COUNTY OF ALAMEDA

ADDENDUM NO. 2

&

QUESTIONS & ANSWERS

to

RFQ No. 901620

### for

**Public Health Data Infrastructure**

**Specification Clarification/Modification and Recap of the Networking/Bidders Conferences**

## Held on November 15, 2017

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| **This County of Alameda, General Services Agency (GSA), RFQ Addendum, Questions & Answers (Q&A) document has been electronically issued to potential bidders via e-mail. E-mail addresses used are those in the County’s Small Local Emerging Business (SLEB) Vendor Database or from other sources. If you have registered or are certified as a SLEB, please ensure that the complete and accurate e-mail address is noted and kept updated in the SLEB Vendor Database. This RFQ Addendum and Q&A document will also be posted on the GSA Contracting Opportunities website located at** [**http://www.acgov.org/gsa\_app/gsa/purchasing/bid\_content/contractopportunities.jsp**](http://www.acgov.org/gsa_app/gsa/purchasing/bid_content/contractopportunities.jsp) |

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**The following Sections have been modified to read as shown below.** Changes made to the original RFP document are in **bold** print and highlighted, and deletions made have a ~~strike through~~.

Page 5 of the RFQ, Section D (BIDDER QUALIFICATIONS), Item 1, letter a, is modified as follows:

*Bidder shall be regularly and continuously engaged in the business of providing and administering data infrastructure which includes Meaningful Use reporting and****/or*** *other protected health information for the past five (5) years to a minimum of two (2) public health government entities in California. Experience must be demonstrated by references provided by Bidder at the time of the bid, all references must be individuals working directly with or managing the day-to-day operations of the date infrastructure.*

# II. CALENDAR OF EVENTS

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| **EVENT** | **DATE/LOCATION** | |
| Request Issued | November 9, 2017 | |
| Written Questions Due | by 5:00 p.m. on November 15, 2017 | |
| \*Networking/Bidders Conference #1  (Online conference option enabled for remote participation) | November 15, 2017@ 1:00 pm | at: General Services Agency  Room 1105, 11th Floor  1401 Lakeside Drive  Oakland, CA 94612  OR remotely @ <http://gsaalamedacounty.adobeconnect.com/admin/show-event-catalog> |
| List of Attendees | November 16, 2017 | |
| **Addendum No. 1 Issued** | **November 17, 2017** | |
| Q&A Issued (Only if Necessary) | ~~November 17, 2017~~ November 21, 2017 | |
| Addendum **No. 2** Issued  (Only if necessary to amend RFQ) | November 21, 2017 | |
| Response Due | ~~November 28,~~ December 4, 2017 by 2:00 p.m. | |
| Evaluation Period | ~~November 28, 2017 – December 5, 2017~~  December 4, 2017 – December 7, 2017 | |
| Letter Recommending GSA Award Issued | December 7, 2017 | |
| GSA Consideration Award Date | December 21, 2017 | |
| Contract Start Date | December 27, 2017 | |

**Responses to Questions from the Bidders Conference and Written Questions.**

1. Was a recording made of the recommended but not mandatory bidders conference held on November 15, 2017?

**The bidders conference held on November 15, 2017 was recorded for transcription purposes. All questions from the bidders conference and all e-mailed questions have been addressed in the Q&A Addendum.**

1. Is the term of the contract for two or three years?
   1. **The term of the contract is for two years with the option to renew for an additional three years.**
2. Are references required for the Small Local Emerging Business (SLEB) subcontractor?
   1. **The prime bidder will be responsible for the SLEB subcontractor. However, if the SLEB subcontractor will be utilized to show additional years of service to meet the minimum requirements of this RFQ, then references for the SLEB subcontractor will be needed. In the event that references are provided for the SLEB subcontractor in addition to the references for the prime bidder, bidders are to clearly identify which reference is for the prime bidder and which reference is for the SLEB subcontractor.**
3. Page 9 of the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 2 states:

*Contractor portal shall include Geo-mapping of data within the HIE hub using as many GIS applications as necessary to assure that received data for at least 95% of persons are appropriately Geo-mapped.*

As the geocoding is related to the data quality from the submitted, can bidders include a component for providing feedback and updates to meet the 95% requirement? Also, as it may take the submitter time to update their records, is the County open to an interim process so that reporting timeline requirements are not missed?

* 1. **The product should have a quality assurance methodology. The County expects feedback and updates to continuously improve the system and the data. Interim process is acceptable to meet reporting timelines.**

1. Is SLEB participation required for this RFQ?
   1. **Yes. SLEB participation is required for this RFQ. Bidders not meeting the** [**definition of a SLEB**](http://acgov.org/auditor/sleb/overview.htm) **(**[**http://acgov.org/auditor/sleb/overview.htm**](http://acgov.org/auditor/sleb/overview.htm)**) are required to subcontract with a SLEB for at least 20% of the total estimated bid amount in order to be considered for contract award.**
2. Page 9 of the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 1, letter b states:

*Contractor portal shall be Router designed for the HIE (as opposed to a database design) so that it serves to transmit data, and stores the data only long enough to perform appropriate quality control and assurance functions.*

Is it the County’s intention not to preclude a repository or data leak that could be used for analytics and provision of data sets?

* 1. **The portal is designed to route information, hence, Router designed. There should be a secondary repository for data analytics and provision of data sets. The Router should transmit data to this respository while routing to HIE and other reporting entities.**

1. Page 9 of the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 1, letter b states:

*Contractor portal shall be Router designed for the HIE (as opposed to a database design) so that it serves to transmit data, and stores the data only long enough to perform appropriate quality control and assurance functions.*

Can bidders provide an option to have a database design?

* 1. **Bidders may propose alternative options as long as the RFQ requirements are met within the design.**

1. Does the County intend to be able to download data?
   1. **Yes. The County intends to be able to download data.**
2. Can more than one SLEB be included in the proposal as long as the performance percentage for each is specified?
   1. **Yes. Bidders are permitted to subcontract with multiple SLEBs as long as the minimum requirement of 20% is met.**
3. As there are many versions of HL7 including v2.3.1, v2.5.1, v2.7.1, CDA and FHIR accepted or mentioned by the CDC, can bidders provide a list of those supported by message type?
   1. **Yes. Bidders may provide a list of those supported by message type.**
4. Does the County already receive HL7 data? If so and the intent is to support those feeds on an ongoing basis, can documentation be made available?
   1. **The Public Health Department does not receive HL7 data directly. HL7 data is being sent by numerous health care providers/facilities to some state systems and to a contracted vendor in compliance with earlier federal CMS Meaningful Use stages. See federal Meaningful Use data requirements.**
5. Since Public Health support for Meaningful Use was limited until Stage 3 in late 2014, is the County open to vendors who have supported data exchange since 2014?
   1. **Yes. The County is open to these vendors.**
6. Can references outside of California for reporting to public health be used?
   1. **Provide as exemption, the County will review the references.**
7. Page 6 of the RFQ, Section D (BIDDERS QUALIFICATIONS), Item 1, letter c states:

*Bidder shall be a certified data infrastructure manufacturer or dealer.*

Can the County define or clarify the meaning of certified data infrastructure manufacturer or dealer?

* 1. **Contractor shall be certified with the technology used in developing the data infrastructure (for instance Microsoft Certified partners) and part of their normal suite of business products. For example, the County does not want a IT consulting firm to develop from scratch a data infrastructure system.**

1. Page 7 of the RFQ, Section E (SPECIFIC REQUIREMENTS), Accessibilty, Item 3 states:

*Contractor platform shall be accessible through any internet connect. Users shall not need any additional equipment other than an internet connection.*

In addition to supporting SFTP and Web Services, can a “per connection” charge be requested for custom VPN connections?

* 1. **No, contractor platform shall be accessible without any additional VPN connection, but through industry standard secure web service.**

1. Page of 7 the RFQ, Section E (SPECIFIC REQUIREMENTS), Accessibilty, Item 6 states:

*Contractor shall not limit the number of logins assigned to County personnel.*

Page of 7 the RFQ, Section E (SPECIFIC REQUIREMENTS), Accessibilty, Item 8 states:

*The system shall allow multiple approved County staff and designees to simultaneous access the system without compromising security or prevention of unauthorized use and access to the system.*

Page of 7 the RFQ, Section E (SPECIFIC REQUIREMENTS), Accessibilty, Item 9 states:

*Contractor shall not limit the number of active users accessing system at any one time.*

As analysis tools are per user, but general access is unlimited, can the Contractor provide subscription costs per-user for analysis and visualization options?

* 1. **No. The County is seeking a flat rate for the contract term, the current needs are for one administrator, 5 – 10 analysts access, and around 20 viewer only access. These numbers are subject to change.**

1. Page of 8 the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 1, letter a states:

*Contractor portal shall also include context quality control for data in the HIE hub to assure that received data meet the business rules for each condition specified by the County.*

Has the County developed the business rules or shall bidders estimate the time to assist with the development and implementation of those rules?

* 1. **The County would prefer contractor estimate the time to assist with the development and implementation of the rules.**

1. Page of 9 the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 1, letter b states:

*Contractor portal shall be Router designed for the HIE (as opposed to a database design) so that it serves to transmit data, and stores the data only long enough to perform appropriate quality control and assurance functions.*

Does the County desire the data to also be submitted to a database for long term analytics, reporting and visualization or will the State and CDC endpoints be used solely?

* 1. **The County seeks database for long term usage and/or ability to export data.**

1. Page of 9 the RFQ, Section E (SPECIFIC REQUIREMENTS), Quality Control, Item 1, letter b states:

*Contractor portal shall be Router designed for the HIE (as opposed to a database design) so that it serves to transmit data, and stores the data only long enough to perform appropriate quality control and assurance functions.*

For the analysis and geomapping, is the data only that data used for the time period referenced above?

* 1. **The portal should be designed to route information. A separate database should be used to perform data analytics.**

1. For analysis, is the County open to the data being stored in the Cloud as a service? Does the County approve the use of Microsoft SQL Server 2016?
   1. **All cloud services shall be HIPAA compliant government only cloud, data stored for analysis shall be encrypted at all times with option to purge immediately upon completion of analysis. Contractor product shall be the router design, the County will review the product to determine the feasibility of use of Microsoft SQL Server 2016.**
2. For analysis, as solutions are priced on a per-user basis, can the County provide the number of Administrators (security, configuration and access rights), Analysts (full access), and Viewers (use the analysis)?
   1. **The County would need one administrator, 5 – 10 analysts access, and around 20 viewer only access.**
3. For scoping, can the County provide the number of hospitals, clinics and individual practices, and laboratories?
   1. **There are 13 general hospitals (a few under of the same parent) and one psychiatric hospital. This initial RFQ is focused on the hospitals. Clinics and labs will be the next focus.**
4. For reportable conditions, is it the intent to electronically receive data from both Providers and Laboratories?
   1. **Yes. The intent is to electronically receive data feom both Providers and Laboratories.**
5. For Immunization Updates, is it the intent of the County to also support bi-directional exchange with CAIR2? Inventory management with CAIR2? Vaccination forecast requests with CAIR2?
   1. **At the moment, just bi-directional exchange with CAIR. The County is interested in seeing options for inventory management and vaccination forecast requests.**
6. For Electronic Laboratory Reporting under Title 17, Section 2505. Does the County ONLY prefer to receive electronic laboratory reports from Hospitals (as per Meaningful Use), or does the County prefer to receive all laboratory reports under Section 2505 which would also include clinical laboratories and clinics that have a CLIA laboratory such as some FQHCs and Planned Parenthood locations?
   1. **Yes. The County will require laboratory reports for all locations.**
7. For “Public Health Registry,” has the County declared a specific registry under Meaningful Use? If not, is the County open to allowing bidders to provide an option for a specific registry?
   1. **The California Cancer Registry is a part of the services requested in this RFQ; however, the County is open to allowing bidders to provide an option for other specific registries.**
8. For “Clinical Registry,” is there a specific registry that has been declared in the County of Alameda? If so, can a link to the specifications or a contact be provided? If not, can support for a Clinical Registry be an option?
   1. **Support for a Clinical Registry is desired however the County has not declared one as the County does not have the capability to host one.**
9. For Vital Records, is it the intent of the County to be able to receive data from the CDPH Vital Records Business Intelligence System (VRBIS) for death information or something else?
   1. **The intent is to receive directly from providers for sending to VRBIS. If that is not possible, receiving from VRBIS is desired.**
10. For “Readiness for Electronic Case Reporting” under Meaningful Use, as the final specifications have not been finalized, is the County open to bidders providing a price based on the current data field requirements and draft requirements and the guidance from the CDC Digital Bridge project?
    1. **Yes. The County would be open to this with the understanding that once specifications are finalized, the final system must be compliant with those specifications.**
11. Can the County provide examples of Needs Assessment data?
    1. **The County’s current needs for assessment data surrounds social determinants of health, such as housing, food insecurity, education, employment, and income among others.**
12. Can the County provide a link/reference where to find Chronic Disease Case Reports?
    1. **Unfortunately, one does not exist at this time. Examples of Chronic Disease case reports include diabetes and hypertension. The Centers for Disease Control and Prevention provides statistics and tracking of chronic diseases, the County would like similar information specifically for the County’s population.** [**https://www.cdc.gov/chronicdisease/stats/index.htm**](https://www.cdc.gov/chronicdisease/stats/index.htm)
13. What information is the County seeking from the California Department of Finance?
    1. **The County is seeking costs related to health care and demographics for cities, counties and the State.**
14. For Point-of-Use diagnostic test data, has the County requested this data from healthcare? If not, is the County open to making the request and support such reporting in the second year?
    1. **Not at this time, but the County knows that it is clinically important and exists in their Electronic Health Records. The County would prefer the system to have Point-of-Use diagnostic test data implemented from the start.**