

Num	Section	Paragraph #	Page #	Question	Answer
1	RFP Section IV	B	5	The RFP states, "Ten (10) paper copies of the vendor proposal paperwork. One (1) paper copy must be an original copy, marked "ORIGINAL" on the cover, and contain original signatures." Can the state clarify if this is 1 original and 9 copies or 1 original and 10 copies?	Paper copies are no longer necessary. Ten (10) CDW/DVD's with one labeled "Original" should be submitted.
2	Appendix B	Section 6 Contractor Instructions	49	Related to question above, can the state clarify if hard copies of the entire proposal are in fact required? It is unclear because on RFP page 5 it again states "Each proposal must be submitted with 10 paper copies and 10 electronic copies on CD or DVD media disk. However, on page 54 of Appendix B it states, "Contractors are no longer required to make hard copies. Some documents requiring original signatures must be provided in both hardcopy and PDF formats. These documents include the Transmittal Letter, Certification and Statement of Compliance, Mandatory Submission Requirements Checklist and the Contractor Contact Information form." If hard copies of these forms are all that is required in hard copy form, how many copies of each would the state like included?	Paper copies are no longer necessary. Ten (10) CDW/DVD's with one labeled "Original" should be submitted.
3	Appendix B	4.4.3.7 subparts	15-16	In this section the numbering appears to be off. It goes from 4.4.3.7.1 to 4.4.3.7.2, then back to 4.4.3.7.1 again and 4.4.3.7.2, 4.4.3.7.3 and 4.4.3.7.4. Can the state confirm is this is an error and in fact the second set of 4.4.3.7.1 should actually be 4.4.3.7.3 3rd Party Authentication 4.4.3.7.4 Password Hashing, 4.4.3.7.5 Data Encryption, and 4.4.3.7.6 Securing DHSS Data?	Addendum has been posted to <a href="https://bids.delaware.gov">https://bids.delaware.gov</a>

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4	Appendix B	6.2.6 Staff Qualifications and Experience	54	Can the state confirm that all responses relevant to Appendix B Section 4.1 Staffing should be addressed here and not under Section 6.2.5 Project Requirements?	All requirements listed in Section 4 must be responded to as specified in Section 6.2.5.
5	Appendix B	6.3 Business Proposal	56	In subsection 6.3.3, if a vendor is not a publicly held company but chooses to provide the information referenced in that paragraph, can the state clarify if the "name, address and telephone number of a responsible representative of the Contractor's principal financial or banking organization" described in bullet one is the same as the "bank reference" mentioned under bullet two for the non-publicly held companies?	It can be the same person.
6	RFP Section III	Required Information A.1	3	Where in a vendor's proposal should the proof of State of Delaware Business Licensure be placed?	Proof of licensure is not a requirement for submission of a proposal. Should a vendor decide to include proof of licensure, placement must be listed in the table of contents.
7	RFP Section III	Required Information A.4	3	Can the state clarify if any proof of insurance is required to be submitted with a vendor's proposal? If so, would it go directly following the Disk directory but before the Technical Proposal document?	Proof of insurance is not a requirement for submission of a proposal. Should a vendor decide to include proof of insurance, placement must be listed in the table of contents.
8	RFP Section III	Required Information A.5	3	In this section it states, "Provide documentation of a criminal background check as noted in Appendix B, Exhibit K." However, under Appendix B, Section 8, page 59, Exhibit K is not mentioned as a mandatory part of a vendor's proposal. Can the state clarify if any information related to Criminal Background Checks (Exhibit K) should be included in a vendor's proposal and if so where in a vendor's proposal should the documentation of criminal	For all vendors who bid on this contract, their employees who will be working on this contract will be required to go through the State of Delaware (DHSS) Criminal Background Check process unless the DHSS IRM Director accepts the vendor's own Criminal Background Check process.

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				background check (Exhibit K) be placed?	
9	RFP Section III	Required Information B.6	3	In this section it states, "The requirements listed in this section must be addressed and consolidated into <b>Attachment B</b> Section 6.3.3." As there does not appear to be an Attachment B Section 6.3.3, can the state confirm that a vendor should respond to all six of the stated points in this section within its <b>technical proposal</b> under <b>Appendix B</b> section 6.3.3 or should it respond under Section 6.3.3 of the Business proposal?	Section 6.3.3 is part of Section 6.3 entitled "Business Proposal Contents"
10	RFP Section IV	Professional Services RFP Administrative Information - Subpart C.2 - RFP Evaluation Process, Proposal Selection Criteria	15	The chart at the top of page 15 indicates questions that must be responded to in a vendor's proposal. Can the state clarify where in a vendor's proposal this information should be included? Should it be included under Section H. Policy Memorandum Number 70 where the inclusion plan is also referenced?	Please include this with the response to Section H.
11	Appendix B	Exhibit E, E1 - E5 (Cost)	71-77	Are vendors supposed to use the cost schedule template provided as a link in Exhibit C to create their own E.1 and recreate the forms for E.2-E.5, or can the state provide these forms in editable versions for inclusion in a vendor's proposal?	The vendor may recreate forms for inclusion in the proposal
12	Appendix B	Exhibit H (Contractor Experience Form)	84	Can the state provide an editable copy of this form, or shall a vendor recreate it for inclusion in its proposal?	The vendor may recreate forms for inclusion in the proposal
13	Appendix B	Section 4	10	"Successful implementation of an Early Childhood Intervention Case Management System in two or more	All proposals are accepted.

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				State governments." Would experience with a similar enterprise application qualify for that requirement? An example would be the WIC implementation.	
14				There are requirements for a COTS system and the level of customization. So if the WIC system is accepted as experience toward an Early Intervention Case Management system, would the WIC system be considered a COTS system by the State of Delaware?	A WIC system would be considered a COTs system in this context
15				Is there an incumbent contractor that is maintaining the current system? Who is that contractor?	There is an incumbent contract and information can be found on <a href="https://bids.delaware.gov/bids_detail.asp?i=5723&amp;DOT=N">https://bids.delaware.gov/bids_detail.asp?i=5723&amp;DOT=N</a>
16				What is the estimated start date for the contract.	10/1/2019
17				Is there a proposed implementation timeline that the state would like contractors to meet? Lack of a timeline affects the staffing needed for a project. This ultimately affects the cost.	It is the expectation that a COT's system already containing the rudimentary requirements for an Early Childhood Record system would require little customization.  The below timeline is anticipated: October 1, 2019 = Project Start January 1, 2020 = Negotiations complete April 1, 2020 = Test environment ready June 1, 2020 = Users trained, data transferred from previous database, reports validated. July 1, 2020 – Go Live
18				Is it expected for the state to release a timeline sometime before proposals are due?	The vendor's timeline/project schedule is part of the high level project plan requirement in Section 4.2
19				Is it expected that the contractors submit proposals without the implementation timeline?	The vendor's timeline/project schedule is part of the high level project plan requirement in Section 4.2

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20	Appendix B	4.4.2	13	There is a requirement to furnish a Visio diagram and mentions a data dictionary. It specifies that the data dictionary be submitted in the negotiations of the contract, after the award and before the contract starts. Would it be possible to obtain the data dictionary for the current implementation and / or any screen shots or excel file definitions that exist so that the detailed data dictionary required can be submitted with the proposal?	The Visio diagram/data dictionary requirement is for the system that the vendor is proposing.
21	RFP Section IV	B.11.	8	Is there a limitation on the type of information that can be requested on the FOIA request?	There is no limitation on the type of information that can be requested on a FOIA request.
22	RFP Section IV	B.11.	8	If a FOIA request is submitted, are you required to supply an answer to all vendors, or just to the vendor that makes the request.	The answer to the FOIA request will only go the vendor that makes the request.
23	RFP Section IV	B.11.	8	What is the turn around time for an answer to the request and is there enough time to submit and receive a response before the proposals are due?	FOIA requests are governed by Delaware code. The review of the request must be completed within 15 days of receipt by the State. The answers to the request will be based on that review. If there is a request for a lot of information, the State may submit a request for more time for the review.  Make sure that when submitting the FOIA request that it is stipulated that this is in reference to a current RFP.
24	Appendix B	1.1	1	Can you clarify what "different types of platforms and cross platform applications" means?	We are looking for a browser independent based system. The user should have the capability to access the data system from multiple internet access points with no loss of data integrity or efficiency. (Example: IE 11, Google Chrome, Firefox...)
25	Appendix B	1.1	1	Do you care about what the "back end" of the data system? Do you only care if the user is entering data or extracting	The data entered and extracted should have the same integrity and validity regardless of what browser is used.

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				data from one browser, that experience doesn't change if they decide to use a different browser.	
26	Appendix B	4.4.3	13	You stated that you are looking for a cloud based solution, however this section states the DHSS hosted solutions are an option. Can you clarify?	DHSS Hosting has been an option in the past but for this particular RFP, DHSS hosting is not an option. The solution must be cloud based only.
27	Appendix B	4.11.2.3	27	Is this application going to be a public facing application? This means that the general public will have access to the application.	Yes, certain aspect of the application will be made available for the public.
28	Appendix B	4	10	Do you require them to authenticate to get access and is the system expected to have the authentication management system included with the portal.	Yes, there will be an authentication requirement for access to the system.
29	Appendix B	4.12.13	34	Is the language preference restricted to only the aspects of the application that are public facing?	Yes, the language preference is restricted to only the aspects of the application that are public facing.
30	Appendix B	4.12.13	34	There were two or three languages listed. IS there a defined list of languages that the application would be expected to support? This questions is in reference to translation versus context.	There is not a defined list of languages that the application is expected to support.  However, the application should have the <i>capability</i> to support more than the listed languages.
31	Appendix B	4.11.2.1 4.11.2.3 4.12.8.1 Training Module #9	26 27 32 45 46	Question: For training, how many users are we talking about?  "Contractor will be responsible for training users in all aspects of the new system." If we propose a train-the-trainer training, will that be acceptable?  Question: Will the State open to a train-the-trainer training? This will give the	The estimated range of individuals to be trained is approximately 200. The training method will be set up for a Train the Trainer model. Web based webinars will be essential for "refresher/aides" in periodic training needs. Easy to understand external user instructions will also need to be created. A reference manual will be expected for hard copy reference. The vendor is expected to provide continuous training on updates and modifications done to the application after the move to production.

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				State staff opportunity to be familiar with the system so you can provide support on questions related to State policy & procedure.  Question: "Parent" Is there a need for training the parents/guardians?	
32	Appendix B	4.11.2.1 4.11.2.3	26, 27	Are the vending agencies expected to have access to the application?	Yes, vending agencies will be given limited access to the application.
33	Appendix B	4.11.2.1 4.11.2.3	26, 27	Would the vending agencies be treated as the general public or would they part of the controlled user database.	They would be part of the controlled user database.
34				How many users would be using the database online, concurrently?	Approximately 150 users at any given time but no more than 3 individuals in a single client's chart at the same time, in different perspectives (view, update, add etc).
35				Is there a measure of how many general public accounts the system currently has?	Currently there are no general public accounts.
36	Appendix B	4.11.2.3	27	Would the public facing portion of the application be new?	Yes, the public facing portion of the application would be new.
37	Appendix B	4.11.2.1	26	Are you looking to provide trainings to family to use or how to access it?	Family friendly with easy to understand instructions will be part of the public facing portion of the application. Once a family is part of the program, instructions / training will be provided to families through their family service coordinator. The vendor is expected to provide the family service coordinator with training to aide the family through the application's processes.
38	Appendix B	4.13	41	Would there be additional information provided for the financial report expectations, and when could we expect that information?	This will be discussed as part of the contract negotiation process.
39	Appendix B	1.1 4 4.13	2 10 41, 43	As long as the Ad Hoc can be provided by a COTS product, you don't care what it is as long as it is available?	The Ad Hoc reporting means that every field in the data system can have data extracted via this report feature. (Query)
40	Appendix B	4.13	41	Is the system expected to interface with clearing houses like eCommerce, where real time payment options are available.	Birth to Three is a federally mandated program. We do not bill families directly. We need access to insurance information to use as a reference if our contracted agencies do not receive payment for services given to the

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					Birth to Three Part C eligible population. IDEA says that we are the payer of last resort, therefore we need to interface to ensure that this is occurring. We are also expected to interface with Medicaid so that reimbursement requests can be made for eligible clients.
41	Appendix B	4.13	41	Can you clarify what commercial clearing houses are.	The clearing houses we mention in the RFP are in relation to Private insurance clearing houses.
42	Appendix B	4.13	40, 41	Please clarify if is the state going against Medicaid or is it the service providers for payment.	There is a three step process regarding Medicaid. <ol style="list-style-type: none"> <li>1. Initial evaluations can be requested for reimbursement from Medicaid to the Division Public Health who provide eligibility determination services four our clients.</li> <li>2. When children become eligible for our program and the insurance will not pay and the parents cannot pay, Part C is responsible for paying for a portion of the early intervention service.</li> <li>3. Our providers use their own billing system to submit claims.</li> </ol>
43	Appendix B	4.13	40, 41	If a child is dually covered under insurance, would the State agency bill Medicaid?	The State does not bill for services. The provider agencies would be responsible for submitting claims to the private insurance first, then through Medicaid, and ultimately Part C.
44	Appendix B	4.13	40, 41	When the agencies receive reimbursement from Part C for services, that insurance did not cover, is this via paper check or electronic.	Reimbursement is done electronically.
45	Appendix B	4.13	45	How many interfaces are currently in place?	There are two (2) interfaces currently in place.
46	Appendix B	4.12.9	32	In the functional requirements, there are standard requirements and a mention of enhancements. Should the enhancements be included in the cost proposal? Is it okay to submit a separate proposal for the enhancement?	The enhancements would be within the 15% customization. The requirement was more for the capability to make enhancements.  Only one proposal submission per vendor is allowed.
47	Appendix B	4.7	22	In regards to the 15% customization, and a equation regarding development hours toward custom work, in a COTS	The State prefers a solution that is configurable via tables versus customizable via code.

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				system you have pretty much everything that needs to be there so anything extra would be considered custom. Would the 15% customization be based off of the change orders that would have to be made for customization? There is some difficulty calculating the 15%	
48				Is the ground of development effort okay for this proposal? When you have software that has been developed that can be customized or configured to meet your requirements, but it will be a new development effort, will that kind of proposal be considered?	All proposals will be considered.
49	Appendix B	4.13	45	In areas of integration where you are requiring bi-directional interfaces, are you able to share what the systems are using from a technology perspective so that vendors can figure out how to tie into them?	The requirement of the bi-directional interface was based the capability to do so, rather than actual application.
50	Appendix B	4.13	45	What type of information is expected to be shared within the interfaces? Demographic? More specific?	The requirement of bi-directional interface is based on the capability to do so, rather than actual application.
51	Appendix B	4.13	45	When the interfaces need to be developed, will it be expected that both the source of data and the recipient of data both be included in the development effort?	Yes, it is expected that the source of data and the recipient of data collaborate to develop the interface.
52	Appendix B	4.13	45	Will the interfaces have different requirements?	Yes, each interface would need to be specific to the data that is transferred.
53	Appendix B	4.13	44	Will interface types outside of HL7 be acceptable?	No, per page 44 of Appendix B, this is a mandatory requirement.
54	Appendix B	4.13	44, 45	Does the "ability" to create interfaces mean that they may not happen in phase 1 of the project?	Yes, the wording means to create interfaces is in the event of current and future needs within the data system.

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55	Appendix B	4.11.26 4.4.2	28 10	<p>Question: What type of personnel are expected to be onsite during the 2 month warranty time frame?</p> <p>“The contractor project manager and other key staff like the Business Analyst(s) will be required to be on site in New Castle, Delaware, during the entire project phase.”</p> <p>Question: If we are proposing a COTS/SaaS system with less than 5% modifications, there will be very less need for the project manager/key staff to be on site. In general we conduct kick-off meeting and initial requirement gathering for 2 weeks onsite and then all other meetings will be conducted online. We use the online meetings to demonstrate our early intervention data system and discuss with CDW/Part C on how to configure the system. We are open to be onsite on the as-needed basis. Could you reconsider the mandatory onsite requirement?</p> <p>Question: We understand that the requirement is that a project manager will be on site 80% of the time during the design and development phase and the project director as needed. Is this the correct and entire requirement for the on-site staffing?</p> <p>Question: The onsite staffing requirements appears to differ in 4.1 and 4.1.1. The onsite requirement in 4.1 is for “The contractor project</p>	<p>The project manager will be expected onsite at an 80% level.</p> <p>No, the State will not reconsider the mandatory onsite requirement.</p>

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				manager and other key staff like the Business Analyst(s) will be required to be on site in New Castle, Delaware, during the entire project phase.” However below in 4.1.1 On-Site Staffing Requirement states that only the Contractor Project Director and Contractor Project Manager are required on site. Please clarify.	
56				Can the helpdesk be remote (not on site), even through the warranty period?	The Help Desk can transition during the warranty phase.
57	Appendix B	4	10	How many years of data are you looking at trying to move to the new data system.	There are approximately 8 years of data that will be moved.
58	Appendix B	4	10	Will there be a subject matter expert to communicate with to define what needs to be transferred?	Subject matter experts will be named and scheduled in the baseline project plan.
59	Appendix B	4	10	Is the approximate storage space that the current system uses available?	The approximate storage space for the current system is not available.
60	Appendix B	4	10	Will documents also be included in the move to the new system?	Yes documents will be expected to move with the client chart to the new data system.
61	Appendix B	4	10	Is there a measurement of the amount of documents versus actual data in the system?	No, there is no ability at this time to determine which data is document and which is actual client data.
62	Appendix B	4.2 & 4.11.2	12 & 24	Can you clarify the “rapid development” and the phases of the project? It seems that we are referencing an “agile system” compared to a “waterfall system”. Which one do you prefer to go with?	The State prefers to rapidly develop and implement. The vendor is free to suggest one or a mix of methodologies to comply with this preference.
63	Appendix B	4.4.3	13	Requesting clarification on the DHSS hosting requirements. This section offers the opportunity to propose a DHSS hosted solution. Can this be proposed by the contractor?	A non-DHSS hosted solution is required.

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64				<p>How are you going to handle credentialing with Providers? Is the State going to be responsible or will it be the responsibility of the Providers?</p> <p>Is there a possibility that Provider will be doing the credentialing for the data system?</p>	<p>Credentialing occurs within a Provider's contract with us, outside of our database function.</p> <p>The Provider will not be doing the credentialing for the data system.</p>
65				<p>There are three types of users; state users, public users and non-state providers? Will there be three different authentication mechanisms for the three different types of users? Can the State users and Providers be moved into a single authentication category? How do you anticipate that working?</p>	<p>In their proposal, the vendor is expected to address their preferred authentication approach(es) for this situation.</p>
66				<p>What is the budget?</p> <p>Question: What is the budget for the system implementation portion of the project?</p>	<p>This will be discussed as part of the contraction negotiations process.</p>
67				<p>When are you looking to go live with the project?</p>	<p>Go live is anticipated for July 1, 2020</p>
68				<p>Is this data system become your system of record replacing the need for the paper chart?</p>	<p>Yes, we anticipate this to be the system of records.</p>
69				<p>In regards to the initial budget of \$500,000 is that for the first 2 years of the contract and does that include maintenance as well as implementation?</p>	<p>This will be discussed as part of the contraction negotiations process.</p>
70	RFP Section 1			<p>Could you send us the pre-bid conference attendee list?</p>	<p>This can be found <a href="http://bids.delaware.gov/bids_detail.asp?i=5723&amp;DOT=N">http://bids.delaware.gov/bids_detail.asp?i=5723&amp;DOT=N</a></p>
71	RFP Section 1			<p>Do you have a dedicated service coordination model where a service coordinator serves a child from</p>	<p>Yes we have a dedicated service coordination model.</p>

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				intake/referral to the IFSP and transition?	
72	RFP Section 1			Do you have a pay-and-chase model for Medicaid billing where all the providers bill the State after they bill the private insurance, then the State will pay the providers and bill Medicaid after that? Or do your providers bill Medicaid themselves?	Providers submit bills to both private insurance and Medicaid. Part C will pay providers who receive a denial with and EOB.
73	RFP Sec 1	IV.B.2	6	Bidders are directed to clearly print "BID ENCLOSED" and "CONTRACT NO. HSS-19-0142" on the outside of the bid submission package  The Contract number listed is different from the contract number listed in the rest of the document which is HSS-19-042. Could you confirm the correct number to use?	The contract number is HSS-19-042
74	RFP Sec 1	IV.B.24	12	"Business References" - Do you require that at least 2 of the 3 references are from the State governments where the vendor has successfully implemented the Early Intervention Case Management Systems into production environment?	Business references should be from any current or previous customers of a similar scope and value to the current RFP.
75	RFP Sec 1	IV.C.2	14	"Criteria Weight".	
				How can we achieve the full score for the item of "Interoperability for integration with external data systems"? Please give some examples if possible?	Vendors will describe how they intend address the requirement.
				How can we achieve the full score for the item of "Training plan"? Please give some examples if possible?	Vendors will describe how they intend address the requirement.
				How can we achieve the full score for the item of "Project timeline"? Please give some examples if possible?	Vendors will describe how they intend address the requirement.

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				How can we achieve the full score for the item of “ACA Safe Harbor Additional Fee”? Please give some examples if possible?	Vendors will describe how they intend address the requirement.
76	Appendix B	4.4.10	21	<p>“For proposed COTS (Commercial off the Shelf) solutions, DHSS prefers those that are web browser based and that:</p> <p>Use Microsoft Windows Server as their operating system</p> <p>Use Microsoft Internet Information Server (IIS) as their web and application server software</p> <p>Use Microsoft SQL Server for the data store</p> <p>Have been developed using Microsoft C#.NET”</p> <p>If a vendor proposes a COTS/SaaS solution, we are wondering why the State still have the preference on Microsoft Windows Server, IIS, SQL Server and Microsoft C#. If our solution uses Microsoft Windows Server, IIS, Oracle and Microsoft VB.Net, will it be acceptable?</p>	<p>Vendors who go outside of the established requirements can pursue alternate solutions with the following result:</p> <ol style="list-style-type: none"> <li>1. The vendor retains full responsibility for the solution with no DHSS intervention.</li> <li>2. If DHSS has responsibility for the alternate infrastructure, using that solution will result in a reduced score on the RFP.</li> </ol>
77	Appendix B	4.0	10	<p>It states that:</p> <p>“Contractors must have demonstrated experience and depth in the following areas:</p> <ul style="list-style-type: none"> <li>• Successful implementation of an Early Childhood Intervention Case Management Systems in two or more State governments.</li> </ul>	Section 4.0 has mandatory requirements and section 6.2.5 provides the vendor with instructions on describing their understanding and approach to meet the section 4.0 project requirements.

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				<ul style="list-style-type: none"> <li>• Product solution cannot exceed 15% customization of the proposed solution”</li> </ul> <p>Some States choose to have some mandatory requirements before the technical proposal evaluation. If a vendor does not meeting these mandatory requirements, the vendor will be disqualified and no further evaluation will be performed. Does the State disqualify a vendor if a vendor has not successfully implemented early intervention data systems in two or more State governments or if their solution exceeds 15% of customization of the proposed solution before even applying the evaluation criteria?</p>	
				<p>If the above answer is no (there is no mandatory requirement), the scores (weights) assigned to the following items seem be very high:</p> <p>Interoperability for integration with external data systems</p> <p>Training plan</p> <p>Project timeline</p> <p>The points assigned to each of the above items are the same as that for “Familiarity and experience creating and running similar projects”.</p> <p>Any vendor without much Early Intervention Data System experience</p>	<p>No, the State will not consider lowering the score.</p>

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				<p>can potentially score high points on these items. Will the State be willing to consider lowering the score for these items?</p>	
				<p>Availability for in person meetings vs remote meetings” – We normally have face-to-face meetings for the kick-off and initial requirement gathering for 2 to 3 weeks, then other meetings will be conducted online by sharing the screens remotely. Also major trainings can be conducted face-to-face. We are always available for face-to-face meetings if needed, but all of our clients find out that remote meetings are more efficient.</p> <p>With a SaaS/COTS solution, intensive multiple months of in-person meetings are not needed and can actually hinder the implementation since the hosting environment is not at the State’s office. Will the State reconsider/remove the weight for the face-to-face meeting?</p>	<p>No, the State will not consider lowering the score.</p>
78	RFP Sec 1	IV.C.2	14	<p>“Diversity” - If we are a small and minority company, do we have to answer the 3 diversity related questions? If yes, how should answer these questions?</p>	<p>Answers to the 3 diversity questions are mandatory. Refer to instructions attached to criteria.</p>
79	RFP Sec 1	V.8.C	19	<p>“ACA Safe Harbor” - How can a vendor achieve the full 5 points for ACA Safe Harbor requirement?</p>	<p>Vendors will describe how they intend address the requirement.</p>
80	RFP Sec 1	V.8.Z	27	<p>Work Product – “All materials and products developed under the executed contract by the vendor are the sole and exclusive property of the State. The vendor will seek written</p>	<p>All materials and products developed under the executed contract by the vender are the sole and exclusive property of the State.</p>

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				<p>permission to use any product created under the contract.”</p> <p>Our software is provided as COTS and SaaS (Software as a service). In that case, the State has the ownership of data, but the vendor should have the ownership of the products including but not limited to schemas, source code, documents and design. Is that right?</p>	
81	Appendix B	1.1	1	<p>Regarding your current system,</p> <p>Can all your service coordinators and their supervisors, and providers access the same centralized data system via web browsers?</p> <p>Can all the state users access the system to view detailed child’s record across the state?</p> <p>Can the state users directly generate reports related to OSEP indicator 1, 2, 3, 4, 5, 6, 7 and 8 from the system?</p> <p>Can users enter child data on intake/referral, parent, screening, evaluation/assessment, eligibility, IFSP, transition/exit and progress report?</p> <p>Can the system generate electronic IFSP with data populated automatically? Can the data-populated IFSP be accessed directly by the service coordinator and providers?</p>	<p>Yes.</p> <p>Yes.</p> <p>The state users cannot directly generate reports related to Indicators 1,2,3,4,5,6,7 and 8.</p> <p>Yes.</p> <p>Yes, the system can generate electronic IFSP with auto populated data. Yes the IFSP can be accessed directly.</p>

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				<p>Does the system allow service coordinators to enter planned-services including service name, provider, start date, end date, frequency, intensity, method, location (setting), parent accept service, permit insurance, payor source and any justification for services that cannot be provided in a natural environment?</p> <p>Can providers enter their service note with service start time, end time, setting (location), directly into the system?</p> <p>Can providers bill via the system based on the service note?</p> <p>Can the system automatically generate invoices for the providers?</p> <p>Can the system automatically generate 837P claim file to bill Medicaid?</p> <p>Can the system import back the 835 remittance file from Medicaid?</p> <p>Can the system bill private insurance via a clearinghouse?</p>	<p>Yes , the system allows service coordinators enter Service information directly through dropdown selections.</p> <p>Direct entry fields are start and end dates, and justification of natural environments.</p> <p>Payor information auto populates</p> <p>No, Providers are not able access the data system.</p> <p>No, Providers cannot bill via the system.</p> <p>No, the system does not generate invoices for providers.</p> <p>The system does not generate claim fields to Medicaid.</p> <p>The system does not import the 835 remittance file from Medicaid.</p> <p>The system does not bill private insurance.</p>
82	Appendix B	4.0	10	<p>“Contractors must have demonstrated experience and depth in the following areas: Successful implementation of an Early Childhood Intervention Case Management Systems in two or more State governments.</p>	<p>Bidders will describe how they apply project controls toward the successful implementation of their COTS solution with time and budget constraints.</p>

Num	Section	Paragraph #	Page #	Question	Answer
				<p>Product solution cannot exceed 15% customization of the proposed solution”</p> <p>Question: Looks like a vendor will not be qualified if they have not successfully implemented early intervention data systems in two or more State governments or if their solution exceeds 15% of customization of the proposed solution. But we do not see these requirements listed as mandatory disqualification requirements in the RFP and Appendix. Will a vendor be disqualified if these requirements are not met?</p> <p>Question: The RFP asks for a solution with 15% or less customization, and identifies the percentage of customization as the number of hours of change orders divided by the total development hours. Since change orders are usually considered after the project starts, the degree of customization would be impossible to know ahead of time. How should a bidder reflect the degree of customization?</p>	
83	Appendix B	4.0	10	<p>“Maintenance &amp; Support costs must include a fixed number of product enhancements (change requests) or the addition of configuration items.”</p> <p>Could you please give more detail on this and explain how this might work?</p>	This will be discussed as part of the contraction negotiations process.
84	Appendix B	4.4.2	13	“Technical documentation includes a final architecture diagram for each	The requirement for a non-proprietary data dictionary stands.

Num	Section	Paragraph #	Page #	Question	Answer
				<p>system environment (Prod, UAT, etc.), non-proprietary data dictionary and a high level process flow diagram.”</p> <p>If a vendor provides the data system as a COTS/SaaS, will you reconsider this requirement since the data dictionary is proprietary?</p>	
85	Appendix B	4.5.A.4	22	<p>“Annual Grant Application”, “Compliance Report”, “Data Integrity Report” and “IFSP”.</p> <p>Could you please provide a template/sample(s) for these reports/forms or describe them in detail?</p>	This will be discussed as part of the contraction negotiations process.
86	Appendix B	4.7	22	<p>“DHSS will waive IP rights of customization features applied as part of this project if they are made part of the standard product, which in fact is DHSS’ preference.”</p> <p>Does this mean that all the IP rights will belong to the vendor if vendor provides a COTS/SaaS solution with less than 15% customization?</p>	Bidders will describe how they apply project controls toward the successful implementation of their COTS solution with time and budget constraints.
87	Appendix B	4.7	23	<p>“Degree of Customization = (Total Customization Hours / Total Development Hours) * 100 where Total Customization Hours = Total hours for all approved change requests (CR1 hours + CR2 hours + ...) and Total Development Hours = Total coding hours bid for this project” For COTS/SaaS solution, majority of development work (hours) has already been done and it is mainly left with the customization/configuration. If we put</p>	Bidders will describe how they apply project controls toward the successful implementation of their COTS solution with time and budget constraints.

Num	Section	Paragraph #	Page #	Question	Answer
				<p>development hours close to zero or a very small number, this formula will not work unless you want us put the hours we already worked on developing the COTS/SaaS software as development hours. Please shed light on how to use the formula.</p> <p>To calculate the % of customization, some states use a formula like: (# of features that need to be customized + # of features that need to be developed) divided by (total # of features). If you choose to do so, 2 additional columns (Need to Develop and Need to Customize) can be added to the 4.13 Functional Requirements by the Division/Program.</p>	
88	Appendix B	4.11.2.2	26	<p>“Phase 2, Business Requirements Document (BRD) ... This document will also include a logical data model and process flow diagrams. This document may also include high level screen designs.”</p> <p>We have a SaaS/COTS solution with more than 95% of features requested by the State. The logical data model is proprietary. We hope to propose a configuration issue list as a deliverable to replace the RTM, BRD and DSD deliverables. Will the State reconsider the mandatory requirement for RTM, BRD and DSD?</p>	No, the State will not reconsider the mandatory requirement.
89	Appendix B	4.11.2.2	26	<p>“Phase 2, Deliverable: Design Specifications Document (DSD): This is a mandatory deliverable. This document is based on the approved</p>	No, the State will not reconsider the mandatory requirement.

Num	Section	Paragraph #	Page #	Question	Answer
				<p>FRD and specifies a detailed system design which may include screen designs, system flow diagrams, database design, physical data model, ERD (as applicable), code table values, database scripts, rules engine scripts (as applicable), coding design templates (as applicable), hardware and software specification lists including procurement and out- year costs, architecture diagram(s) and other system specifications as agreed upon.”</p> <p>We have a SaaS/COTS solution with more than 95% of features requested by the State, the screen designs, system flow diagrams, database design, physical data model, ERD (as applicable), database scripts, rules engine scripts (as applicable), and coding design templates are proprietary. Also hardware and software specification lists including procurement and out- year costs, architecture diagram(s) and other system specifications are not needed since we will host the system. We hope to propose a configuration issue list as a deliverable to replace the RTM, BRD and DSD deliverables. Will the State reconsider this mandatory requirement?</p>	
90	Appendix B	4.12.8.2	32	<p>“Technical - knowledge transfer for technical staff”</p> <p>We have a SaaS/COTS solution with more than 95% of features requested by the State. There is no need for</p>	<p>The vendor is expected to inform the State of how much technical knowledge will be required of State staff to resolve day to day issues as they occur and that the vendor will conduct knowledge as appropriate.</p>

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				knowledge transfer. Will the State reconsider this requirement?	
91	Appendix B	4.12.12	34	<p>“For solutions being developed with federal funds, there is a federal requirement that DHSS provide a complete copy of the end product(s) to other States upon request.”</p> <p>We have a SaaS/COTS product, which is proprietary. Could you please explain what the implications this might have?</p>	The statement of “...provide a complete copy of the end product(s) to other States upon request”, is in reference to the final report product. Proprietary SaaS/COTS product is not included in the report.
92	Appendix B	4.13.E.1.b	35	<p>“Screen containing closure information to be created.”</p> <p>Do you mean the child exit information, such as exit reason / exit date if IFSP’s goal has been met?</p>	Yes, this is child exit information.
93	Appendix B	4.13.F.3.a	35	<p>“System auto-generated referral with supporting documentation”</p> <p>Please explain the requirement.</p>	Service coordinators are obligated to send referrals on behalf of the family. As the service coordinator selects the need of a referral, the system would generate information onto a predetermined form based on previously selected data. There would be an option to send the referral with accompany documentation to a specific provider.
94	Appendix B	Referral Module #6	37	<p>“Ability to cross reference initial referral information for future outgoing referrals”</p> <p>Please explain the requirement.</p>	Referrals generated from the system would contain current demographic information that can be found within the client’s chart
95	Appendix B	IFSP Module #2	38	<p>“Ability to collect details of a plan (e.g. close date, close reason, plan delay reason etc.)”</p> <p>Do you mean close date and close reason for the child (or chart), not for the IFSP?</p>	Collection of plan data is the same IFSP data. The data should be able to delineate general IFSP information and specific EI service data.
96	Appendix B	IFSP Module #13	39	“Ability to track early childhood transition delays per point”	Each point would indicate a specific delay reason.

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				What's the meaning of "per point" here? Do you mean per North or South designation point?	
97	Appendix B	Contract and Billing Module #9	40	"Ability to collect details of contract services rates" Do you have a standard service rate across the State that will apply to all the service providers?	The system should have the capability to collect details.
98	Appendix B	Contract and Billing Module #16	40	"Ability to identify the amount of co-pay applied using state defined rules"  What are the state-defined rules regarding co-pay? Do families have to pay for the co-pay?	The system should have the capability to identify the amount of co-pay applied..
99	Appendix B	Contract and Billing Module #17	40	"Ability to identify the amount of services co-pay applied using state defined rules"  What are the state-defined rules regarding service co-pay? Do families have to pay for the service co-pay?	The system should have the capability to identify the amount of services co-pay applied..
100	Appendix B	Contract and Billing Module #18	40	"Ability to flag or alert on accounts with Health Savings Account / Health Reimbursement Account."  How is the Health Savings Account /Health Reimbursement Account related to service billing/payment in the State? Is it related to family sliding fee? Please provide some examples.	The system should have the capability to flag or alert HSA/HRA accounts.
101	Appendix B	Contract and Billing Module #19	40	"Provide the ability to set provider rates based on authorized level of services."  Please explain how the provider rates can be based on authorized level of services.	The system should have the capability of setting rates.

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102	Appendix B	Contract and Billing Module #26	41	<p>“Ability to configure payer specific business rules (authorization requirements, service durations, credentials, status, etc.)”</p> <p>Could you please explain this requirement?</p>	The system should have the capability to configure payer specific business rules.
103	Appendix B	Contract and Billing Module #28	41	<p>“Configure data submission rules by Managed Care Organizations and allow criteria to be stored by MCO number”</p> <p>Please give more details on this requirement.</p>	The system should have the capability to configure submission rules.
104	Appendix B	Contract and Billing Module #35	41	<p>“Configurable HIPAA billing templates”</p> <p>Are you talking about something like CMS1500 template here?</p>	The system should have the capability to configure HIPAA billing templates.”
105	Appendix B	Contract and Billing Module #38	41	<p>“Ability to support sliding fee scales”</p> <p>Do the sliding fee scales mean the family fee based on poverty level?</p>	The system should have the capability to support sliding fee scales.
106	Appendix B	Contract and Billing Module #39	41	<p>“Third party billing”</p> <p>Could you please explain the third-party billing?</p>	The system should have the capability to support third party billing.
107	Appendix B	Reporting Module #2	43	<p>“Part B state performance plan indicators 6, 7, 11, 12.”</p> <p>What’s your plan for reports from Part C to accomplish these Part B plan indicators?</p>	End reports from #1 should complement the end report requirements for Part B state performance plan indicators.
108	Appendix B	Reporting Module #9	43	<p>“Ability to create the annual monitoring report”</p> <p>Could you specify what annual monitoring report you are referring to?</p>	This will be discussed as part of the contraction negotiations process.
109	Appendix B	Appointment and Scheduling Module #12	44	<p>“Ability of automated reminder system (i.e. Text, email, phone, etc.)”</p>	The reminder system is intended for State users only, to track the progress of each client. The reminders will not be going outside of the data system.

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				Due to security requirement from HIPAA and FERPA, the alerts/message inside the data system is recommended. The text message, email, etc. that go outside of the data system cannot contain confidential information or PII (personal identifiable information) as far as we know. The State might want to consider this for the reminder function. Will the State reconsider this requirement?	
110	Appendix B	Interface Module #1-8	44-45	Does your current system interface with DPH/WIC, EMR, Medicaid (bidirectional), DSYCF (bidirectional), DOE (bidirectional), Newborn Screening (bidirectional), and clearing house?	The current system has no bidirectional capabilities.
111	Appendix B	Interface Module 9	44-45	<p>“Clearinghouses for billing purposes”</p> <p>What kinds of clearinghouses do the State uses now for the billing purpose? What are your expectations from the new data system?</p>	This will be discussed as part of the contraction negotiations process.
112	Appendix B	6.3.2	55	<p>“Software and Hardware Information (Section B)”</p> <p>If we propose a SaaS/COTS solution, the software and hardware information will not be needed. Is that right?</p>	Section 6.3.2 specifies required information regarding Software and Hardware. Vendors should address these as required.
113	Appendix B	General Terms and Conditions (3)	61	<p>“Ownership Rights”</p> <p>If we propose a SaaS/COTS solution, all the ownership except the data will belong the vendor. Is that right?</p> <p>“Ownership Rights”</p> <p>If we propose a SaaS/COTS solution, the State only has the license to use the system, but will not have an irrevocable license to reproduce, publish, or otherwise use the copyright of any</p>	Vendor may suggest appropriate verbiage for the contract to address this issue.

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				deliverables under the resulting contract. Is that right?	
114	Appendix B	Section 8 Exhibits, Exhibit J	59	<p>States Exhibit J is to be submitted at the mandatory Prebid meeting. Do not include as part of your proposal submission. Section 6, 6.2.2 Pg. 51 (Appendix B) states this section of the proposal must include the following completed forms, and it includes Exhibit J.</p> <p>Do want a copy of Exhibit J to be included in the Section B of the proposal?</p>	Yes, include a copy of Exhibit J in the proposal.
115	Appendix B	4.13 Contract and Billing Module	40	<p>“Ability to collect details of contract service rates”</p> <p>Question: Will the state please describe the role of contracts in the state’s provider structure?</p> <p>Question: Do different providers have different contracted rates?</p> <p>Question: How often are contracts updated with new rates?</p> <p>Question: Do any providers not use a contract rate structure?</p>	<p>This will be discussed as part of the contraction negotiations process.</p> <p>Yes.</p> <p>This will be discussed as part of the contraction negotiations process.</p> <p>This will be discussed as part of the contraction negotiations process.</p>
116	Appendix B	4.13 Contract and Billing Module	40	<p>“Ability to keep track of cost absorbed if Medicaid...”</p> <p>Question: We understand that providers are required to pursue payment from other payment sources (e.g., insurance or Medicaid) prior to the state serving as a payor of last resort. How do providers currently</p>	Providers submit, individual, denial letters or EOB’s to Part C claims.

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				document the results of those other payments to the state?	
117	Appendix B	4.13 Contract and Billing Module	40	<p>“Standard Financial Reports”</p> <p>Question: Will the state please elaborate on your vision for the “standard financial reports” system requirement?</p> <p>Question: What financial reports does the state expect to receive.</p>	This will be discussed as part of the contraction negotiations process.
118	Appendix B	4.13 Contract and Billing Module	40	<p>“General Ledger Integration”</p> <p>Question: Will the state please elaborate on your vision for the “general ledger integration” system requirement? What type of approach that has been used in the past in Delaware?</p>	This will be discussed as part of the contraction negotiations process.
119	Appendix B	Legacy Data Conversion	31-32	<p>“Legacy Data conversion is a requirement under this contract.”</p> <p>Question: How many years of data will need to be converted</p> <p>Question: How many data sources will be involved with the conversion</p>	<p>There are approximately 8 years of data that will need to be converted.</p> <p>There will be 1 data source involved with the conversion (current data system).</p>
120	Appendix B	4.3		<p>“In terms of degree of customization of COTS software or transfer of an existing custom solution, DHSS’ interest is in cost containment by restricting the customization features applied to a proposed COTS or transfer solution.”</p> <p>Question: In order to provide a cost-effective solution that meets DHHS cost containment goals and provide the best</p>	Bidders will describe how they apply project controls toward the successful implementation of their COTS solution with time and budget constraints

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				value, can DHHS classify each functional requirement as either “mandatory” or “optional”?	
121	RFP	IV.C.5	14-15	<p>After initial scoring and a determination that vendor(s) are qualified to perform the required services, selected vendors may be invited to make oral presentations to the Evaluation Team. All vendor(s) selected will be given an opportunity to present to the Evaluation Team. The selected vendors will have their presentations scored or ranked based on their ability to successfully meet the needs of the contract requirements, successfully demonstrate their product and/or service, and respond to questions about the solution Capabilities</p> <p>How many vendors will be asked to make an oral presentation? Will it be a set number (e.g. five) or based on the number of responses (e.g top 10% of scores)?</p> <p>When are the anticipated dates of the oral presentations?</p>	<p>Vendors will be asked to make oral presentations based on the number of responses within the top 10% of scores.</p> <p>The request for oral presentation will be made after the proposal deadline and before the award date.</p>
122	Appendix B	4.1	10	<p>Text of passage being questioned: Contractor will propose and supply resumes for the following key positions including:</p> <ul style="list-style-type: none"> <li>• Project Director</li> <li>• Project Manager</li> <li>• Business Analysts</li> <li>• Senior Developers</li> <li>• Technical Analysts (i.e. DBA, SE, etc.)</li> <li>• Documentation Specialists</li> </ul>	<p>The Documentation Specialist is expected to act as the vendor’s responsible point person who stores, catalogs and retrieves files in relation to the contract and data system. They will maintain the integrity of working documents and will update documents when revised. They will be responsible for document security, assigning access and removing access to those who no longer require it.</p> <p>Skillset – Detail and process oriented. Excellent oral and written communication skills to interact with all levels of</p>

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				<p>What is the definition of a Documentation Specialist? What specific skills are required, and what specific role will this individual act in for the project?</p>	<p>the organization. Excellent listening skills with the ability to handles multiple requests while capturing detailed activity.</p>
123	Appendix B	4.13	35-46	<p>Text of passage being questioned: Data system should include, at a minimum:            Central Data Module (table)            Referral Module (table)            Documentation Module (table)            Screening/Evaluation/Assessment (SEA) and Eligibility Module (table)            Plan of Care / Individualized Family Service Plan (IFSP) Module (table)            Contract and Billing Module (table)            Administrative Module (table)            System Functionality Module (table)            Reporting Module (table)            Appointment and Scheduling Module (table)            Interface Module (table)            Training and Documentation Module (table)</p> <p>Is it expected that vendors respond to each individual item listed in the tables? For example, for Central Data Module, Item 1, is it expected that the vendor would restate the requirement and then discuss how the system will address it? Or are the items listed in the tables an FYI as to the expectations of the state for system functionality and requirements?</p>	<p>The modules are the States expectations for the systems functionality and requirements. This is an attempt to inform the vendor of those expectations.</p>
124	Appendix B	6.2.7	54	<p>“Contractor shall describe their corporate experience within the last</p>	<p>All proposals will be considered.</p>

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				<p>five (5) years directly related to the proposed contract.”</p> <p>We have a powerful health and human services enterprise case management system however we have not <u>directly</u> provided statewide early childhood data management system.</p> <p>Would the state be open to our participation, or does your stipulation as listed above preclude our participation?</p>	
125	Appendix B	Contractor Responsibilities/ Project Requirements Paragraph 3, Bullet 1		<p>Contractors must have demonstrated experience and depth in the following areas:</p> <p><i>Successful implementation of an Early Childhood Intervention Case Management Systems in two or more State governments.</i></p> <p>Again, we have a powerful health and human services enterprise case management system however we have not <u>directly provided statewide early childhood data management system.</u></p> <p>Would the state be open to our participation, or does your stipulation as listed above preclude our participation?</p>	All proposals will be considered.