provided by OpenBeds can operate effectively without excessive interruption and with no data loss. Bamboo Health's Contingency Plan (CP) establishes comprehensive procedures to recover Bamboo Health business critical solutions quickly and effectively following a service disruption. The following provides an overview of Bamboo Health's Disaster Recovery procedures, and a full Contingency Plan can be provided upon contract award.

One of the goals of a CP is to establish procedures and mechanisms that obviate the need to resort to performing IT functions using manual methods. If manual methods are the only alternative, however, every effort must be made to continue IT functions and processes manually.

The nature of unprecedented disruptions can create confusion, and often predisposes an otherwise competent IT staff toward less efficient practice. To maintain a normal level of efficiency, it is important to decrease real-time process engineering by documenting notification and activation guidelines and procedures, recovery guidelines and procedures, and reconstitution guidelines and procedures prior to the occurrence of a disruption. During the notification/activation phase, appropriate personnel are apprised of current conditions and damage assessment begins. During the recovery phase, appropriate personnel take a course of action to recover the components at a site other than the one that experienced the disruption. In the final, reconstitution phase, actions are taken to restore IT system processing capabilities to normal operations.

Plan Distribution and Availability
During a disaster situation, the availability of the CP is essential to the success of the restoration efforts. The Contingency Plan Team has immediate access to the plan upon notification of an emergency. The Platform Services Program Manager ensures that a copy of the most current version of the CP is maintained at

Bamboo Health's source code repository replicated across AWS regions. This plan has been distributed to all personnel.

Contingency Plan Team members are obligated to inform the Platform Services Program Manager when they no longer require a copy of the plan.

Line of Succession/Alternate Roles
Bamboo Health sets forth an order of succession to ensure that decision-making authority for the CP is uninterrupted. The VP of Engineering, Chief Security Officer (CSO), and Presidents of Business Units are responsible for ensuring the safety of personnel and the execution of procedures documented within the Bamboo Health Contingency Plan. If the VP of Engineering and CSO are unable to function as the overall authority or chooses to delegate this responsibility to a successor, the Presidents of Business Units shall function as that authority.

In order to preserve the continuity of operations, individuals designated as key personnel have been assigned an individual who can assume the key personnel's position if the key personnel is not able to perform their duties. Alternate key personnel are named in a line of succession and are notified and trained to assume their alternate role, should the need arise.

Activation and Notification
The Bamboo Health ISCP may be activated if one or more of the following criteria are met:
- The type of outage indicates Bamboo Health business critical solutions will be down for more than 12 RTO hours.
- The facility housing Bamboo Health business critical solutions is damaged and may not be available within 24 RTO hours.
- Data has been corrupted and requires recovery from backup.

Outage Assessment
Following notification, a thorough outage assessment is necessary to determine the extent of the disruption, any damage, and expected recovery time. This outage assessment is conducted by the Platform Engineer. Assessment results are provided to the Platform Services Program Manager to assist in the coordination of the recovery effort.

Recovery
The recovery phase provides formal recovery operations that begin after the ISCP has been activated, outage assessments have been completed (if possible), personnel have been notified, and appropriate teams have been mobilized. Recovery phase activities focus on implementing recovery strategies to restore system capabilities, repair damage, and resume operational capabilities at the original or an alternate location. At the completion of the recovery phase, Bamboo Health business critical solutions will be functional and capable of performing the functions identified.

Recovery Escalation Notices/Awareness
During the recovery process, it is important to keep a line of communication open for all internal participants as well as keeping the external customers informed of progress. The recovery escalation awareness requirements and who is responsible for ensuring they are executed are listed below:

1. Platform Services Program Manager will start a "Teams" conference and ensure all appropriate parties are on the bridge. This includes Platform Engineers, Software Operations, Support, and Client Relations.
2. Platform Services Program Manager will notify the Bamboo Health Technical Operations Center to update the operational status website and send email communication of the current state of the product. Bamboo Health currently leverages statuspage.io for this communication.

3. Platform Engineers will update the Platform Services Program Manager of the status of each recovery step as it is executed.
4. Platform Services Program Manager will communicate status to Client Relationship Managers who attend the bridge for direct line of communication to assigned customers.
5. Platform Services Program Manager will communicate with the Bamboo Health Technical Operations Center to ensure operational status and email communication are updated appropriately.
6. On completion, Platform Services Program Manager will communicate with the Director of Platform Services.
7. Director of Platform Services will communicate with the VP of Engineering that the recovery phase of the effort is complete.
8. VP of Engineering will communicate with business leadership concerning the state of the recovery process.
9. Platform Services Program Manager will communicate with the Bamboo Health Technical Operations Center and Client Relations to communicate an all clear once services are restored.

In the case of an unplanned system outage, Bamboo Health will generate outage notifications to all State Administrators and designated staff via an outage email distribution list. The email will include a description of the issue and end user impact. Notifications will be sent in 30-minute intervals until the issue is resolved. Upon resolution, a service restored email notification will be sent to the State Administrators. The Bamboo Client Relationship Manager will provide a Root Cause Analysis to the State Administrator within 48 hours of the outage event.

Reconstitution
Reconstitution is the process by which recovery activities are completed and normal system operations are resumed. If the original facility is unrecoverable, the activities in this phase can also be applied to preparing a new permanent location to support system processing requirements. A determination must be made whether the system has undergone significant change and will require reassessment and reauthorization. The phase consists of two major activities: (1) validating successful reconstitution, and (2) deactivation of the plan. Concurrent processing is the process of running a system at two separate locations concurrently until there is a Functional Validation Testing. Bamboo Health will perform a series of tests in the recovered environment prior to releasing the environment to customers. These actions will be performed and validated by the Product Business Analysis and Platform Engineer.

Recovery Declaration
Upon successfully completing testing and validation, the Platform Services Program Manager will formally declare recovery efforts complete, and that Bamboo Health solutions are in normal operations. The VP of Engineering, Client Relationship Managers, and Director of Platform Services will be notified of the declaration by the Platform Services Program Manager. The recovery declaration statement notifies the Contingency Plan Team and executive management that Bamboo Health solutions have returned to normal operations.

Historical Availability
We are proud to report that **our historical system uptime is 99.8%** of the time each quarter, excluding planned downtimes. Bamboo Health will provide a copy of the annual test results to the DMHA within 30 days of disaster recovery demonstration.

- **How often do you perform disaster recovery exercises?**

Disaster recovery exercises are conducted annually in accordance with HITRUST standards. Please find our HITRUST documentation included on the Additional Documentation and Attachments document under Attachment 4.

- **When was the last time you performed a disaster recovery exercise? At a high level, please provide the results, at a high-level results and action items as part of that exercise.**

Disaster recovery exercises were last performed on February 19, 2021. AWS Command Line Interface Command Execution and AWS Console conducted a review of system status to validate the system. The scenario evaluated was representative of a catastrophic event occurring on the East Coast of the US. Bamboo Health systems housed within the AWS US-East-1 Availability Zone utilize multiple redundancies as part of a multi-az deployment strategy. A region level fail-over to US-West-2 would only be necessary if multiple US-East-1 Availability Zones were to go down with expected recovery >24 hours. AWS has service availability of 99.999% at a region level. Scenarios that would likely lead to a regional fail-over would include severe natural disaster and other mass casualty events.

- **Describe what you view as the key risks to this project and how you would mitigate those risks.**

There are multiple levels of disaster recovery, business continuity, and contingency operations that an organization may face. Sixty (60) days prior to the commencement of services under this Contract, Bamboo Health will submit a comprehensive, fully tested IT business continuity/disaster recovery plan (ITBCP). The ITBCP will, at a minimum, meet the requirements of NIST SP800-34 and detail how Bamboo Health will mitigate against any disaster and/or other significant outage that impacts the Future System availability, vulnerability or security incidents, and data loss and/or compromise.

In the ITBCP, the State and Bamboo Health will mutually agree on reasonable Recovery Point Objectives and Recovery Time Objectives reflective of the State's business requirements and the critical nature of Bamboo Health 's systems and services in support of the associated State business operations.

In the event of a natural disaster, Bamboo Health will be operational within two (2) calendar days after the event. We will submit most recent disaster recovery test results to the State within 12 months of the execution of the Contract. Thereafter, Bamboo Health will conduct annual disaster recovery tests and provide results of these tests to the State. Bamboo Health will maintain a list of contacts at the State and keep those lists updated at any time.

7 **SOW Section 7 – System and Contractor Service Levels**
Explain how you propose to execute Section 7 in its entirety, including but not limited to the specific elements highlighted below:
- Describe how you plan to meet or exceed the Service Level Agreements (SLAs) set forth in SOW Section 7.1 through 7.3. If you think an SLA should be modified or a comparable SLA should replace an SLA detailed in the SOW, propose your modification and describe your rationale for the change.
- Propose any other SLAs or Key Performance Indicators (KPIs) for State consideration.
- Describe your plan for drafting thorough and accurate written responses to all inquiries, regardless of source, pertaining to your operations or performance.

System and Contractor Service Levels

- **Describe how you plan to meet or exceed the Service Level Agreements (SLAs) set forth in SOW Section 7.1 through 7.3. If you think an SLA should be modified or a comparable SLA should replace an SLA detailed in the SOW, propose your modification and describe your rationale for the change.**

Network Implementation and Deployment. Bamboo Health will work with Indiana to configure and deploy network options that best achieve its crisis management needs (as well as future treatment,

access, and administration goals). The State will define the OpenBeds system and network requirements; oversee the implementation steps to deploy the network; control access to members in the network; and have access to the de-identified, aggregated data generated by user engagement, crisis calls, mobile team dispatch, capacity management, and referrals on the network. The State may also name the network; there is no requirement to use the OpenBeds name. Bamboo Health will work with approved partners to contract, configure, train, and onboard them into the network. There are several key tasks and processes that must be completed to ensure a successful implementation and launch of the network, and our team at Bamboo Health will work closely with State personnel throughout the process.

Network Administration. The OpenBeds platform will provide Indiana with visibility into system activity necessary to perform network administration support to the customer, its designees, and participating network organizations. Network administration tasks to be performed by the State should include, but are not limited to, the following tasks and services:

- Maintenance of standards, guidelines, and mandates for network processes and procedures.
- Active monitoring of network activity to ensure timely responses to referrals and accurate availability status.
- Actively responding to network standards, guidelines, and mandate infractions—alerting facilities that are in violation of standards as needed.

Network Engagement Bamboo Health will provide ongoing monitoring of referral activity and volume to encourage ongoing ultilization of the system. These activities may include, but are not limited to:

- Outreach to providers whom referral activity has decreased to gain insight into workflow/system challenges that might contribute
- Track the number of complaints filed by call center and referring users that specifically refer to an incorrect number of beds and, as appropriate, analyze and respond to those complaints that are deemed to have been caused by technical failure.
- Propose and provide additional remedies to encourage noncompliant providers to use the OpenBeds system as intended. Additional remedies could include training or active outreach (e.g., by phone) to noncompliant providers.

Network Member Support. OpenBeds provides support to network members during normal business hours to address issues resulting from non-technical matters associated with the system software or network operations. OpenBeds publishes training materials and other support publications within the system in addition to contact information for network member support. Network support for critical issues, defined as those which completely prohibit use of the OpenBeds system, is available twenty-four (24) hours per day, seven (7) days per week.

Technical Support. OpenBeds provides technical support to the customer, its designees, and participating network members. Technical support service includes addressing problems resulting from technical issues associated with the system software. OpenBeds publishes training materials and other support publications within the system in addition to contact information for technical support. Technical support for critical issues, defined as those that completely prohibit use of the system, is available twenty-four (24) hours/day, seven (7) days/week.

Care Center Outreach. OpenBeds will market its solution to treatment providers, facilities, and care organizations throughout Indiana and deploy practices that have proven to be effective. We will act as an advisor to assist the customer and its designees in identifying and attracting new treatment and referral providers. Additionally, we will provide a comprehensive marketing communications tool kit to support statewide program engagement.

Training and Training Materials. OpenBeds provides training and support for new and existing network members through a combination of webinars and video media. OpenBeds will publish and issue updated training materials to customers and providers participating in the system in conjunction with regularly scheduled or ad hoc technical updates to the network software. Training materials will be available online to all system users.

System Availability and Maintenance. The OpenBeds system will be available 99.8% of the time each quarter, excluding planned downtimes. We will give notice a minimum of one (1) business day prior to any planned downtime to customers and participating providers. OpenBeds will make all attempts to schedule downtime for system maintenance during periods when site traffic is at a minimum.

Reports. OpenBeds will provide reports in keeping with Indiana's reporting requirements. The report will be provided in a customer-approved format, based on reports submitted to our current state customers.

Product Management and Software Development. OpenBeds has dedicated product and engineering teams, who work closely to maintain and improve the product. These teams are also aligned with our customer-facing representatives, such as the network implementation and management personnel. The customer-facing team works with state personnel and a group of stakeholders at the onset of an implementation to solicit feedback and craft customization requirements. We will consider all the State's system customization requests. Should additional requirements be identified, we will initiate an iterative planning and development process in cooperation with the appropriate network members.

Ongoing Product Improvement. OpenBeds is a Software as a Service (SaaS) system that serves as the host for other state behavioral health treatment access and referral networks. We continually enhance the solution and introduce new features or improvements that may want to adopt into their network. We will obtain approval and explain new features prior to introducing them into the network. We will solicit and capture feedback from users at regular intervals and work with the State to improve and further customize the system, as necessary.

We use Agile methodologies to address customer requests, enhancements, and new product development. We currently have two release cycles per month and focus on larger scale development to release once per month (typically on the second release of the month). Release notes will be provided to the State. Hotfixes are coordinated and released on a necessary basis. Our testing and quality assurance process verifies that all functionalities work according to the specifications. Test cases are executed using known and controlled databases in secured environments. A test case is considered "PASSED" when the actual outcome corresponds to the expected outcome; otherwise, the test case is marked as "FAILED." Expected outcomes are defined separately in each test case. A 100% test coverage is required. All implemented changes need to be tested at least once. No critical defects are tolerated.

The OpenBeds team will accomplish the above tasks through a combination of remote work and in-person visits at state, provider, and stakeholder meetings, with the pandemic determining in-person visit frequency.

Issue Level	Description
1 – Urgent	Bamboo Health 's System solution operational ability to receive, route and deliver system services is not operational and cannot reasonably function for greater than 10% of the State's operations.
2 – High	Non-business critical features or modules of Bamboo Health 's System solution are impaired or non-functional.
3 – Medium	Non-disabling or cosmetic errors with little or no impact on Bamboo Health 's System solution.

4 – Low	Requests for information from State employees on Bamboo Health 's System or services, policies, processes, or procedures.

- Critical issues affecting the platform under Bamboo Health 's control will be addressed as quickly as reasonably possible. Service Level times (i.e., response time and length of issue/outage for Service Credits) shall begin on the earlier to occur of the following: (i) Bamboo Health initially became aware of the problem/outage, and (ii) when the State attempts to notify Bamboo Health of the problem/outage.
- Bamboo Health will provide a response time of not more than 30 minutes to requests for support or reported issues/outages. Bamboo Health will respond to each support incident with the applicable response time and resolution within the timeframes detailed below.

Issue Level	Initial Response	Restoration or Resolution, unless communicated by Bamboo Health and approved by the State
Urgent	15 minutes (by phone)	15 minutes
High	15 minutes (by phone)	72 hours
Medium	24 hours (by web)	1 to 10 business days
Low	2 business days (by web)	1 to 10 business days

Open Issues and Resolutions

Bamboo Health will report the number of issues/requests resolved and remaining open in a given monthly period, the amount of time the action or incident has been open, and the amount of time originally estimated for resolution. Bamboo Health will resolve 99% of opened incidents in the required timeframes as detailed in Section 7.2 to the satisfaction of the State.

- **Propose any other SLAs or Key Performance Indicators (KPIs) for State consideration.**

Following are Bamboo Health's SLAs for State consideration:

Priority Level	Description	Response Time* Target (Business Hours from creation of service ticket)	Resolution Time
1	The OpenBeds service is non-operational, or users cannot access the system, or the functionality is significantly decreased or back up or other security of data can no longer be performed. The defect affects mission critical functions or information in the production environment and may include, but not be limited to, data loss or corruption, system crash or missing major functionality.	1	Bamboo Health will work to resolve withing 4 hours or provide a workable workaround.
2	The OpenBeds service is operational with functional limitations or restrictions but there is minimal business impact. Under a Priority 2, the defect will have a large impact on the functionality of the application but does not require immediate release into the production environment. This defect allows continued use of the application, but there is a known compatibility or operability disruptions with no known Subscriber acceptable work-around or missing minor functionality.	2	Bamboo Health will work to provide a resolution time once priority of the ticket has been assessed.

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3	The OpenBeds service is operational with functional limitations or restrictions that are not critical to the overall system operation, and the defect has a moderate impact on the functionality of the application. However, the application remains usable by all groups. A functional error exists for which there is a Subscriber acceptable workaround. Failures assigned this priority level cause no delays in production.	8	Bamboo Health will work to provide a resolution time once priority of the ticket has been assessed.
4	The OpenBeds service is operational with problems or errors, which have little impact on system operations. Priority 4 shall include, but are not limited to, documentation errors. Priority 4 defects have a minor or cosmetic error in the functionality of the application in a production environment. Defect has no impact on the ability to execute a production application, however. Failures assigned this priority level cause no delays in production.	24	Bamboo Health will work to provide a resolution time once priority has been assessed.

*Response Time means acknowledgment by Appriss of receipt of the reported issue.

- **Describe your plan for drafting thorough and accurate written responses to all inquiries, regardless of source, pertaining to your operations or performance.**

Our Operations and Support teams are cross trained to manage clients across our suite of solutions, including OpenBeds' Crisis Management system. Our Support team is tiered according to priority levels to ensure we can meet unexpected surges in activity and critical client needs, such as hosting bridge lines to triage and trouble-shoot critical impact client issues. Additionally, training encompasses responding to inquiries via written response as well as phone communication.

8 SoW Section 8 – End of Contract Duties

Explain how you propose to execute Section 8 in its entirety, including but not limited to the specific elements highlighted below:

- Describe your commitment and ability to ensure smooth outgoing transition of activities and responsibilities to the succeeding contractor, if this becomes necessary. Describe your approach to developing a Turnover Plan.
- Describe your approach to transitioning any and all State-owned data, if this becomes necessary. Describe your commitment to providing a copy of non-proprietary system components or database(s) used, if this becomes necessary.
- Describe any other non-system transition related services you propose.
- Describe the transition process to migrate application support to the State or another supplier as needed.
- What timing does your company recommend starting the transition and when will the transition be finished?
- To what extent and in what duration will your company personnel be available post-transition if questions or issues arise as part of support.

End of Contract Duties

- **Describe your commitment and ability to ensure smooth outgoing transition of activities and responsibilities to the succeeding contractor, if this becomes necessary. Describe your approach to developing a Turnover Plan.**

Upon project completion, the Bamboo Health Project Manager will conduct a post-mortem (Lessons Learned) meeting internally as well as with the DMHA team. The Bamboo Health Project Manager will

then have a turnover meeting where the DMHA team will be transitioned from implementation over to their Client Relationship Manager. The turnover meeting provides a comprehensive look at the project overall, as well as any outstanding items requiring follow-up. Please find an example of a Postmortem and a Turnover Document included as a separate attachment.

End of Contract Duties
Per SOW Section 8, Bamboo Health will ensure State 988 operations experience no adverse impact from the transfer of scope to the State when the contract is complete or terminated. Bamboo Health will:

- Develop and submit to DMHA a Turnover Plan (no less than 180 days prior to the end of the Contract period) covering the turnover of the OpenBeds Crisis Management solution to the State or succeeding Contractor. The Turnover Plan will be a comprehensive document detailing the proposed schedule and activities associated with the turnover tasks. The Turnover Plan will be approved by DMHA at least 30 days prior to implementation.
- Describe the turnover approach and schedule for transfer of all project artifacts and documentation created, maintained, and updated throughout the Contract term.
- Attend transition meetings, as reasonable and necessary.
- Provide timely and accurate transmission of all information related to open audits, investigations, and other activities contemplated by this Contract.
- Transition, provide access to or exports of, any and all customizations or configurations, including users, security hierarchy, skills, workgroups, licensing, logs, recordings, and any and all other State-owned data.
- Provide a copy of non-proprietary solution components or database(s) used.
- Transition and/or provide access to and exports of any/all customizations or configuration, such as users and security hierarchy, skills, workgroups, licensing, logs, recordings, and any state-owned data.
- Deliver to the DMHA a final invoice for all work done under contract through the date of transition.
- Comply with any other reasonable State request.

- **Describe your approach to transitioning any and all State-owned data, if this becomes necessary. Describe your commitment to providing a copy of non-proprietary system components or database(s) used, if this becomes necessary.**

Upon project completion, the Bamboo Health Project Manager will conduct a post-mortem (Lessons Learned) meeting internally as well as with the DMHA team. The Bamboo Health PM will then have a turnover meeting where the DMHA team will be transitioned from implementation over to their Client Relationship Manager (CRM). The turnover meeting provides a comprehensive look at the project overall, as well as any outstanding items requiring follow-up.

As part of this process, Bamboo Health will transition, provide access to or exports of any and all customizations or configurations, including users, security hierarchy, skills, workgroups, licensing, logs, recordings, and any and all other State-owned data.

- **Describe any other non-system transition related services you propose.**

Bamboo Health provides ongoing consultation on standards, guidelines and mandates for network processes and procedures.

- **Describe the transition process to migrate application support to the State or another supplier as needed.**

Bamboo Health will transition and/or provide access to and exports of any/all customizations or configuration, such as users and security hierarchy, skills, workgroups, licensing, logs, recordings, and any state-owned data.

- **What timing does your company recommend starting the transition and when will the transition be finished?**

Once Bamboo Health is notified of the States desire to transition services, we recommend starting the transition 14 days following notice. At such time, the Bamboo Health project team will engage with DMHA to construct a thoughtful transition plan, with the end goal of mitigating user impact as much as possible for transition of services. Such plan will require approval from DMHA prior to implementation. Bamboo Health will ensure the appropriate level of support is provided throughout the duration of the contract term.

- **To what extent and in what duration will your company personnel be available post-transition if questions or issues arise as part of support.**

Bamboo Health company personnel will be available post-transition should questions or issues arise following separation of services for a 4-6 week time period. Bamboo Health will ensure the appropriate level of support is provided throughout the duration of the transition timeframe.