New York State Department of Health
Division of Family Health, Bureau of Administration

NYS Family Planning Data Management and Information Systems (FPDMIS) Services RFP
RFP # 17380
Questions and Responses
April 3, 2018 – Updated Revision

DATA COLLECTION AND SUBMISISON-RELATED QUESTIONS

1. **Question:** If paper client visit records (CVRs) are used by family planning programs (FPP) agencies for data collection, is it the responsibility of the FPP agency to key in this information into the electronic health records (EHRs) or is it the responsibility of the FPDMIS contractor to convert this data into electronic form?

   Response: The FPP agencies may or may not use the paper CVR as a data collection tool. Regardless, the FPP agencies are responsible for keying their client visit information into the EHR, practice management, or other software they have opted to use. The FPDMIS contractor is not responsible for converting the paper CVR into electronic form.

2. **Question:** Is there any requirement to support submission of Encounter Forms, as specified in Attachment M?
   (Section 4.1.a Data Collection, Retrieval, and Editing)
   Response: The encounter form is the CVR form**.** The FPP agencies are responsible for keying their CVR information into the EHR and/or reporting directly to the data vendor.

3. **Question: a)** Are all the CVR forms paper-based; **b)** Is there a desire to collect the data electronically directly from the patient, e.g. via mobile app or tablet?
   (Section 4.1.a, paragraph2)

   Response: a) No; CVR forms can be in paper or electronic format.
   Response: b) No; FPP agencies are allowed to use clinic management software products of their choice to collect data.
   Data as contained in the Encounter Form in Attachment M must be collected by all FPPs regardless of the mechanism to collect those data.

4. **Question: a)** Are the standard formats just Excel, CSV and ASCII?
   b) Is there a desire to support formats such as XML or JSON?
   (Section 4.1.a, paragraph5)

   Response: a) No; Excel, CSV and ASCII are examples of acceptable standard formats.
   Response: b) Bidders may propose any data formatting solutions that meet the specifications and security requirements outlined in the RFP.

5. **Question:** What format is the ASCII text in?
   (Section 4.1.a, paragraph5)

   Response: The fixed length format file layout is provided in Attachment M2 of the RFP.

6. **Question:** Are we required to use the specified record format? While we can do that, our system utilizes a health information exchange network that supports data file conversion as part of the data validation/translation process. This model provides flexibility to the submitters of data (record format and code set variations are accepted and translated within our system). (Attachment M, CVR specifications).

   Response: While health information exchange and data file conversion capability are not specifically stated as a requirement in the RFP, bidders may propose alternative data formatting and submission solutions, as long as they meet the data reporting specifications and comply with the security requirements of the NYS Office of Information Technology Services (OITS) outlined in the RFP.

DATA RETRIEVAL AND EDITING-RELATED QUESTIONS

7. **Question: a)** Is data only transferred via sFTP; **b)** Is there any desire to support APIs? Section: 4.1.a, paragraph 5.

   Response: a) Currently, the FPP data is only transferred via sFTP
   Response: b) Bidders may propose alternative data processing and exchange solutions that meet the specifications and security requirements outlined in the RFP, application program interfacing is not specifically stated as a requirement in the RFP.

8. **Question:** What level of encryption is required?

   Response: Please refer to the NYS OITS Encryption Standard Document Number NYS-S14-007 at https://its.ny.gov/document/encryption-standard that outlines encryption requirements.

9. **Question:** Is there a need for a master patient index number? For example, if a patient has an encounter with an encounter number at one service site but later receives an encounter at another, should the FPDMIS system be able to identify the patient and assign the patient to the same patient number?
   (Section 2.1 Introductory Background).

   Response: No; there is no need for a master patient index number as each FPP agency will assign their own unique identification number to patients.

10. **Question: a)** What kind of data edits are allowed and do any restrictions exist on edits; **b)** Is it for data corrections; and **c)** If so do we need to keep track of the changes and also who edited the record?

    Response: a) Data edits are allowed to correct, change and update reported information; current edits to check the validity, range, duplication, consistency, etc. of CVR data are reflected in the FPDMIS Data Specifications (Attachments M2 -M4), and although there are no restrictions, any additional edits proposed must be reviewed and approved by the New York State Department of Health (NYSDOH).
    Response: b) Data errors due to direct data entry or interfacing software's translation flaws must be corrected and resubmitted for a CVR to pass all edit checks and be accepted.
    Response: c) FPDMIS data vendor is not expected to track or audit record-specific changes and/or who made them.

11. **Question:** Will NYSDOH provide all reference data for validation of received data? Examples include client code, visit code, medical services provided. (Section 4.1.a)

    Response: Criteria for validation of received data, including client ID code, visit type code and medical services, are provided in the Data Specification documentation in Attachments M1-M4. As noted in Question 9 above, the unique client ID code is assigned by the agency providing services.

12. **Question:** Is there any cross field validation? (Section 4.1.a, paragraph 4)

    Response: Current cross field validation edits can be found in the Data Specification Attachments M3 (see Attachment A of M3) and M4.

13. **Question:** While we have the ability to track all specified error conditions, our error codes and messages don't exactly align with those specified. Is that acceptable? (Attachment M, Error message master file).

    Response: Bidders may propose alternative error specifications, but must at a minimum be able to track and clearly communicate all error conditions specified in this RFP.

14. **Question:** Will NYSDOH provide quality submission criteria? (Section: 4.1.a paragraph 4).

    Response: NYSDOH uses an overall (any cause) 3% record rejection rate as an alert criterion and an overall 5% record rejection rate as the maximum allowable in assessing the quality of agencies' monthly data submissions.

15. **Question: a)** What happens to records that are poor quality?
    b) Who is responsible for fixing the data on the failed CVRs?
    (Section 4.1.a, paragraph 4)

    Response: a) Records that fail to pass the FPDMIS edits are rejected.
    Response: b) FPP agency staff, in conjunction with their respective EHR vendors as applicable, are responsible for fixing the data on the failed CVRs.

16. **Question: a)** What is the process of error correction from FPP agencies' CVR data; **b)** Are they resubmitting the error data again or will they submit the monthly data again after fixing the data issues?

    Response: a) FFPs are notified of submission receipt and processing results; depending on the timeliness of the submission and the cause of the failure/rejections, the FPP agency may make corrections and re-submit their data prior to the monthly deadline.
    Response: b) FPP agencies are expected to resubmit corrected data, not entire monthly data files, unless of course, the entire monthly file was rejected.

DATA ACCESS AND OWNERSHIP-RELATED QUESTIONS

17. **Question:** Is NYSDOH ok with having Agency Users login to the contractor-sponsored website using a separate set of credentials, or would it prefer integration with the NYS Gov ID system so that their existing IDs can log them into contractor website as well? (Section: 4.1.d Data Reporting, Posting, and Transmission)

    Response: The NYSDOH requires the successful bidder to utilize security certificates on their contractor-sponsored site allows access based upon the user's credentials.

18. **Question:** Do we need to limit FPP participant's access to the data FPP participants submitted and not the whole data from all FPP participants/locations?

    Response: The contractor's web site must utilize security certificates to control access to data and reports based on defined user roles, specifically, site- and agency-specific for individual agencies' users; site-, agency-, and state-specific for NYSDOH users and contractor's web/data base administrators.

19. **Question:** Administration of Role-based access management should be part of the contractor sponsored website? (Section 4.1.e Computer Production System paragraph 4 FPP participants have access to contractor sponsored website.)

    Response to Qs. 18 & 19: Yes

20. **Question:** In our experience the data is "owned" by the healthcare providers that submit the data with a defined data sharing relationship and/or business associate agreement (BAA) with the grantee (NYSDOH). Has this issue been reviewed with the submitting agencies? (Section 4.1.f Data Ownership, paragraph 1: "All data collected either at the record level or aggregate level is owned by the DOH. The Contractor agrees to provide to the DOH any and all data upon request.").

    Response: Yes; Under the terms of the FPP agencies' contracts with the NYSDOH.

EHR VENDOR INTERFACE-RELATED QUESTIONS

21. **Question:** Overall, how many service sites are actively interfacing to the current FDMIS directly from their EHR? If not all are actively interfacing, has a gap analysis been completed and if so, can the state provide this report? (Section 2.1 Introductory Background).

    Response: CVR data collection is managed at the FPP agency level. A total of 23 of the 48 FPP agencies, including 117 service sites, currently extract CVR data directly from their EHRs for electronic submission to the FPDMIS. No formal gap analysis has been done.

22. **Question**: Are all 48 agencies currently submitting electronically from their EHR systems? If not, please describe current approach(es) of agencies.
(Section 2.1 Introductory Background, paragraph2: "To ensure the provision of quality, comprehensive reproductive health care, all FPP provider agencies must submit information to the FPDMIS in the form of electronic Clinic Visit Records (CVRs) that document services provided to individual clients during family planning visits.")

    Response: No. A total of 25 of the 48 FPP agencies do not submit electronically from their EHR systems, but instead use Ahlers' WinCVR software to capture, extract and electronically submit their data to the current FPDMIS.

23. **Question:** How many of the 178 service sites across the State are sending information via a CSV file to the current FPP application today?
(Section 2.1 Introductory Background).

    Response: As noted above in questions 21 and 22, CVR data for all 48 FPP agencies, including their 178 service sites, is submitted to the current FPDMIS in the electronic format described in Attachment M2.

24. **Question:** Please provide a list of the EHR vendors used by the FPP Agencies?

    Response: FPP agencies' EHR vendors include: Allscripts, Athena, Cerner, eClinical Works, EPIC, Medent, NextGen, Praxis, QuadraMed, and Sunrise.

25. **Question:** How many different health record vendors are used? Do they all use the same interface?
(Section 4.1.a, paragraph 1).

    Response: No, FPP agencies currently use 10 different EHR vendors, as shown in the list provided in response to question 24. All are required to use the same interface to submit CVR data in the same format as described in Attachment M1.

26. **Question:** Will the State provide project management and oversight during interaction with service site's EHR vendors?
6.2 Technical Proposal, D. Technical Proposal Narrative, D.1.h Implementation Plan (Section 4.1.h)

    Response: No

27. **Question:** If a service site's EHR vendor cannot provide all identified data elements in the format the State requires within the timeframe of Go-Live, what is the State's role in mitigation?
(Section 6.2 Technical Proposal, D. Technical Proposal Narrative, D.1.h Implementation Plan (see section (4.1.h)

    Response: NYSDOH will provide project management support and assistance to FPP agencies and to the FPDMIS contractor during their EHR vendor interactions, as needed.

COMPUTER PRODUCTION SYSTEM-RELATED QUESTIONS

28. Question: Please provide information about the current hardware and software used for the existing FPP application.

Response: The current vendor uses an IBM Midrange System I (also known as AS400) for processing CVRs using customized RPG III software programs for batch processing. The C# and Visual Basic-based Website and its maintenance reside on a 2008 SQL Server platform using 2008 Standard Edition Software.

29. Question: What is the current technology stack being used?
(Section 4.1 Task Deliverables, 4.1.e Computer Production System).

Response: See question #28

30. Question: Is there a preference to keep the current technology stack or not?

Response: Bidders may propose any solutions that meet the requirements specified in the RFP Sections 4.1.e and 4.1.g. The proposal should describe all items listed in section 6.2.D.1.e of the RFP, including NYS IT standards.

31. Question: Does NYSDOH have any objections to building the service in a cloud-based environment providing environment complies with all NYS IT standards?
(Section 4.0).

Response: See answer to question # 30.

32. Question: What is meant by the word "provide"? We anticipate a technical review session with NYSDOH and your OITS group but want to be sure.
(Section 4.1.e Computer Production System, paragraph2: "Prior to the commencement of work on this contract, the Contractor must provide to DOH all software, hardware, programming languages, file layouts, coding and editing schemes, and utility programs being proposed for use to operate the system for review and approval by DOH and the NYS Office of Information Technology Services (OITS).")

Response: The word "provide" refers to the description of the computer production system. As stated in Section 6.2.D.1.e Computer Production System, bidders should describe (narrative and schematic descriptions) all computer system hardware, software, programming languages, file layouts, coding and editing schemes, operating and security systems, utilities, secure on/off site storage media/suppliers, and any other equipment or services they propose using for the FPDMIS. The computer production system described is subject to approval by DOH and the NYS Office of Information Technology Services prior to commencement of work if awarded the FPDMIS contract.

33. Question: We are confused by the discrepancy between one million CVRs processed and 500,000 family planning visits. Does the difference of 500,000 represent corrections/updates to existing records or something else?
(Section 2.1 Introductory Background, paragraph3: "...one million CVRs were processed for more than 300,000 FPP clients who made more than 500,000 family planning visits.").

Response: Yes; the difference of 500,000 represents resubmissions of rejected records as well as corrections/updates to existing records.

34. Question: a) It is mentioned that two million FPP records currently exist and that 1.1 million records were processed in 2016. How long are FPP records retained for in FPDMIS; **b)** Does NYSDOH have CVR acceptance/rejection metrics for Q1/Q2/Q3/Q4 2017 that it can share?
(Section 4.1.e Computer Production System).

Response: a) Per section 4.1.d of the RFP, the successful Bidder is required to maintain a minimum three-year active database of client and visit records. Historical master computer files must have a minimum four-year retention period.
Response: b) The final average monthly processing for 2017 was about 44,314 (accepted) and 1,453 (rejected). The CVR acceptance/rejection metrics for quarters 1 through 4 for 2017 are as follows:

2017 Quarters	Accepted	Rejected
Q1	118,810	3,766
Q2	132,766	6,000
Q3	127,847	1,385
Q4	152,350	6,287

TRAINING AND TECHNICAL SUPPORT-RELATED QUESTIONS

35. Question: How many agency staff members need to be trained?

Response: Agency size and staffing levels vary, but DOH estimates approximately 300 staff members statewide.

36. Question: How many different job roles need to be trained? (Management, Admin, CSRs. Etc.)
(Section 4.2 Training and Technical Support Details).

Response: Training should include data managers (i.e., those responsible for data collection / entry / internal management / analysis / transmission / EHR & FPDMIS interface), program managers (accessing the reports to monitor clients and services) and executive level staff (monitor agency performance).

37. Question: It appears in the NY State diagram that there are seven regions. Is this correct?
(Section 4.2 Training and Technical Support Details, last statement: "Conduct up to two (2) trainings per region via webinar each contract year for each of five NYS regions (Western, Central, Finger Lakes, Northeastern Lower Hudson Valley, NYC, Long Island), as needed.")

Response: Yes, there are seven (7) regions. See Amendment 1.

38. Question: Is there a categorization of the support calls? E.g. how many are related to filling in the paper forms; how many are related to data transmission issue, how many are to do with data quality, etc? (Section 6.3).

Response: NYSDOH does not collect this information. The Department estimates a total of 1,500 for all types

REPORT GENERATION-RELATED QUESTIONS

39. Question: We reviewed the reports provided and while we can meet the requirements of the specified reports, our reports don't match the reports exactly (different layout and additional content in some cases). Will our currently available reports be acceptable?
(Section 4.1.c Data Reporting, Posting, and Transmission, paragraph1: "The selected Contractor will be responsible for the development and dissemination of standardized, ad hoc and custom reports in the format prescribed by the NYSDOH.")

Response: Alternative report templates may be proposed, but the templates must meet the requirements of the specified reports and are subject to full NYSDOH review and approval. See RFP section 4.3 Report Generation and Distribution for the list of required reports and Attachments N.1 – N.7 for detailed examples of the required reports.

40. Question: Please define "purge client".
(Section 4.3 Report Generation and Distribution, N.2.b).

Response: A "purge client" is a clients for whom no encounter (visit) has occurred, and therefore no CVR has been processed, in more than three years. These cliens are considered inactive and must be purged from an agency's roster of active (continuing) clients. A "purged client listing" is produced by the Contractor upon request from an FPP agency and are used to clean their computer files.   (See also section 4.1.D.)

41. Question: Please elaborate on "any selected information".
(Section 4.1.e Computer Production System, paragraph 5: "In addition, the Contractor must supply DOH with any selected information via secure file transfer protocols...").

Response: "Selected information" means any captured data or data file can be requested by DOH from the Contractor. The DOH will specify what data or data file they are requesting and for what select, specifiable time frames and/or purposes it is being requested. This is in addition to the standard annual and monthly files.

TRANSITION-RELATED QUESTIONS

42. Question: What is the target date for starting NYSDOH testing before contract start date?

Response: Bidders should propose in their Implementation Plan, see Section 6.2.D.1.h, a schedule of events, demonstrating their proposed timeframes for completion of milestones needed to for the FPDMIS to be operational for data collection, retrieval, and processing within two months of the contract start date, as noted in Section 4.1.h.

43. Question: Does the DOH expect information captured in current system to be migrated to the new system and accessible through all access and reporting features?
(Section 4.1.a).

Response: Yes. Legacy data will be transferred to the successful bidder.

44. Question: Will the State provide oversight and planning during the transition from the current vendor to the new vendor?

Response: Yes; the NYSDOH will then provide oversight of this process.

45. Question: Who is responsible for migrating the existing data into the new system?
(Section 4.1.a)

Response: The successful bidder will be expected to develop a transition plan in conjunction with the NYSDOH and the current vendor.

46. Question: What is the mechanism for getting the data from the current system into the new one? (Section 4.1 Task Deliverables, 4.1.h. Implementation Plan).

Response: See answer to question # 45.

47. Question: In what format has the current vendor agreed to transition legacy data to the new vendor?

Response: Legacy data will be transitioned to the new vendor in a standard format agreed upon by both parties as approved and overseen by the NYSDOH.

48. Question: Can the new vendor specify any format of receiving legacy data they desire? Section 4.1 Task Deliverables, 4.1.h. Implementation Plan.

Response: See answer to question # 48.

49. Question: What format is the current data in?
Section 4.1.a.

Response: CSV is the current format for online extraction of data files from the FPDMIS.

M/WBE-RELATED QUESTIONS

50. Question: Can the total State Agency Authorized User Agreement goal (30%) be obtained by utilizing any combination of MBE and /or WBE participation?
Section 5.5 Minority & Woman-Owned Business Enterprise Requirements

Response: Yes.

51. Question: Is there a list of potential prime bidders that can be made available to WBE subcontractors?

Response: Since NYSDOH did not require potential bidders to submit a Letter of Interest, there is no way for NYSDOH to know this information. Interested M/WBEs may submit their information and the NYSDOH will add your company to the list of M/WBEs willing to subcontract for these services**.**

52. Question: Is the current vendor or State utilizing a M/WBE to complete the current contract requirements? If so, who?
Section 5.5 Minority & Woman-Owned Business Enterprise Requirements

Response: No. The current vendor is not a certified M/WBE, nor do they subcontract with one.

COST/FUNDING-RELATED QUESTIONS

53. Question: Please elaborate on "retrieving and editing the CVR". It appears that the vendor will be responsible for correcting rejected CVRs. In our experience, agencies review their audit reports, correct CVRs in their systems and resubmit.
(Section 6.3 Cost Proposal, paragraph4, "Data Processing Fees must include one bid price for electronically submitted CVRs that are accepted and a separate bid price for those that are rejected. The bid price for accepted CVRs must reflect all costs related to processing the CVR, such as retrieving, editing, reviewing, and storing the data. The bid price for rejected CVRs must reflect all costs related to retrieving and editing the CVR.").

Response: The vendor will not be responsible for correcting rejected CVRs. CVRs are subjected to edit checks upon retrieval, with their acceptance/rejection based on the criteria in the master error list. Vendor-generated data processing reports detail the reasons for rejections and the FPP agencies are responsible for making the appropriate corrections and resubmitting the data for reprocessing.

54. Question: Is NYSDOH expecting a single line item cost for information system fees or should information system fees be separated by category (e.g., forms and reports, ad hoc reporting functionality, technical support, updating/enhancement/distribution of support documentation, etc.).
(Attachment C Cost Proposal Bid Form, paragraph3)

Response: Yes.; a single line item cost is required.

55. Question: We see that the cost proposal includes the provision of 250 staff hours to meet this requirement as well as other system enhancement requirements. If the 250 hours are exhausted, is there a mechanism to budget additional time required if needed?
(Section: 4.3 Report Generation and Distribution, paragraph2: On occasion, the DOH may require special analyses and/or tabulations. The Contractor must be prepared to respond to special requests for custom reports and/or to supply data via electronic media to the DOH staff on short notice as needed.)

Response: The 250 staff hours are an estimate, bidders must propose an all-inclusive monthly fee for all components listed for Information System Fee.

56. Question: Is the vendor expected to mail the hardcopy of reports? In the State's experience, what has the annual cost of mailing hardcopies been? Is the vendor expected to include these costs in their proposal?
(Section 4.3 Report Generation and Distribution).

Response: Agencies do not routinely receive any quarterly or annual reports by mail; these are posted online. Every family planning agency receives three reports monthly: the CVRs Processed Report, the CVR Error Report and the CVR Error Summary Report. While some of the agencies prefer to retrieve these reports online, the size of the monthly hard copy volume sent to agencies by the vendor totals about 400 pages. This amount is duplicated for copies sent to NYSDOH. Using this 800-page estimate, the bidder is expected to include the mailing costs in their proposal. Hardcopies of these reports do not need to be sent via certified mail or freight.

57. Question: What is the amount of award granted to the current contractor? Can price information from the incumbent vendor be provided?

Response: The original contract value for the incumbent was $1,094,000.

58. Question: Do you have any budget in mind?

Response: This question is not relevant, bidder will need to present a proposal based on what they deem appropriate for the scope of work in this RFP.

59. Question: What is the estimated overall budget for the project and have the funds already been budgeted?

Response: See response to question # 58

60. Question: Where do I provide our annual and/or five-year costs?

Response: The RFP does not require bidders to provide a total annual or five-year cost. Bidders will complete the Cost Proposal Bid Form (Attachment C) with the price per record of CVRs accepted, the price per record of CVRs rejected, and the monthly Information System fee for years 1-3, year 4 and year 5.

GENERAL QUESTIONS

61. Question: We are assuming that an enhanced version of Adobe Acrobat is required but wanted to be sure. Attachment A Bidders Certified Statements: "Click here to enter text" functionality doesn't appear to be working.

Response: If Adobe Acrobat cannot be utilized, you may hand write the needed information for Attachment A. Completion of any of the RFP forms (Attachments A, C, D, F, G, H, I, J, K, L) may be handled in this manner.

62. Question: In order to participate in the bidding process, does our company need to be physically located within NY State? (eligible Bidders are described in Section 3.0.)

Response: No.

63. Question: Is there any system / incumbent company that currently supports these initiatives?

Response: Ahlers and Associates is the current vendor.

64. Question: Is there a vendor currently providing these services to DOH under another contract?

Response: See answer to question # 63

65. Question: Who is the current vendor?

Response: See answer to question # 63

66. Question: We see that there was an RFP in 2012. Have the State's needs changed since 2012, and, if so, how? Why was the RFP reissued?

Response: No, the State's needs have not changed. The State is required to re-procure service pursuant to State Finance Law.

67. Question: What is the current contract's expiration date?

Response: The current contract's expiration date is 12/31/2018.