

HEALTH SERVICES COST REVIEW COMMISSION
FINANCIAL INFORMATION SYSTEM AND TECHNICAL DOCUMENTATION
HSCRC-15-018

QUESTIONS AND ANSWERS

1. Is there a page limit on the response?

Answer: There is no page limit.

2. The proposal instructions in Section 4.4.1(A) (2) state that the proposed solution must be organized to exactly match the requirements outlined in Section 3. Do we need to address ALL of Section 3.0, specifically, or only Section 3.6, Requirements?

Answer: All requirements in Section 3 should be addressed in your proposal.

3. Eligibility is for any certified small business vendors or only those by the State of Maryland?

Answer: All small businesses under the CATS+ approval list are eligible to submit a proposal.

4. Can you provide a list of technical skill sets required by the key personnel?

**Answer: You can find the technical skill set at Section 2.10 of the CATS+ 2016 RFP (incorporated into your Master Contract):
<http://doit.maryland.gov/contracts/Documents/CATSPPlus2016/060B2490023-2016CATSPPlus2016RFP.pdf>**

5. Should the key personnel be one of the three categories provided in the RFP or can it be another role such as a Project Manager or a Program Manager in the CATS+ labor category?

Answer: The Key Personnel proposed must meet the qualifications of one of the three listed CATS+ Labor Categories as indicated in Attachment 1, Price Sheet.

6. Section 2.1 states that “Master Contractors may only propose up to one (1) Key Personnel in response to this TORFP. All other planned positions shall be described generally in the Staffing Plan, and may not be used as evidence of fulfilling company or personnel minimum qualifications.” So, should we submit ONLY one attachment 5A and 5B?

Answer: **Attachments 5A and 5B must be submitted for each Key Personnel proposed.**

7. Can we proposed additional CATS+ labor categories, for example “Documentation Specialist” as part of our staffing plan?

Answer: **Yes, additional categories may be proposed in the staffing plan as part of the fixed price proposal.**

8. Section 4.3 states that “The following signed attachments shall be included with the TO Technical Proposal in PDF format (for email delivery). For paper submission, submit two (2) copies of each with original signatures.” Does this mean RFP responses can be submitted via email as well?

Answer: **Please refer the instructions in Sections 4.2.1.1 and 4.2.1.2.**

9. The TORFP says 10% overall, what does it means, can you clarify?

Answer: **This means that 10% of the total cost of the contract would need to be paid to a certified MBE subcontractor or, you would have to complete a waiver request to waive that requirement. (Example: Total contract value \$1,000 = \$100 to be paid to an MBE firm.)**

10. What are the expectations from the vendor when the TORFP says there is an MBE goal?

Answer: **See answer to No. 9 above.**

11. We are an SBR but not an MBE certified firm, in that case, do we have any obligation to meet MBE goals?

Answer: **Yes. See answer to No. 9 above.**

12. Only MBE firms need to participate in this RFP?

Answer: **No.**

13. If Prime is an SBR certified and sub has MBE certification, will this work for this TORFP?

Answer: **Prime must hire an MBE subcontractor for up to 10% of the work performed under this contract or, request a waiver. Please read the MBE documentation attached to the TORFP.**

14. If TO Contractor is not an MBE which forms are not to be submitted?

Answer: **Please read the TORFP MBE documentation.**

15. “Key Personnel” resume is expected along with proposal, which role or labor category will “Key Personnel” assume when project is awarded?

Answer: See answer to No. 5 above.

16. Key Personnel role will be in addition to 3 roles mentioned in Price Sheet?

Answer: No.

17. In Part 3, Price Sheet, it is mentioned hours for each role as mentioned below, does that mean resource will not work full time? What is the hours expected to work for each year?

Answer: This is NOT a full time job. Labor categories listed in the Price Sheet will work UP TO the hours listed.

18. Please provide technical skills required for each role mentioned below:

Application Development Expert

Senior Computer Programmer

Senior Computer Software/Integration Analyst

Answer: See answer to No. 4 above.

19. Please provide technical platform, skills used to build and maintain the Financial Information System?

Answer: This is described in Section 3.3.2 of the TORFP.

20. Please provide technical platform, skills used to build and maintain other systems supporting the Financial Information System?

Answer: See answer to No. 19 above.

21. How many hospitals are currently associated with the Financial Information System?

Answer: 51 active hospitals. There are approximately 5-6 hospitals that are no longer active, but names have been kept in the system for legacy data.

22. Which platform is used to sync hospital data with the Financial Information System?

Answer: See answer to No. 19.

23. Who will be involved in onboarding of new hospitals?

Answer: HSCRC staff and staff as proposed in the staffing plan.

24. Who will be involved in Transition?

Answer: HSCRC Staff and the TO Contractor personnel as proposed in the staffing plan

**** NOTE: The current contract will no longer be in effect when this contract is awarded. Therefore, there will be no transition out from the previous vendor.****

25. Who is the incumbent vendor?

Answer: There is no incumbent vendor. The last vendor to have worked on the project was Aileron Consulting.

26. Please provide detailed hardware requirement for TO Contractor to perform work remotely?

Answer: RDP Protocol from Microsoft is currently used. Please refer to Section 3.3.2 for a description of the current system.

27. Please provide detailed software requirement for TO Contractor to perform work remotely.

Answer: Software should be compatible with the existing system described in Section 3.3.2.

28. Will HSCRC provide any licenses of necessary software to TO Contractors?

Answer: No.

29. In case HSCRC will not provide software licenses to TO Contractors, will cost for software be included in pricing?

Answer: Yes. All pricing should be fully loaded for all costs associated with this TORFP.

30. Is there any travel involved for any role holder or will they work remotely for the entire duration of the project? Can you please elaborate?

Answer: HSCRC will require at least one in-person kick-off meeting to discuss the initial set up and requirements of the project and the proposal of the TO Contractor.

31. In Technical Proposal instructions it is mentioned "Offeror shall propose exactly one (1) Key Personnel in response to this TORFP whereas in Attachment 1 there are 3 positions mentioned. Can you confirm:

a. Which is the Key Personnel position?

b. Do we need to submit price for the other two positions as well.

**Answer: (a) Please refer to answer to No. 5.
(b) Please submit an hourly rate on Attachment 1, Price Sheet, for all Labor Categories listed.**

32. Was the current system developed in part or wholly by a third-party vendor? If so, is that vendor eligible for this solicitation?

Answer: **The system was originally developed through collaboration of Maryland Hospital Association (MHA) and the HSCRC. Aileron Consulting has done the most recent work with the system. Yes, they are eligible to submit a proposal.**

33. Is there a third-party vendor currently providing same or similar services to the HSCRC? If so, is that vendor eligible for this solicitation?

Answer: **The most recent contracted work has ended. See Answer to #32 above.**

34. Section 3.3.2, which documents the current technical environment, lists several Microsoft products that are no longer supported by the vendor and are; therefore, significant security risks. Is part of this solicitation to replace the components that are no longer supported by Microsoft with current versions of those components? What obligation(s) will the Task Order vendor have regarding security breaches of the system until the non-supported components are replaced?

Answer: **Continually updating the system to meet current industry standards must be part of the proposal. Any security breaches of the system would be the responsibility of the third party hosting vendor.**

35. Key Personnel: A description is not provided for the one (1) key personnel mentioned in the TORFP, and the CATS+ labor category for this position is not defined. Please provide that information, along with any additional TORFP requirements.

Answer: **Please see answer to No. 4.**

36. Staffing Plan: The TORFP states that a staffing plan is required as part of the proposal, however, there is no description of the positions that will need to be staffed. Is each bidder required to formulate and propose a team that is capable of providing all of the requirements described in Section 3.6? And, if that is the case, are the three job titles listed in Part 3/Page 40, required to be a part of the staffing plan?

Answer: **Yes.**

37. Under 3.3.2, #4, the government states that hospitals are “very familiar” with Tableau Server. Yet the paragraph indicates support for internal data analytics. Is there a reason why hospital familiarity is important in this context?

Answer: **We could potentially share Tableau data extracts with hospitals.**

38. Under 3.6.2.2, Items (b) – (e), it would appear that these environments, policies and documents would already exist. Is the government saying that these items will no longer

exist at the time of transition and will need to be recreated? If so, will we have access to the existing items to replicate?

Answer: TO Contractor will have access to existing documentation at the time of award.

39. Under 3.6.2.4, the government mentions the need to create and maintain development and testing environments, does the government intend for the contractor to host these or does it envision the contractor doing this on an existing government platform?

Answer: The testing environment can be maintained on the existing server hosted by a third party vendor.

40. Under 3.6.2.6, the government mentions new hospitals onboarding. On average, how many new hospitals onboard each year and on average, how many people at the hospitals need to be trained on the system?

Answer: The opening of new hospitals is a rare occurrence. However, when a hospital adds new staff (approximately 1-4), they will need to be onboarded.

41. Under 3.6.2.11, the government discusses a mechanism to archive documents. Can you provide an approximate annual volume of records to be archived? Where and how are these records archived?

Answer: The archiving of documents will be a new process and would be proposed as a work order after award of the contract.

42. Under 3.6.3.1, subheading (a), the government mentions that the contractor will provide a support tracking tool. What is the current tool used and how do users access it? Can you provide an estimate on the volume of support requests annually, the general classifications of these tickets, and does the government expect that existing records would be migrated to any new platform?

Answer: Currently, there is no support tracking tool being utilized. TO Contractor should include in their proposal a recommendation for a support tracking tool. Hospitals typically access the current system on a monthly basis.

43. The government mentions two potential work orders, Expansion of the FIS and new modules to support the NSP. Since these efforts and any maintenance efforts are likely to use parallel resources, can't the government provide some indication as to the expected timing of these work orders? The concern being that the effort is properly staffed at the outset to meet expectations while also not having idle resources from overstaffing.

Answer: **The work on the expansion of the FIS and the new module for NSP is expected to be staggered over the length of the contract.**

44. Does the data need to be encrypted?

Answer: **No.**

45. What are the current validation checks used during data reporting/collection?

Answer: **This information will be provided upon award of contract.**

46. How many users is the system supporting?

Answer: **51 hospitals, with approximately 1-4 users each.**

47. How many web servers are there in production?

Answer: **One.**

48. What type of Virtual Environment is being used (Hyper-V/VMware)?

Answer: **This information will be provided upon award of contract.**

49. Is the State open to using Power BI as an analytical tool?

Answer: **Yes.**

50. Is there any performance baseline data available?

Answer: **No.**

51. Does the agency already have a Recovery Point Objective (RPO) and Recovery Time Objective (RTO) included in their DR plan?

Answer: **Yes, third party host covers this.**

52. Is there already a change control system implemented?

Answer: **No.**

53. Can we get a screenshot of the existing form?

Answer: **This will be provided upon award of contract.**

54. Is the government willing to extend the proposal deadline?

Answer: We have extended it to August 22, 2017.

55. It is not clear as to where in the pricing sheet should pricing for 3.6.2 and 3.6.3 should be provided. PART 2 in the pricing sheet references 3.6.9.x.

Answer: Please refer to REVISED Attachment 1, Price Sheet.

56. In Section 3.6.9, the deliverable references 3.8.4.8 and 3.8.4.9. But there are no such sections numbered 3.8.4.8 and 3.8.4.9.

Answer: Please refer to REVISED Attachment 1, Price Sheet.

57. How many lines of code in the HSCRC FINANCIAL INFORMATION SYSTEM?

Answer: This will be provided at the time of award of contract.

58. How many screens is the HSCRC FINANCIAL INFORMATION SYSTEM?

Answer: This will be provided at the time of award of contract.

59. How many database tables in the HSCRC FINANCIAL INFORMATION SYSTEM?

Answer: This will be provided at the time of award of contract.

60. How much did it cost to build the HSCRC FINANCIAL INFORMATION SYSTEM. (If amount cannot be provided, can you please provide approximate number of hours?)

Answer: This process has been ongoing over the last 20 years and details relating to hours and cost are not available.

61. How many excel files from past 10 years needs to be migrated to the Annual Filing Database (referenced in 3.6.4.3). Will the data need to be converted/cleansed before loading?

Answer: Two excel workbooks, per hospital, per year, for 10 years. Whether the data will need to be converted/cleansed before loading would depend upon the system that TO Contractor proposes.

62. How many users currently have access to the HSCRC FINANCIAL INFORMATION SYSTEM?

Answer: See answer to No. 43(c).

63. How many users, on average, use the HSCRC FINANCIAL INFORMATION SYSTEM each day?

Answer: See answer to No. 43(c).

64. How many additional users would be expected after enhancement to include Annual Filing Database and New Data Collection Tool for NSP?

Answer: The same number of users for FIS, plus 1-2 users per hospital for NSP.

65. How many open issues/tickets exist on current system?

Answer: The HSCRC does not currently have a support tracking tool.

66. How many enhancement requests (new reports, etc.) exist for current application?

Answer: Please refer to Scope of Work in TORFP.

67. In section 3.6.2 is titled “Maintenance of Current Financial Information System (Fixed Price)”. Similarly section 3.6.3 is marked as Fixed Price. Does the Fixed Price correspond to “PART 2 – PRICE SHEET - MONTHLY RECURRING CHARGES:” in the Attachment 1 Price Sheet? Should we assume that we provide one amount in PART 2 for both 3.6.2 and 3.6.3 combined?

Answer: Please refer to REVISED Attachment 1, Price Sheet.

68. What is the difference between fixed price and fixed price with Time and Materials?

Answer: Please refer to REVISED Attachment 1, Price Sheet.

69. Do you want the entire bid for the first 3 years calculated and presented as a fixed price and then the 2 one year option years left open or offer a fixed price for those years or a fixed price for the entire 5 year period?

Answer: Please read the instructions for the price sheet.