

**1. What is the approximate # of total users on the platform?**

The SD CIE does not currently have any active users. We anticipate approximately 55 service providers (partner organizations) with 285 end users utilizing the platform 1-year post product launch.

**2. Platform users by type?**

The State intends to partner with healthcare, social, and human service providers using role-based access control (RBAC) to determine the level of access individual end users will have within the system. The State anticipates between 5-10 different levels of access for users. Specific user types will be determined based on RBAC criteria and vendor capabilities.

**3. Has a previous vendor already completed work on the CIE (we noticed it was posted and awarded to *another vendor* last year)?**

Work completed by the previous vendor to create a SD CIE platform will not be utilized moving forward. However, existing documentation will be modified and used as applicable. Examples of existing documentation include such things as use cases, communication plans, project management plans, etc.

**4. Is there a preferred vendor identified?**

The software vendor will be selected based on the responses to RFP#23-0904006-027.

**5. Is there a separate excel or other editable format available for completion of Appendix B "Security and Vendor" questions?**

See additional attachment.

**6. Does Appendix H: "Service Level Agreements" need to be filled out and included in the response?**

There is no requirement to complete and include Appendix H. It is for informational purposes to alert vendors of the Service Level Agreements (SLAs) that will be utilized to ensure overall compliance related to the ongoing implementation, operation, and maintenance of the SD CIE. If vendors foresee an inability to meet any of the outlined SLAs, the State would appreciate any information as to barriers for adherence and proposed alternative SLAs.

**7. What is the approximate approved budget for this RFP?**

There is not a pre-determined budget at this time. Please submit your budget based on the efforts it would take to meet all the State's requirements.

**8. How much on-site time is expected from the vendor?**

The majority of vendor efforts will be done remotely with communications taking place via email and virtual meetings. The State would like the selected vendor to meet on site for the initial project kick-off meeting. Any other on-site requirements would be determined and agreed upon by the State and selected vendor.

**9. General: Can you please help prospective vendors understand how the proposed CIE software will interact with the *previous vendor* product ostensibly configured and implemented between 2021 and 2023?**

The selected vendor will not interact with a previously developed product. The State will utilize the platform facilitated through the selected vendor.

**10. General: What is the anticipated source of funding to maintain operation of the CIE software following the end of the State's CDC grant? And the anticipated budget?**

The State is committed to facilitating the SD CIE past its current funding's end date. Sustainability discussions are ongoing with various sources potentially funding efforts in the future. The anticipated budget for operation and maintenance will be determined by the costs associated with the selected vendor. Initial build and implementation costs and ongoing maintenance costs may be considered when determining the awarded vendor as the State must remain fiscally prudent in its service to partners and citizens.

**11. 1.2.3. (p. 4): The State outlines five phases of the first contract year. It would be helpful to understand:**

**a. What software/platform features the State seeks to have tested in the iteration-based design sprints scheduled for Phase IV.**

All features of the SD CIE platform will be tested during Phase IV and must receive final approval from the State before the system is rolled out to users. Appendix E outlines the overall vision of what the system should entail. Functional and technical requirements are outlined in Appendix F and G.

**b. Is there a missing Phase V that should be added?**

Below are the Year 1 phases:

Phase I: Contract Negotiations begin 07/19/2023

Phase II: Vendor Contract Executed 08/01/2023

Phase III: Implementation Project 08/31/2023

- i. CIE Global Workflows
- ii. HIE Integration
- iii. iCarol/Connect 211/Service Provider Registry Integration
- iv. Helpline Center Network of Care Integration
- v. Onboard Pilot Community-Based Providers

Phase IV: Iteration-Based Design Sprints 11/31/2023

- vi. Cyclical Feedback Loop with Pilot Community-Based Providers
- vii. System Integrations and Workflow Improvements

- 12. 2: Standard Contract Terms and Conditions (p.7): Does the State want potential offerors to include potential exceptions to the Standard Contract Terms and Conditions with their response? If yes, where shall these be placed in the RFP response. If not, at what point can potential vendors raise alternative language for the terms and conditions?**

The State's standard terms have been included within the RFP however, terms and conditions will be discussed with the selected vendor during the contract negotiation phase. The State must agree to any requested changes to contract language. If the selected vendor and the State are unable to agree upon terms and conditions, it will result in a contract not being issued and the State selecting a new vendor.

- 13. 3: Scope of Work (p.11): Can you please clarify what it means that "...the State will own the data tables..."? Are you intending to have the offeror commit to having the State own the data in the platform tables, giving you unfettered access to the data, and/or giving you edit and control rights to the data table code? Or something else? Please clarify.**

The data itself will be property of the State, meaning the State should have access to the data at all times as needed for running reports, exporting to analytic software tools, etc. The State does not expect to own the software coding or information proprietary to the vendor and necessary for functionality of the system. Additionally, the selected vendor does not have the right to share, sell, etc. any of the data collected within the SD CIE.

- 14. 4: Project Deliverables (p.12): South Dakota requires that the offeror include and use a test system for the application to manage all code changes. The requirements further state that BIT will decide if the State or the offeror will apply code changes. Can you please clarify if these requirements are for major changes, or all changes? As is common with other high-performance SaaS providers, *Vendor X* makes fully tested code changes many times per day.**

A testing environment is required for any development or changes specific to the SD CIE project and configurations required by the State. Changes made to the vendor's platform for other users or for the platform in general are assumed to have been vetted through the appropriate channels and will not need to be tested in another environment specific to South Dakota's instance.

- 15. 4: Project Deliverables (p.14): Do release notes count as BIT's change management process.**

Release notes that are part of the selected vendor's overall maintenance and enhancements are not subject to the State's change management process. The State's change management process specifically relates to any major changes to the SD CIE instance that would result in a

change to overall scope of work, change to system requirements, etc. as determined at the start of the project.

**16. 5: Format of Submission (p.16): The section gives a list of section headers and states**

**"Proposals should be prepared using the following headings and, in the order that they are presented below. Please reference the section for details on what should be included in your proposal.**

- a. Statement of Understanding of Project
- b. Deliverables
- c. Non-standard Software and/or Hardware
- d. Project Plan
- e. System Diagram (If not a separate document)
- f. Security and Vendor Questions (If not a separate document)
- g. Response to the State's contract terms
- h. Corporate Qualifications
- i. Project Experience
- j. Team Organization
- k. Staffing
- l. Costs (If not a separate document)

**The sections that follow (e.g., 5.1., 5.2., 5.3) either do not match the list in 5.0 or do not match the section title. In addition, there is required content not listed in the list of section headings under 5.0 (e.g., Attachment D: Software Capability Checklist). Can you please confirm what section headings we should use AND where you want us to put content that isn't specified in list at 5.0?**

Please utilize the order below in your proposal.

- 5.1 Statement of Understanding of Project
- 5.2 Corporate Qualifications
- 5.3 Project Experience
- 5.4 Project Plan
- 5.5 Deliverables
- 5.6 Non-standard Software and/or Hardware (if any will be utilized)
- 5.7 Background Checks
- Any additional information not included in the above sections

Please include as separate documents:

- 6 Cost Proposal
- Appendix B
- Appendix C
- Appendix D

**17. 5.0: Format of Submission. (p.16): Please indicate what content the State seeks in the**

**"Response to State's Contract Terms" section of the RFP response.**

The State's standard terms have been included within the RFP however, terms and conditions will be discussed with the selected vendor during the contract negotiation phase. The State must agree to any requested changes to contract language. If the selected vendor and the State are unable to agree upon terms and conditions, it will result in a contract not being issued and the State selecting a new vendor. The State does not expect a response for this section.

**18. 5.0: Format of Submission. (p.16): Please indicate what content the State seeks in the "Team Organization" section of the RFP response.**

Please reference the response to Question 16

**19. 5.0: Format of Submission. (p. 16): Please indicate what content the State seeks in the "Staffing" section of the RFP response.**

Please reference the response to Question 16

**20. 5.2: Corporate Qualifications. (p.18): Question K asks respondents to detail the number of employees who are "...involved in on-site project work," What does the State mean by "on-site"? Are you asking how many employees come into the office, how many employees work at client sites, or something else? If something else, please describe.**

You may disregard this question in your response

**21. 5.2: Corporate Qualifications. (p. 18): Both questions P and R ask for references. P specifically asks for references from government agencies while R asks for four references from like projects with a preference for references from States with consolidated IT systems.**

**a. Can you please clarify:**

The State would like to assess the applicant's experience working with government agencies as well as with similar projects as outlined in the RFP.

**b. Can a vendor use the government reference for both Question P and Question R? Or are you looking for separate sets of references?**

If the vendor has separate references available, that would be preferred.

**22. 5.2: Corporate Qualifications. (p. 18): Point R asks vendors to consider including references to clients that, like South Dakota, have a consolidated IT system. Can you please confirm which elements of South Dakota's IT system are considered shared service under your consolidation plan? (page 18)**

**a. Application Development**

- b. Communications services/telephony/email
- c. Data Center
- d. Directory Services
- e. Disaster Recovery
- f. Email Services
- g. Enterprise single sign-on
- h. IT Governance
- i. Help Desk
- j. Identity authentication management
- k. Imaging
- l. Portal
- m. Project management
- n. Servers

All of the listed elements are services under the State's consolidated IT systems.

- 23. 5.6 Non-Standard Hardware and Software. (p.21):** The requirements state that "The use of non-standard hardware or software requires use of the State's New Product Process." Can you please indicate how long this process typically takes, so vendors who seek to use non-standard tools can include time for this process in their implementation plan?

The non-standard hardware process is necessary for products that must be downloaded to the State system. Products where the user logs in through a cloud service, website, etc. do not need to go through this process. For products that do go through this process, it typically takes 2-4 weeks to obtain approval.

- 24. 5.6 Non-Standard Hardware and Software. (p.21):** This portion of the instructions says, "If non-standard hardware or software is used, the project plan and the costs stated in Section 7 must include service desk and field support..." Can you please clarify which section 7 this refers to? Section 7 of the RFP is labeled Proposal Evaluation and Award Process.

For costs that will be incurred by the State for use of non-standard hardware/software, please include them in your budget proposal as noted in Section 6.

- 25. 5.6 Non-Standard Hardware and Software. (p.25)** The requirements state that "The project plan must include the development and implementation of a disaster recovery plan since non-standard hardware and software will not be covered by the State's disaster recovery plan." If a vendor is offering a Cloud-based SaaS solution, they would be responsible for disaster recovery. Is this acceptable to the State?

Yes, however the vendor must have a disaster recovery plan available.

- 26. 6.0 Cost Proposal. (p.27):** Please confirm if you want the cost proposal included with the full proposal, or if you want this section submitted as an independent document.

Please submit as a separate document.

- 27. Appendix B: Security and Vendor Questionnaire Question D2.** The question asks vendors to respond to the following: "Does your company have a policy and process for supporting/requiring professional certifications? If so, how do you ensure certifications are valid and up-to-date?" What kind of certifications are you alluding to here? Project Management Professional? Something else?

The State does not specify what certifications are needed/required. This is an opportunity for vendors to provide information in regard to any certifications vendors may require staff to have/maintain, such as PMP certification for their project managers.

- 28. Appendix C: Security Acknowledgement (p.62):** The instructions on the form indicate it should be returned to our BIT contact. Can you confirm that you want this form completed and included as part of the RFP response? If yes, is there a particular place where you want this included? If not, to whom should we send this completed document?

Please complete and submit this form as a separate document with the rest of your proposal to [Rachel.Sehr@state.sd.us](mailto:Rachel.Sehr@state.sd.us).

- 29. Appendix F. (p.73):** One of the requirements is that "Resource search includes predictive search ". Can you please confirm what exactly you want the system to predict? For example, do you seek to have the search box autofill based on the first few letters someone types, or something else?

Your example is correct. If someone wanted to search for "food," they could begin typing "f-o" and would have the option to autofill based on the first few letters.

- 30. Appendix G: Business Continuity (p.76):** Confirm that the requirement should read "...backup site CAN be built..." If this is not correct, what should this read?

Correct.

- 31. Appendix G: Design Expectations (p.80):** "User access shall be limited to the browser based-serving tier only." Seems to contradict with elsewhere where the requirements indicate the State seeks direct database access. Can you please clarify what the State seeks here?

End users should access the platform through their browser.

- 32. Appendix G: General System (p. 85):** The State lists as a requirement: "Ability to provide a dashboard that allows State staff to view hours used and remaining in the modification pool." Can you please clarify what this means?

These requirements are specific to the change management process. The CIE vendor should provide the State with a reconciliation of dollars spent on implementing new enhancements. A recommendation would be a dashboard or report on planned versus actual dollars spent.

**33. Appendix G: General System (p. 86): "Ability to notify State within twenty-four (24) clock hours if the Vendor finds a defect or maintenance problem." - what constitutes a defect or maintenance problem?**

An example would be that part of the platform is nonfunctional. An incident or issue with a severity of 1 (critical) will require a 24-hour notification to the State.

**34. Appendix G: General System (p. 87): Several requirements relate to the idea of providing estimates in terms of hours and staffing reports, which would make sense if we were doing custom development for them instead of bringing them into our SaaS platform. How does this apply to a SaaS product?**

These requirements are specific to customization. The State will likely need/want to tailor some components within the selected product to meet all requirements. Ease of customization will be a consideration when selecting a vendor. If a SaaS product is proposed and there is an inability to make any customizations, please note that in your proposal.

**35. Appendix G: Design Expectation (p. 102): The requirement reads, "The system's automated user lockout rules are to be defined and governed by State Active Directory policies." Can you please clarify what this specific policy states, and/or where to find it?**

Appendix I contains all information technology security policies.

**36. Appendix G: Presentation (p. 98): Internet Explorer is no longer supported; it has been replaced by Microsoft Edge. Do you still need the successful vendor to support it?**

If a browser cannot be supported, please include that information in your proposal along with a list of supported browsers.

**37. Appendix G: Presentation (p. 98): The requirement states that South Dakota wants the successful vendor to "Integrate with the State security service, State Online Gateway (State SSO), to require and enforce authentication and authorization." What protocols and technologies does the State SSO use?**

The SSO supports two industry standard protocols: OpenID Connect and OAUTH 2.0 (preferred).

**38. Appendix G: Testing (p. 108): What level of detail is expected in the Master Test Plan?**

The Master Test Plan will be developed in collaboration with the State team. It must be detailed enough that any team member can review and understand exactly how testing of the product will be completed.

**39. Appendix G: Training and Support (p. 109): The State is asking for telephone support between the hours of 8:00 AM and 6:00 PM ET. Is chat support sufficient during periods when the helpline is not typically staffed?**

Support should be sufficient to address the needs of the users. A Customer Service Plan will be developed to outline how those needs are handled.



**40. Appendix H: 1.3 (p.111): What does the State understand "the 10-5-5 deliverables development process" to be?**

Any documents going through the team's review process will have 10 days for initial review and feedback. The document's author will have five days to respond to team comments and another five days will be allotted to the team for secondary review.

**41. Appendix H: 1.13 (p.114): What constitutes an incident, and what are the definitions of critical, high, medium, and low incidents?**

An incident is any disruption of the capabilities of the software or any issue relating to the security of the SD CIE client data. An issue will be considered critical at all times that it relates to the security of SD CIE client data. The SD CIE team will work with the selected CIE vendor to determine appropriate levels of potential incidents.

**42. Goals and Objectives (p. 2): Can the State please provide a sample file in the format in which the Helpline Center Resource Database will be provided to the vendor?**

The State will work with the selected vendor to upload Helpline Center resources as needed. Resources will likely be provided via a CSV file or API depending on vendor capabilities. Please see additional attachments.

**43. 1.2.3. Description of Components or Phases (p 4): Can the State please provide its expectation around project deliverables being completed prior to the next Phase of work beginning? (i.e., will the State accept a deliverable initiated in Phase III having a final delivery date within the bounds of Phase IV?)**

All aspects of a phase must be completed before moving on to the next phase.

**44. Project Deliverables/Approach/Methodology (p. 13)/5. Format of Submission (p. 17): Should the security scan report be submitted as part of the Deliverables section or as an Appendix item?**

As an appendix.

**45. Format of Submission (p. 17)/Section 10 Scanning (p. 25): Should the Scanning form be submitted as part of the Appendices section of the response, or in another section of the response?**

As part of the appendices.

**46. Format of Submission (p. 17)/Appendix C Security Acknowledgement (p. 62): Should the signed Security Acknowledgement be submitted as part of the Security and Vendor Questions section or as an Appendix item?**

As an appendix.

- 47. Format of Submission (p. 17)/Appendix D: Software Capability Checklist (p. 64): Should the Software Capability Checklist be submitted as part of the Appendices section of the response, or in another section of the response?**

Please submit the checklist as a separate document when sending your response.

- 48. Appendix D (p. 66): Can the State please clarify the electronic workflow it envisions when requiring support of “email referral capabilities?”**

The State understands that not all service providers will participate in the SD CIE in the same way. The State requires the ability to notify CIE partner providers by email when they have a referral within the SD CIE, depending on their level of partnership, so as many referrals as possible in the system are resolved.

- 49. Appendix D (p. 67): Where multiple data standards have been referenced (HUD/HMIS versus AIRS/LA 211 versus Healthy People versus NEIM), does one standard take precedence?**

Overall, AIRS/LA 211 takes precedence for resource database standards, while federal interoperability standards take precedence for client demographic data. It is a priority for the State that data from multiple sector sources can be brought into the SD CIE and for us to understand your solutions capability to do the necessary data translation.

- 50. Appendix D (p. 68): When the State requests that the vendor integrate with “McKesson/ AllScripts,” is it referring to the Paragon Electronic Health Record or another system?**

Paragon EHR is considered an Allscripts system. When the State asks about McKesson/Allscripts, it is asking whether the vendor has an existing integration. It is not necessarily going to be a requirement that the vendor integrate for the SD CIE. Integrations will be agreed upon by the State and awarded vendor.

- 51. Appendix E Component Narrative (p. 70): Please confirm that Appendix E is for reference only and does not require completion.**

Appendix E is for reference only and describes the State’s overall vision for the SD CIE.

- 52. Appendix F Detailed Functional Requirements (p. 72) and Appendix G Technical Requirements (p. 75): Regarding the May 17, 2023 clarification (via email), the State referred to Appendix F and Appendix G as system requirements. Could you please further clarify if these documents should be used as reference only (no direct response to the documents required) to describe our approach/methodology/deliverables in the Deliverables section?**

The outlined requirements are for the vendor’s understanding. These components review the State’s expectations for the selected vendor’s product.

- 53. Appendix G, Data Aggregation (p. 77): May the State provide examples of “other approved data collection systems” and “other qualifying systems?”**

The State would like the opportunity to combine various data sets for further population health data analysis. Data collection systems have not yet been determined.

- 54. Appendix G, General System (p. 82): When the State requests “modifications, additions, and deletions to user role definitions over the life of the contract,” is it referring to (i) the ability to modify DoH staff permissions, (ii) the ability to modify vendor user role architecture, or (iii) something else?**

The State intends to use role-based access control (RBAC) to determine the level of access individual end users will have within the system. The State anticipates between 5-10 different levels of access for users at this time and requires the ability to change RBAC criteria/roles based on the evolution of the SD CIE, changes to partners and their access needs, etc.

- 55. Appendix G, General System (p. 88): Where the State requests the ability to convert “the image,” what specific type of image is it referring to?**

Examples may include a driver’s license, paper consent form, etc. that are scanned into the SD CIE.

- 56. Appendix G, General System (p. 88): Where the State requests the ability for staff to view all incoming and outgoing files, is it referring to referral attachments or another type of file?**

The State and its system administrators should have access to all data coming in and out of the SD CIE regardless of file type.

- 57. Appendix H Service Level Agreements (p. 111): Please confirm that Appendix H is for reference only and does not require completion.**

Yes. This is for informational purposes only.

- 58. General: In 2022, the South Dakota Department of Health, Office of Disease Prevention and Health Promotion solicited a RFP for the same services/solution. It appears to have been awarded to *previous vendor*.**

- a. Is this contract still active? If so, how do the services/solutions in this RFP differ from those in the last RFP?**

The previously awarded vendor is no longer contracting with the Department on this project.

- b. If not, can the Department provide an understanding of the conditions that led to that contract not being renewed or continued?**

There was a mutual agreement to terminate the contract between the vendor and State.

- c. **What lessons learned from that experience would the Department like to see different in this new RFP/resulting contract?**

Lessons learned have been incorporated into the requirements outlined in this RFP.

59. **1.2.3 Description of Components or Phases: Can the Department clarify whether the dates listed in the “Description of Components or Phases” are when the bulleted items are scheduled to begin or be completed?**

The dates are when the phases would begin.

60. **1.2.3 Description of Components or Phases: In *Vendor’s* experience, the provided time (i.e., four months) from contract execution to initial solution delivery is very short and leaves very little time for meaningful kick-off and requirements gathering. Is the Department open to extending the delivery timelines to ensure a more robust Phase IV roll out?**

The State understands the expected timeline is compressed. Because of the funding mechanism being utilized during the initial phases of this project, the solution must be in place within the timeframe allotted.

The State has already determined system requirements, which have been included within the RFP.

61. **1.2.3 Description of Components or Phases: Is Phase VI listed in the RFP supposed to be titled Phase V?**

Yes

62. **General: Are we expected to migrate historical data? If so, what’s the size and data type?**

The State may choose to migrate historical data from its current community health worker transportation program. The selected vendor will work with the State to determine if and what data will be included.

63. **General: What’s the anticipated volume of referrals to be made via the platform?**

The SD CIE does not currently have any active users. We anticipate approximately 55 service providers (partner organizations) with 285 end users utilizing the platform 1-year post product launch. Up to 2,500 referrals are anticipated during that time.

64. **General: Is there any particular grant/budget allocated for this project?**

The State is financing the SD CIE project through a federal award. There is not a pre-determined budget at this time. Please submit your budget based on the efforts it would take to meet all the State’s requirements.

**65. 1.2.2 Goals & Objective: Interoperability: Does that mean that multiple licensed or freely available assessments can be connected? Like the ASQ-3 tools?**

Yes

**66. 1.2.2 Goals & Objective: Functionality: Can the Department describe what it means by “entry points and public portals”?**

The State requires that there be multiple options available to sign into the platform such as support from multiple browsers.

The public portal will be the client facing piece of the platform and should be easily accessible to the client. The public portal does not refer to a public resource search, but rather a client-facing interface.

**67. Goals & Objective: Customizability: Can the Department confirm that it desires the ability for internal resources to modify the solution? If so, what are the skillsets of those resources?**

Yes, the State should be able to make minor modifications to the State’s instance such as changing the wording of a specific question, adding new service providers, adding additional assessments, etc. Individuals modifying the solution will have the appropriate skillsets and background necessary.

**68. 1.2.3 Description of Components or Phases: Can the State describe project phases III - VI in detail.**

**a. What does the State mean by CIE Global Workflows in Phase III and Onboard Pilot Community-Based Providers?**

Global workflow refers to the general client intake process, assessing for social determinant of health needs and providing referrals as appropriate.

Onboarding pilot community-based providers refers to having our initial users log in to the SD CIE system and begin using the platform.

**b. How many providers are we planning to onboard and what workflows are they looking to do in this Phase?**

There are 15 organizations within two communities that will serve as the State’s pilot users. They will utilize the global workflow during this phase.

- c. In Phase IV, the State describes design feedback sprints, does the State expect to customize products based on the feedback of providers?

Yes

**69. 1.2.3 Description of Components or Phases: For 211 Registry Integration, does the State have a technical integration document to facilitate a smooth integration?**

The Helpline Center resource database is accessed through the 211 National Data Platform using REST APIs. [Home - Microsoft Azure API Management - developer portal \(211.org\)](#)

**70. Appendix D – Software Capability Checklist: To the extent that health plans have already invested in closed-loop referral systems, is it the State’s intent for them to leverage the CIE as a centralized closed-loop referral system, or for the CIE to integrate data from existing health plan systems?**

The SD CIE will be a closed-loop referral system. It is not exclusive to healthcare and many users will not have existing records or systems on which to draw data. However, many potential partners have requested bi-directional information exchange with their technology systems. Vendors able to accommodate this request through integrations will be prioritized during the selection process.

**71. Appendix D – Software Capability Checklist: Can the State provide an approximate estimation of the number of providers and community partners that would leverage the system?**

We anticipate approximately 55 service providers (partner organizations) with 285 end users utilizing the platform 1-year post product launch. This number is anticipated to grow with continued availability of the platform.

**72. Appendix D – Software Capability Checklist: The “Project Deliverables/Approach/Methodology” section says offerors are required to include a “test system.” Should this be interpreted as UAT?**

Yes

**73. Appendix D – Software Capability Checklist: Can the State provide more details around the desired functionality? Is it the State’s intention that the CIE determine eligibility for systems, interface with the state’s eligibility system, or something else?**

Appendix D allows vendors to denote whether each functionality is a standard, out-of-the box feature of their product or whether it would need to be added through a customization,

interface, or would not be available. Overall system functionality is outlined in Appendix E with requirements detailed in Appendix F and G.

**74. Appendix D – Software Capability Checklist: Can the State share how many EHRs the system is intended to interface with?**

There are three major health systems within SD and a handful of smaller independent facilities. The State is in the process of recruiting potential partners for the SD CIE. Interfaces will be agreed upon by the State and selected vendor.

**75. Appendix D – Software Capability Checklist: Can the State share information about SD’s HIE Community Master Person Index? Who is the current vendor? Are they able to communicate via API?**

The HIE is powered by Health Catalyst and uses their Community Master Patient Index (CMPI) solution. The CMPI is currently not able to communicate via API. The HIE team will work with the selected vendor to determine the best communication method.

**76. Appendix E –Component Narrative: Can the State define the personas that would be considered “CIE users.” Is it limited to caseworkers at participating organizations, or will it also include the list of CIE network partners, including social service providers, human service providers, health providers, and government agencies?**

CIE users are all the individual professionals logging into the SD CIE platform, regardless of organizational type. All users will be employed by a participating organization.

**77. Appendix E –Component Narrative: Is the consent limited to the sharing of information captured by the CIE? Does the state’s HIE also capture consent, and, if so, does the State envision a shared consent process and form?**

The HIE is operated separately from the SD CIE and has a separate consent process. The SD CIE consent will apply only to the SD CIE system, allowing for capturing and sharing of data within the SD CIE.

**78. Appendix G –Technical Requirements: Is it the State’s intention that vendors provide narrative responses to the Functional and Technical Requirements listed in Appendix F & G respectively? Or are the requirements only for our understanding?**

The outlined requirements are for the vendor’s understanding. These components review the State’s expectations for the selected vendor’s product.

- 79. Appendix G –Technical Requirements: Does this requirement imply a dual-active architecture? If so, this requires provisioning twice the infrastructure. To prevent excessive costs and minimize the risk of exceeding approved budgets, would the State consider extending the recovery point objective to 4 hours?**

The State requires the selected vendor have a Disaster Recovery Plan in place, so no data is lost in the instance of system failure or down time. The included Service Level Agreements lay out response time. If a vendor is unable to meet the outlined SLAs, please note this within your proposal.

- 80. Appendix G –Technical: Can the State provide a list of data collection systems that the CIE will be required to interface with?**

The State would like the opportunity to combine various data sets for further population health data analysis. Data collection systems have not yet been determined. Interfaces will be agreed upon by the State and selected vendor.

- 81. Appendix G –Technical Requirements: Who are the intended users of the “mobile application.” The requirements state that it should be used to “collect services and referrals,” which implies a case manager-like resource, but other requirements seem to imply that it will also be available to individuals being referred. Does this imply two different applications and workflows?**

The intent is that the platform be mobile friendly, so it is easily navigated by the user on various technology devices including a computer, tablet, or mobile phone. Functionality should remain the same regardless of device. An example when the platform would need to be mobile friendly is when a community health worker would go to a client’s home and need to utilize a tablet to document a referral.

- 82. Does SD-DOH have a budget in mind for the CIE?**

There is not a pre-determined budget currently. Please submit your budget based on the efforts it would take to meet all the State’s requirements.

- 83. Does SD-DOH have a set of standardized SDOH assessment and referral formats based on prior work on the CIE (such as PRAPARE, Risks, and Experiences, Your Current Life Situation, Accountable Health Communities, etc.) or are partner organizations allowed to use any evidence-based assessment of their choosing?**

The State requires the selected vendor to allow for built in social determinates of health screening tools. The following have been selected by the State: [PRAPARE](#) (Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences, [Your Current Life Situation](#), [Accountable Health Communities](#), and [Patient Health Questionnaire-9](#). The State may



require additional tools be incorporated at a later date based on feedback received from partners. Additional required screenings will be agreed upon by the State and selected vendor.

**84. Could you describe the current interfaces, APIs, etc. that exist for the HelpLine resource center and directories?**

The Helpline Center resource database is accessed through the 211 National Data Platform using REST APIs. Home - Microsoft Azure API Management - developer portal (211.org).

**85. Does SD-DOH have a consent framework in mind already and standardized consent documentation?**

The State intends to utilize an opt-in consent model where clients will not be entered into the SD CIE without providing authorization. The State is currently finalizing legal framework components including consent documentation. A requirement of the State is that consent can be obtained and housed within the selected vendor's proposed solution.

**86. What are the largest current Social Determinants of Health and referral platforms operating in South Dakota?**

The State does not officially monitor social determinates of health referral platforms in use.

**87. Could you list some of the largest potential community partners in South Dakota and what if any existing case/care management solution they use?**

The largest potential partners would be SD's three major health systems and Department of Social Services Medicaid. The State is in the process of recruiting potential partners and is also in the process of assessing current solutions in use.

**88. Are there existing technology solutions developed by the *previous vendor* team that will need to be included in the proposed CIE solution?**

No

**89. What has changed between the 2022 RFP #2782, Unified IT Case Management System for IDD Services, and this one? Why was a vendor not selected for that one?**

This is a different RFP for a different system and functionality. This functionality focuses on developing a community information exchange.

**90. What is the covered population count?**

South Dakota has approximately 900,000 residents. All residents will be eligible for participation within the SD CIE. However, up to 2,500 referrals are anticipated 1-year post product launch.

- 91. Section 1.2.2, “the SDDOH expects that the vendor will make available/expose software services and publish documentation for those software services that would enable third party developers to interface other business applications.” Please elaborate on possible use cases for these third-party developers interfacing with the system and clarify whether the expectation is that the third parties would access the system itself or just the APIs.**

Interfaces via API will be expected. Examples of possible interfaces include those with electronic medical records and the health information exchange.

- 92. Section 1.2.2 refers to “limited health information.” We interpret the scope of the health information to be stored and shared by the solution to be limited to SDOH/Gravity Z Codes (ICD-10), which along with assessment and program data would constitute the “Patient Record.” Please confirm this assumption.**

Correct. For initial implementation of the SD CIE, there will likely not be health information included, however, the SD CIE will assess the need for this with continued partner use and may incorporate continuity of care documents or other clinical data in the future.

- 93. If additional health information would be included in the patient record to be stored in the solution, please expand on what type of health data would be used, and in what formats.**

For initial implementation of the SD CIE, there will likely not be health information included, however, the SD CIE will assess the need for this with continued partner use and may incorporate continuity of care documents or other clinical data in the future. Format for such information would be agreed upon by the State, data source, and selected vendor.

- 94. Section 1.2.3, Description of Components or Phases. Please clarify whether the dates shown for Phases III, IV, and VI are expected start or end dates. Also, please clarify Phase V.**

The dates attached to each phase are anticipated start dates. Phase V will consist of enrolling all interested organizations and their end users to the system that were not part of the pilot. This phase will continue into the next contract period and will be completed by the State.

- 95. Please provide an editable version of Appendix B and D so that we may more easily respond to the requirements.**

See additional attachments.