PermiaCare 2024 VOIP RFP – Q & A as of 3/22/2024

Please find below the questions received as of 3/22/2024 regarding the PermiaCare VOIP RFP. Answers may be found highlighted in yellow below and in a separate spreadsheet titled "VOIP RFP Design 3-18-2024.xlsx".

We are interested in participating in this RFP for VoIP services. I am unable to locate the link or further information with the full details of the RFP. I have checked on Govspend.com but have not been able to find it. Could you please direct me to the link with all the information necessary to bid on this RFP. Thank you for your assistance. I look forward to hearing from you.

You can find the RFP related documents at https://www.permiacare.org/wp-content/uploads/2024/03/RFP-2024-VOIP-Phone-System-RFP-complete.pdf

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I have several questions regarding the RFP that was issued for the "2024 VOIP System Replacement" that I am hoping you can answer for me.

1) Out of the 340 endpoints how many are heavy daily users versus a lobby style or low user endpoint/user?

   Please see the table in response to the question below.

2) Regarding the SPA devices, how many of these devices need to be quoted?

   We currently have about 5 Cisco SPA-112 devices supporting 9 analog phones.

3) In addition to the purchasing Cooperatives you listed are you also a member of the TIPS program?

   We anticipate board action of TIPS membership on 3/19/2024.

- Total number of locations. We can use summary/totals for inventory counts so no need to break things out unless you have it ready. WE will need eventually.
- # of phones/users broken down by location and by the designation below.
    o # Users/Seats (full features, voicemail etc.)

- o # Basic Seats that take or make outside calls (break room/public areas/warehouse etc). These are public areas not tied to specific users.
- o # Basic Seats INTERNAL CALLING ONLY (if any)
- o # Conference Phones
- o # of Mobile Only Users not reflected in counts above
- o # of Receptionists (this can be a physical phone with sidecar or integrated virtual receptionist).

- Any CRM or other integration (MS Dynamics/0365, Google Apps, Salesforce.com etc.)?
- Details on any paging/Intercom system if applicable... number of horns, zones etc.
- OTHER Collaboration Tools in use now (TEAMS, Webex, GTM, Zoom etc). If those need to be included please identify. Obviously TEAMS is in play but any others are good to know.
- # of Toll Free Lines
- Any Call Center or Contact Center requirements? Call Queues? If so, we will need a basic understanding of requirements as well as number of agents/supervisors.
- Estimated Inbound Toll Free Minutes per month (if any)
- # DID's
- # Fax lines
- Estimated Long Distance/International Usage (if known)

1) We don't have any basic seats with internal calling only.
2) We haven't done any integration of the VOIP system to cell phone for mobile users (although I will be interested in seeing what capabilities the new solutions bring to the table).
3) How are "Conference phones" treated differently? We have a few designated conference rooms, but we also have some classrooms with phones in them. Is there a distinction?
4) We have 3 receptionists with side cars on their phones (all Polycom VVX 410/411 models). Nobody is using the current virtual console.
5) There are no CRM integrations.
6) We use Cyberdata paging speakers and a Cyberdata speaker server for broadcasting emergency messages. The server part of that solution is a generic SIP device tied to an extension. We currently have 3 of these with plans to expand to 3 or 4 more.
7) All staff have Teams for IM, screen sharing and in-house calling. We are not using Teams for connection to the PSTN. Additionally, some staff have Zoom accounts (a mixture of basic and full licensed products) that are used for meetings and telemedicine. We have about 15 to 20 Logitech Rally Bars that are being used as Zoom Rooms as well.
8) We have about 2 or 3 toll free lines. I'll need to check for the exact count – we had more but have been consolidating them.
9) We don't have any call center or contact center needs. However, we do have 80 groups that allow us to ring multiple extensions at the same time.
10) We utilize an e-fax service that is integrated with our Ricoh and HP multi-function devices, as well as available via a fax driver on our PCs. This agreement has just been renewed and won't expire until March, 2025.
11) We currently have 394 DIDs. However, I can see that number dropping to approximately 330 when we clean things up and depending on how conference phones/voicemail only extensions are provisioned.
12) We have unlimited long distance with our current provider, so I haven't paid much attention to the volume. I do recall that "long distance" wasn't defined as outside of our area code back when we paid for those call minutes individually. There were even some numbers in a city 20 miles from us that were considered long distance unless we paid the appropriate extortion fees to AT&T for a "metro" number that could call them without additional charges. With that being said, I ran a report of all outbound calls for the last 28 days and found that we had used 360 hours of long distance.

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This is with regard to your requirement for Voice Over Internet Protocol (IP) phone solution. Could you please help me with the following questions:

1. Whether companies from Outside USA can apply for this?
    (like India or Canada)

2. Whether we need to come over there for meetings?

3. Can we perform the tasks (related to RFP) outside USA?
    (like India or Canada)

4. Can we submit the proposals via email?

We came across the **VOIP System Replacement RFP** from RFPmart and are interested in submitting a bid. Could you please provide further details regarding the **Vendor Proposal Documentation** as mentioned in the RFP. I have attached the document we retrieved from the portal for your review.

The Vendor Proposal Documentation should include any information that you feel is necessary to describe your proposed solution and any other information that you feel would be helpful to us in making an informed decision. Please note that response to the items in Appendices A, B and C are required as well.

Should the proposal include new phones for those 340 users?

While we have existing phones (Polycom VVX410/411 and Yealink T46U/T48U), we would like to consider replacement of these devices. Please include new comparable phones as an optional item on the bid. Inclusion of this optional purchase will be dependent on factors such as compatibility of existing phones with the proposed system, expected remaining lifespan of the existing phones and any cost/feature benefit to purchasing replacements at the time of implementation of the new system.

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1.   Do you have existing Microsoft 365 licenses? If so, please provide the counts for O365/M365 G1, G3, and G5 licenses.

2.   How many users are intended for the Contact Center functionality? Is call recording required? If yes, specify whether it's needed for Contact Center users, other users, or both, along with the counts.

3.   Does proposed solution need to accommodate analog devices? Please list the total number and types (Fax, Card Readers, Analog Phones), including individual counts.

4.   What is the number of paging devices requiring analog connectors?

5.   How many Desk, Conference, and Video Conference Phones are needed? Detail the count for each and any preferred models or brands.

6.   Where are customer emails currently hosted?

We have a mixture of Office 365 E3 and Microsoft 365 E3 licenses since we are in the middle of a migration from O365 to M365. You can assume that all staff will have M365 E3 licenses prior to implementing the new VOIP solution.

We do not operate a traditional call center or record calls at this time.

We currently have about 5 Cisco SPA-112 devices supporting 9 analog phones.

➢ Interactive Voice Response capabilities

Are you referring to IVR like an automated attendant or the caller voicing out the extension or department or extension they want to reach rather than having to press a touch-tone selection?

We have several programs that use an auto-attendant for routing inbound calls. There are no programs that use the caller's voice for call routing.

➢ Support analog phones with SPA-type devices

When you mention providing the option for new phones are you also considering replacing the analog conference phones, connected to the SPA-112 devices you have now with SIP conference phones?

If yes are there 5 conference phones or 8? The attached .xls sheet shows 5 conference phones but 8 grand total.

We currently have 5 SPA112 (dual channel) devices supporting 8 conference phones and 1 elevator phone. One of the SPA devices will need to be retained to support that elevator phone. We would like to replace the rest of the conference phones with wireless SIP conference phones.

➢ Phone Types existing VVX 410/411, Yealink T46u/T48u

Based on your overall count of 296 "Users" and 41 "Basic Users"

Do you happen to have a breakdown of how many of each model mentioned above you are currently using?

See the chart below. Note that we have 2 or 3 Polycom phones as spares, not connected to any extension or user.

Polycom VVX410	304
Polycom VVX411	13
Yealink SIP-T46U	5
Yealink SIP-T48U	16
Cisco SPA112 channels	9
Grand Total	**347**

What level of phone and what quantity of each level of phone, would you like us to propose?

All the Polycom phones may be replaced with phones of capability and quality similar to that of the Yealink T46U model. If you propose replacement of our existing Yealink phones, then they should be replaced with 5 phones similar to the Yealink T46U and 16 phones similar to the Yealink T48U to match the current capabilities.

Of the 296 Users are the 3 receptionists included?

Yes.

➢How many users will need text transcription of voice mails?

Please include voicemail transcription for all the fully licensed users (excluding the Basic Seats). So, 296 users need this feature.

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Will you be providing the PoE switches or are we required to do so? If you are, can you provide the manufacturer and model of the switches?

We have POE switches in place. They are a mixture of Ubiquiti models (48-port, 24-port, 16-port, 8-port). You will need to inform PermiaCare if you find our switches inadequate for your solution and recommend alternatives.

Will VLAN's be required if we are providing the data switches? Will you establish VLAN's if you are providing the data switches?

While we use VLANs to segment our network, there is no dedicated VLAN for the VOIP phones. This is due to the use of a single network cable from the switch to the phone and "piggybacking" the PC on the second ethernet port of the phone. If you wish to suggest a solution that allows the phones to operate on their own VLAN while continuing to run the PC's connection through the phone on a different VLAN, then we are happy to implement that for you.

Are there CAT5e/6 cables at every location where a phone is required?

Yes. Since we are replacing our current VOIP solution, you can assume that all necessary network cabling is in place.

You mentioned group paging. Is this to be done through the telephone instruments or an overhead paging system? If overhead paging, is this already in place or is it required?

Group paging is done via the CyberData equipment that was referenced (IP multicast speakers and paging servers). With respect to the VOIP system, this means that you will need to support the CyberData paging server in your system as a SIP device.

You also mentioned IVR capabilities. What are you looking to utilize IVR for? What features?

As mentioned in a previous answer to a question, the use of the term IVR was in error. We do not use any feature that listens to the caller's voice and responds. However, we do have several programs that utilize auto-attendant capabilities. The original info in the RFP document should have stated "auto-attendant".

Ring Groups – how many ring groups total are required?

Our current configuration includes 80 ring groups. However, 16 of those groups were created to help handle staff with extensions in multiple buildings and 22 of those groups were created for use with the "Panic" buttons at our different locations. If you can implement these features without ring groups, then the number of ring groups needed would be reduced proportionally.

How many #'s need to be ported?

We have 394 phone numbers configured in our current system. That number could drop to around 330, depending on how conference phones and voicemail only extensions are handled in your solution. We will want to port approximately 165 of our existing numbers. We don't care if the rest of them are ported or new numbers assigned by the provider of our new system.

Are there physical fax machines? How many will need to be integrated?

We have an E-Fax solution that handles all inbound and outbound faxes. Faxing is not a part of this project.

Are there any Toll Free #'s? If so, how many and how much usage on those lines?

We have 1 toll-free number. The usage is minimal since this number is only used for new clients to request services. Day to day operations don't use the toll free-number. Our last invoice showed 6 calls for 2.2 minutes.

Do any of the 340 telephones need to be wall mounted?

We have no more than 10 phones that will require wall mounting.

Who is your existing carrier for both voice and data? Are you under contract with them?

Our connections to the PSTN from the VOIP solution are provided by our existing VOIP solutions provider (Sangoma). Due to having locations scattered across 8 counties of West Texas, the data connections for our buildings are mixed between multiple providers. The largest share of our circuits is provided via AT&T fiber. The smallest ones are on Big Bend Telephone Coop.

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- How many total analog devices? How many ATA ports will you need? Is this across different locations where the analog runs back to?

  Our usage of ATA ports is summarized below. Please note that you may propose SIP conference phones and decrease the number of ATA ports required proportionally. The elevator phone must remain analog.

	# of SPA112 devices	# of analog ports used	# of Conference Phones	# of Elevator phones
Location 1	2	3	2	1
Location 2	1	2	2	0
Location 3	1	2	2	0
Location 4	1	2	2	0
Totals:	**5**	**9**	**8**	**1**

- How many presence status buttons will you need per user?

We would like to have 6 to 8 presence status indicators for each user. However, this is not a mandatory requirement.

- What features are expected/required for a client lobby phone?

The client lobby phone does not have a DID to receive inbound calls. It doesn't call other extensions, but it should have an extension number of its own for receiving transfers from the receptionist. No international calling is allowed on this phone. We would prefer that it not have a Panic Button programmed. It doesn't need to have any additional buttons other than the standard dial pad, although extra buttons that are disabled is an acceptable alternative.

- Is the intention to have this deployed on-site or remotely?

Solutions that install any hardware other than the actual phones and ATA devices will not be considered. We do not want to go back to hanging PBX hardware in our facilities, so a fully hosted solution is required.

- Is there any overhead paging systems we should be aware of? If so, what is the model and is it analog or SIP

We use Cyberdata paging speakers and a Cyberdata speaker server for broadcasting emergency messages. The server part of that solution is a generic SIP device tied to an extension. We currently have 3 of these with plans to expand to 3 or 4 more. The model number of the paging server is 011146 and the speakers are 011458.

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Glenn, for the folks who take inbound calls, and those who also handle the panic call groups, what is the total number of users who would be part of these call flows? In other words, I do think that there is some benefits to use a true call center vs all this call routing within a traditional pbx. That does come with some costs but there are some inexpensive ways to do this, but I need to know:

How many users would be part of this call center that would log and log out of a call queue(s)?

This would speed up any interaction in a panic situation where time is so important.

None of our users are required to log into their phones before using them. We know that this limits some capabilities, such as integration with Outlook and other directories, but we feel that it's a much better workflow for us. This allows anyone to step into any office and press the "Panic" button immediately. It also avoids any "forgot to log out so the next person can't use the phone" issues.

We have 3 types of Ring Groups:

1) Groups that begin with "Panic" -- These groups are used to ring several phones when anyone presses a soft-key on the phone labeled "Panic". In the existing system, pressing the Panic button rings a pre-assigned group depending on where the phone is located. So, we have multiple Panic groups to service those calls.

2) Groups that begin with "u_" – We have several staff roles that require the employee to work in multiple offices. The existing VOIP vendor instructed us to configure multiple extensions for these staff and then create a Ring Group so that all of their extensions would ring when a call came into any of their lines (DID or extension dial). If they didn't answer anywhere, then the caller was directed to a single voicemail box for that employee.

3) All other groups – These groups are used to Ring multiple extensions when a call comes into the main number (DID or pseudo-extension) for the program. Some programs have 2 Ring Groups. The first one rings 3 times and then the second one rings another 3 times before the call is routed to a crisis hotline answering service or to a voicemail box assigned to that program. This is handled differently, based on the requirements of the programs. Often the second ring group in a program contains all of the staff in the original group plus a few extra staff (for escalation).

If you can accomplish the goal of ringing multiple phones assigned to the same staff without using multiple extension numbers and ring groups (type 2 above), we would be very happy to hear about that.

The groups that assist with routing of inbound calls (type 3 above) help us handle the multiple ways that our programs wish to route inbound calls. It almost feels like we have multiple small businesses operating under a larger corporate umbrella. Some examples of the way inbound calls are handled for our programs are:

1) Ring Group → Backup Ring Group → Department Voicemail

2) Ring Group → Backup Ring Group → Transfer to Crisis Hotline (external #)

3) Auto-attendant

4) Direct to Voicemail Box

If you feel that a call center solution is the best way to meet our needs, then please propose it. We don't want our preconceived notions about call center capabilities to limit the solution. We assumed that call center solutions were not right for us because we don't feel that we have the need for round robin call assignments, call monitoring and other call center specific features.

The actual setup of our ring groups is documented in the table below. It appears that we have some cleanup to do. For example, ring groups containing only 1 extension don't make sense.

AdminBackup	1166	1148	1133									
AdminBlast	1140	1143										
AdminBlast2	1140	1143	1166	1133								
BAS	7209	7201	7207	7205	7203	7202	7214	7204	7211	7206	7212	7216	7215
BASIN_Midland	7301	7302	7303	7304	7305	7306						
BridgesMidland	1302	1309	1308	1303	1307	1311						
BridgesMidRecpt	1309	1308	1307									
BridgesOdeBlast	4231	4244	4229	4251								
BridgesOdeRecpt	4251											
Bridges_PC	4251											
ECI_Midland	1204	1202	1206	1207	1208	1210	1211					
ECI_Odessa	2211	1204	2213	2228	2214	2209	2216	2208	2218	2219		
ECI_Odessa 2	2211	2209	1204	2213	2214	2208	2218	2228				
IDD_Autism	3217											
IDD_FS	3306	3303	3304	3302								
IDD_Host_Home	3102	3206										
IDD_Mid_DayHab	3404	3402	3406	3403								
IDD_Mid_Intake	3115											
IDD_Mid_Nurse	3113											
IDD_Mid_Recpt	3108	3119	3117									
IDD_Ode_Dayhab	3216											
IDD_Ode_Intake	3217											
IDD_Ode_Nurse	3205	3210										
IDD_Ode_Recpt	3222	3204										
ITBlast	1164	1152	1161	1162	1158	1165						
MH_Alp_Blast1	6209	6205	6202	6211	6206	6201	6208	6203	6217			
MH_Alp_Blast2	6214	6216	6213	6215	6212	6201						
MH_FS_Blast	6113	6112	6116	6110	6109	6103	6104	6108	6101	6107	6105	
MH_Mid_Blast	1102	1111	1130									
MH_Ode_Blast	4204	4205	4214									
MH_Pres_Blast	6302	6303	6306									
MH_VH_Blast	6408	6406	6404	6405	6403							
MH_VH_Blast2	6408	6406	6404	6405	6403							
Panic_Admin	1142	1132	1184	1164	1152	1144	1169	1159	1133	1158		
Panic_BAS	7209	7201	7207	7205	7203	7214	7210	7204	7211	7206		
Panic_BASIN Midland	7301	7302	7303	7304	7305							
Panic_Bridges_M	1302	1303	1131	1307	1312	1119	1105	1311				
Panic_Bridges_O	4231	4244	4254	5346	4246	4229						
Panic_ECI_Mid	1209	1204	1210									
Panic_ECI_Ode	2208	2228	2220									
Panic_IDD_CLEW	3401	3404	3402	3405	3406	3403						
Panic_IDD_FS	3306	3303	3304	3302								

Panic_IDD_Mid	3102	3108	3101	3104	3115	3117	3107						
Panic_IDD_Ode	3214	3222	3220	3203	3217	3204	3209						
Panic_MH_Alpine	6202	6201	6215	6207	6208	6203	6212	6217					
Panic_MH_FS	6113	6112	6101	6109	6104								
Panic_MH_Mid	1116	1130	1142	1184	1127	1164	1144	1169	1122				
Panic_MH_Odessa	4234	4236	4201	4222									
Panic_MH_Pres	6306	6303											
Panic_MH_VH	6408	6406	6402	6404	6405	6403							
Panic_Rainbow	4304	4302	4303	4307	4301	4306	4305						
Panic_Rise_PB	1401	1402	1164	1403									
Panic_SA_Mid	5108	5109											
Panic_SA_Odessa	5345	5340	5343	5344	5330								
Panic_SA_TP	5201	5203	5210	5204	5215								
RainbowHouse	4303	4307	4301	4305	4308	4309	4302						
RainbowHousing	4304	4306											
RisePB_Blast_2	1401	1402	1403										
Rise_PB	1402	1403											
SA_Midland	5108	5109	5345										
SA_Odessa	5108												
SA_TP_Blast1	5201	5203	5215	5209	5216	5217	5103						
SA_TP_Blast2	5201	5203	5210	5215	5209	5216	5217						
u_Alpine_Nurse	6203	6304											
u_DataMgmt_Dir	1183	4233											
u_ECI_Director	2228	1210											
u_ECI_TeamLead	1209	2220											
u_FamilyPartner	1176												
u_FrontierNurse	6107	6304	6203	6405									
u_Frontier_FC	6305	6202	6404	6106									
u_Frontier_LPC	6214	6301	6401	6108									
u_Frontier_Mgr	6208	6105											
u_FtStockton_Nurse	6107	6405											
u_IDD_Crisis	3211	3103											
u_IDD_Director	3106	3213											
u_IDD_HostHome	3102	3206											
u_IDD_ProdCoord	3107	3209											
u_IDD_reception	3117	3119											
u_SA_Outpatient	5103	5330											

Location Name	Street Address	Program	Users	Basic Seats	Conference Phones	Voicemail only extensions	Main departmental numbers	Panic Extensions	Notes
Administration	401 E. Illinois, Midland, Texas	ECI Midland	10	2	0	1	1	1	
		Bridges Midland	9	4	0	1	1	1	
		IPC Midland	0	0	0	1	1	0	
		MH Midland Clinic	48	0	0	1	1	1	
		Data Management	2	0	0	0	0	0	
		Accounting	6	0	0	1	0	0	V=Payroll Support
		IT	6	1	0	0	0	0	
		HR	5	0	0	0	1	0	
		Administration	12	2	2	1	1	1	Corp Compliance is a full user, V=Admin B=2nd Classroom, 1st Classroom, Elevator
			98	9	2	6	6		
CLEW Midland	1403 E Front Street, Midland, Texas	CLEW	3	5	0	1	1	1	
IDD Midland	400 N Carver Street, Midland, Texas	IDD Midland	16	2	0	1	1	1	B = Med Recs, Copy Room
		Crisis Respite	1	1	0	1	1	1	
			17	3	0	2	2		
Johnson Center	502 N Carver Street, Midland, Texas	SUD Midland Outpatient	11	0	0	2	1	1	V=OSAR, Midland SUD
IDD Fort Stockton	1123 N Main Street, Fort Stockton, Texas	IDD Fort Stockton	3	1	1	0	1	1	
MH Fort Stockton	301 E 5th Street, Fort Stockton, Texas	MH Fort Stockton	10	2	1	0	1	1	B=Physician, Copy Room
Presidio	200 O'Reilly Street, Presidio, Texas	MH Presidio	5	1	0	0	1	1	
Alpine	805 N 5th Street, Alpine, Texas	MH Alpine	14	3	2	0	1	1	B=Telemed, Speakers, Front Office
		ECI Alpine	1	0	0	0	0	0	
			15	3	2	0	1		
Van Horn	700 W Broadway Street, Van Horn, Texas	MH Van Horn	6	2	0	0	1	1	B=Telemed, Lobby
IDD Odessa	3116 Kermit Highway, Odessa, Texas	IDD Odessa	18	1	1	1	1	1	B=Dayhab
Grant Street	600 N Grant, Odessa, Texas	MH Odessa	40	1	1	0	2	1	B=Drug Screen MH, Classroom
		Bridges Odessa	3	1	0	1	1	0	B=Telemed
		IPC Odessa	3	1	0	0	1	0	B=Contractor/Provider
		Billing	3	0	0	0	0	0	
		MVPN	1	0	0	0	0	0	
			50	3	1	1	4		
Turning Point	2000 Maurice Street, Odessa, Texas	SUD Turning Point	7	7	0	1	1	1	
Basin Odessa	1330 E 8th Street, Suite 315, Odessa, Texas	BAS Odessa	13	2	0	1	1	1	
Family Resilience Center	4682 E University Blvd, Suite D, Odessa, Texas	FRC	3	0	0	1	1	1	
McArthur	1012 W McArthur Street, Odessa, Texas	Rainbow House	7	1	0	1	1	0	
		SUD Odessa Outpatient	15	0	0	1	1	1	
			22	1	0	2	2		
ECI Odessa	2626 JBS Parkway, Suite 101-A, Odessa, Texas	ECI Odessa	10	0	0	1	1	1	
Basin Midland	1109 N Big Spring Street, Midland, Texas	BAS Midland	5	1	0	1	1	1	
		Grand Totals:	296	41	8	20	27		365
		DIDs needed:	296	0	0	4	27	0	

Receptionist side cars -- QM secretary, HR Secretary, Midland Clinic Receptionist, Odessa Clinic Receptionist -- would also like 1 new one for Odessa Clinic Med Recs (backup for receptionist)