

**STATE OF CONNECTICUT
OFFICE OF HEALTH STRATEGY**

**REQUEST FOR PROPOSAL (RFP)
FOR
DATA ANALYTIC SERVICES FOR COST GROWTH BENCHMARK AND PRIMARY CARE TARGET INITIATIVE
AND OHS ANALYTIC NEEDS**

FOURTH Addendum

RELEASE DATE – July 16, 2021

The Office of Health Strategy's official responses to questions submitted as of 5:00 PM, June 28, 2021:

1. **Question:** Is this RFP a replacement of UConn Analytics and Information Management Solutions (AIMS) Core Data Analytics Solution (CDAS) which OHS contracted to have developed using both State Innovation Model (SIM) and HITECH grant funds? If so, AIMS was provided termination due to OHS not having the funds to sustain CDAS, so what funds does OHS now have to fund a new 5- year contract with possible two 1-year extensions?

Answer: This question is outside the scope of the RFP.

2. **Question:** Could the Office please clarify how the required deliverables listed in the RFP differ from what the State already has available through UConn AIMS CDAS, as the RFP states that Respondents will be required to develop analytical tools for work including "tracking trends," "statistical modeling," "ad hoc analyses," and "web-based reports and dashboards."?

Answer: This question is outside the scope of the RFP.

3. **Question:** Section 3 mentions OHS's "current analytic vendor." Could you please specify which vendor this is, as OHS has just terminated UConn AIMS for not having the funding to sustain CDAS in which they spent over \$20m over the last 4 years to develop?

Answer: The consultants are Bailit Health, and they have sub-contracted with Mathematica for analytics.

4. **Question:** OHS had asked UConn AIMS to provide a statement of work for the CHAI project and was told there was \$20k of funding to support the work efforts that would well exceed that many times over. What is the funding amount to support the specific CHAI project focus?

Answer: This question is outside the scope of the RFP.

5. **Question:** Section 3.1.9 states that Respondents would be responsible for "Ad hoc analyses to support other OHS regulatory, policy, and program objectives and decision making as described above (e.g., COVID impact on health care services utilization and spending." Is it OHS' thought that all these ad-hoc services are to be covered in the cost proposal, and if so, what assumptions should be used so OHS can compare apples to apples across all Respondents?

Answer: Yes, it is expected that the respondent will include the provision of these ad-hoc services are part of their proposal. For examples of ad hoc reports, please see the answer to Question 16 from the Third Addendum.

6. **Question:** For public facing analytics related to healthcare organizations such as hospitals, what is the Office’s policy for soliciting and implementing feedback, especially as it relates to any data quality issues/concerns with the APCD or other OHS-managed data sources?

Answer: This question is outside the scope of the RFP.

7. **Question:** OHS has both currently and previously contracted with analytics vendors, such as UConn AIMS and Mathematica, to complete aspects of the deliverables listed in this RFP. Can OHS please explain why those projects/contracts were terminated and how the agency expects to improve these work efforts in future?

Answer: This question is outside the scope of the RFP.

8. **Question:** Section 4.4 states that OHS “reserves the right to terminate the Contract for any reason,” with the final clause emphasized through red text. What possible reasons does the State foresee that would require such termination? Given the enormity of this work, what protections will the state offer to the selected Respondent to cover annual subscriptions and licensing costs?

Answer: These provisions are the state’s standard contracting language and, as such, are non-negotiable. Respondents are expected to include all known or anticipated costs in their proposal.

9. **Question:** Who prepared this RFP?

Answer: This question is outside the scope of the RFP.

10. **Question:** How does this RFP align with the state’s 5-year Health IT plan that CedarBridge contractors are putting together?

Answer: This question is outside the scope of the RFP.

11. **Question:** During the past year, OHS had asked to develop a Statement of Work for the Cost Estimator project and one of the requirements that OHS was mandating was that the data analytics solution was already HITRUST certified. Has that requirement changed, and if so, please explain why the requirement is no longer required?

Answer: This question is outside the scope of the RFP.

12. **Question:** Why does the RFP require Azure cloud-based solutions, in particular? Will the Office consider Respondents with solutions based in other cloud environments, such as AWS?

Answer: The RFP requires the development of an Azure cloud-based data analytic solution, as that is the environment the state utilizes, but the primary focus of the project is data analytic services of complex data sets.

13. **Question:** The RFP states that the APCD data extract would be provided. Can the Office ensure that the data extract provided by OHS will not include any person identifiable data, as has been in the past extracts provided by OnPoint, the OHS APCD vendor?

Answer: This question is outside the scope of the RFP.

14. **Question:** Will the selected Respondent be expected to go through the existing CT APCD Data Release process? If so, will OHS aid or support that undertaking in any way?

Answer: The selected respondent will receive all data necessary and available for the project from OHS.

15. **Question:** Section 2.2.E states that OHS “expects analyses to be stratified by race and ethnicity to address longstanding disparities.” The Connecticut APCD data has a dearth of race/ethnicity information. How does OHS intend to manage this expectation and what support can Respondents expect from OHS? Similarly, how does OHS expect Respondents to integrate ‘upstream’ Social Determinants of Health (SDOH) factors into its analysis of health care cost growth?

Answer: OHS expects the selected respondent to stratify based on data collected and other sources, such as census data, but also that the respondent would propose realistic solutions to such challenges as an integral element of its expertise in this area.

16. **Question:** Section 3.1 states that Respondents will use data including the Connecticut APCD, “hospital patient and financial data, and other data such as US Census and Centers for Medicare and Medicaid Services.” This section elicits several questions:

a. **Question:** How will OHS support Respondents in obtaining data from hospitals?

Answer: OHS will supply the necessary data.

b. **Question:** What does “hospital patient” data mean? Does this include information from provider EHR systems? Does it include PHI or PII? Does “hospital” preclude smaller health centers and individual providers? These questions are important, as the data required will determine the requirements for the analytic team/solution.

Answer: Hospital patient data includes inpatient discharges and outpatient surgery encounter PHI data. OHS is authorized by CT General Statutes Section 19a-654 to collect this data. The hospital patient data is administrative billing data hospitals submit directly to OHS and could include information from their EHR. The PHI outpatient data includes encounter data from hospital owned outpatient surgery centers. The data does not include data from smaller health centers.

17. **Question:** Section 3.1.1 states that Respondents will be responsible for “ongoing monitoring” of health care cost and utilization trends. This implies that Respondents would be receiving data at regular or semi-regular intervals. Does this include the aforementioned “hospital data”?

Answer: Yes, if OHS determines it is necessary for the project.

18. **Question:** If so, would Respondents themselves be responsible for coordinating data loads with the hospitals? This information is important, as it represents a large administrative/business burden that would bear on budgeting/allocation.

Answer: OHS already collects this data and will make it available for the project through appropriate data use agreements.

19. **Question:** Section 3.1.5 states that Respondents will be responsible for “Statistical modeling of healthcare policy initiatives using the Connecticut Healthcare Affordability Index (CHAI).” What does this mean? Are these projection analyses? Cost-benefit or -effectiveness analyses? These kinds of analyses require specific skillsets that not all analytic groups/solutions are prepared to support. It is important to understand the requirements clearly.

Answer: Section B “Deliverables” of the Scope of Services on pages 1-2 of the RFP requires the selected respondent to develop analytic tools, including but not limited to statistical modeling. The respondent is also expected to leverage its subject matter expertise to inform the project’s analytic needs and propose options to achieve the project goals.

20. **Question:** Section 3.1.6 states, “Reporting on the OHS’ quality benchmark.” What does ‘reporting’ mean? Are Respondents expected to provide the quality measurement themselves, such as actually calculating eQMs or HEDIS measures? Or will Respondents simply be creating dashboards or other visualizations of the measurements generated by another group? Which quality measures will be included in this RFP scope? Once again, it is important to clarify, as quality measure calculations require a specific skillset that not all groups/solutions will support.

Answer: The quality measures were determined by the Quality Council, an advisory board under OHS. The core measure set selected can be found here: <https://portal.ct.gov/OHS/Pages/Quality-Council/Core-Measure-Set>. Subsequent to the updating of the core measure set, the Council will select a set of quality benchmarks that may include the core measures and population health measures that would be reported for the purposes of Executive Order No. 5 and applied similarly to the cost growth benchmark and primary care target, at the state, market, payer and provider organization levels. Respondents will be creating dashboards and visualizations based on the results of these measures.

21. **Question:** Section 3.1.8 states, “Creating standard reports and interactive dashboards for analytic results for web-posting.” What does ‘web-posting’ mean? Are Respondents responsible for developing, for example, the JavaScript framework for hosting a dashboard? Are they responsible for hosting the webpages on which these reports/dashboards live? Are they responsible for monitoring webpage usage analytics?

Answer: Web-posting refers to posting reports and dashboards to a web portal for public viewing. OHS will host the dashboard and/or publicly available resources such as Tableau Public. OHS will monitor webpage usage analytics.

22. **Question:** Section 3.2 states that Respondents are expected broadly to provide dental cost/utilization analyses. The Connecticut APCD does not contain dental claims. Could you please advise what dental claims data will be used to support these analyses?

Answer: Dental claims are not currently part of the APCD, but OHS is working on having these claims included in data submissions. In the event that dental claims are not available, this expectation may be modified.

23. **Question:** Section 3.4 mentions several work efforts not previously detailed prior in the RFP, including “Cost estimator/health services pricing tool” and “COVID claims monitoring.” Could you please provide additional information on these projects, their scope and requirements, and how they tie to the Cost Growth Benchmark?

Answer: Section B “Deliverables” of the Scope of Services on pages 1-2 of the RFP lists “Ad hoc analyses to support other OHS data use strategy for regulatory, policy, and program objectives and decision making” as a key deliverable. The work efforts detailed above represent examples of these ad hoc work efforts.

24. **Question:** Further questions related to the scope:

a. **Question:** How many users are expected for this solution?

Answer: See the Second Addendum, Section I, question 1.

b. **Question:** What kind of users (personas?) are expected to use this solution? What are their expected skill levels?

Answer: The successful respondent will provide knowledge transfer to OHS analysts to enable them to independently monitor healthcare cost and performance trends. OHS staff will be new to using Azure cloud- based solutions.

c. **Question:** Section 3.2.1.B states that the APCD contains an average of 37 million claim records per year. What does this translate to in terms of storage requirements?

Answer: See the Second Addendum, Section III, question 6.

d. **Question:** Does the APCD data include eligibility data and does that align with medical/pharmacy/dental claims?

Answer: The CT APCD includes medical and pharmacy coverage eligibility data. Claims in the APCD are for those covered lives; some covered lives may have no claims.

e. **Question:** Will respondents be required to stratify data by clinical risk in addition to social risk factors, as was done previously into high, medium and low risk scores?

Answer: OHS expects the respondent to utilize nationally acceptable clinical risk scoring methodology, customized to meet our needs.

f. **Question:** How exactly will APCD data be shared with vendor(s)? In the past, direct access to the APCD OHS enclave was prohibited by OnPoint, CT’s APCD vendor, and therefore OnPoint had to extract the data and put it into an OnPoint VM from which it was copied into a secure data lake. As one can imagine, this was a time and effort-intensive process for all parties.

Answer: OHS administers the APCD data and will come to a mutually acceptable secure and efficient method for sharing the data with the successful respondent.

g. **Question:** Will OHS provide a data dictionary for the APCD and will it be complete and align with the provided data extract(s)?

Answer: Any data extracts OHS provides will be accompanied by an appropriate data dictionary.

- h. **Question:** Will APCD data include all claim-line details?

Answer: Decisions about what claim lines OHS will provide to the respondent will align with the data use strategy described in the RFP scope of work.

- i. **Question:** Will all data structures be consistent across tables within the APCD? In what formats will the data arrive?

Answer: APCD data extract structure and the accompanying data dictionary OHS will provide to the successful respondent will be aligned. OHS will require that any data restructuring the successful respondent makes must ensure continued data integrity. Shared files may be pipe delimited password protected zipped files.

25. **Question:** The Key Outputs and Timeline Exhibit 1 table listed in Section 3.4 elicits several questions:

- a. **Question:** Could the Office please define what deliverables are, so that costs could be associated per deliverable? The RFP seems to conflate deliverables, milestones, and work products. Could the Office provide definitions for each concept, as it relates to the work in this RFP?

Answer: The deliverables include the standard reports as described in the RFP on page 13.

- b. **Question:** Could the Office please describe the deliverable review process? This is important, as the RFP states in Attachment C that the 10% withhold is tied to deliverables.

Answer: OHS will review all submitted deliverables to determine if they satisfy the applicable key milestone listed in section 3.4 in the RFP.

- c. **Question:** Key Milestone #1, and others, list a report. Are these reports considered deliverables? What is the Office's expectation for these reports? Is there an expected page length for each report? An expected number of visuals or other graphics included?

Answer: The deliverables include the standard reports as described in the RFP on page 13. An example of visuals and graphics are on pages 15-16 of the RFP. The expected page length and number of visuals would be determined by the data analysis.

- d. **Question:** Key Milestones #2 lists a "cloud-based Azure solution". This is not a Milestone, but a work product.

- i. **Question:** Could the Office please provide a more detailed timeline? Where does data extraction and loading fit into the timeline for this?

Answer: Stated on page 17 of the RFP, 6 –8 months in the first year of the contract.

- ii. **Question:** This is not a fixed cost; if implemented correctly, this component would be pay-for-use, as actuals could vary based (scale up, down) based on need over the course of the project period.

Answer: The respondent should include in their proposal any such factors that could impact their overall proposal.

- e. **Question:** What does Key Milestone #7, "Update and maintain statistical modeling of healthcare policy initiatives using the CT Healthcare Affordability Index (CHAI) with the assistance of OHS and consultants" mean? What is the deliverable(s) for this milestone?

Answer: See the Second Addendum, Section II, questions 23-24.

- f. **Question:** All Key Milestones after #7 are not numbered. Are these items still Key Milestones?

Answer: Yes.

26. **Question:** Could you please provide sample contracting language? Is language in the contract negotiable?

Answer: Standard State approved contract terms are available at <https://portal.ct.gov/OPM/Fin-POS/Standards/POS-Standard-Contract-Part-II>.

27. **Question:** Could you please specify if this work can be performed offshore? Can it be performed outside the State of Connecticut, generally?

Answer: Yes.

28. **Question:** How do you want it documented that the Respondent will be compliant in good faith to Section 32-9e of the Connecticut General Statutes, superseded by Section 4a-60g, as detailed in Section 5.2.II of the RFP?

Answer: Small, Minority or Women's Business Enterprise: Section 32-9e of the Connecticut General Statutes, superseded by Section 4a-60g sets forth the requirements of each executive branch agency relative to the Connecticut Small Business Set-Aside program. Pursuant to that statute, twenty-five (25%) of the average total of all contracts let for each of the three previous fiscal years must be set aside. The OHS requires that the resultant Contractor make a "good-faith effort" to set aside a portion of this contract for a small, minority or women's business enterprise as a subcontractor. Such subcontractors may supply goods or services. Prospective Respondents may obtain a list of bidders certified to participate in the Set-Aside program by visiting the Department of Administrative Services website.

29. **Question:** What level of detail is the Office expecting from a 3-page Project Narrative?

Answer: Potential contractors must respond to the expected requirements in the narrative. It is up to the potential contractor to determine how best to respond to the requirements.

30. **Question:** Are Respondents expected to list subcontractor qualifications (e.g., resumes) in the Qualification and Project Management section, if subcontractors are to be used?

Answer: OHS requires subcontractor qualifications as submission evaluation involves assessing demonstrated ability to execute the project.

31. **Question:** For References, are respondents expect to provide personal references or qualification references? How far back should these references go?

Answer: It is up to the respondent to determine which references are appropriate to meet the requirements listed in subsection V of section 5.2 of the RFP. Submission evaluation includes demonstrated ability to execute similar projects.

32. **Question:** For Personnel, are Respondents expected to provide just Project Management personnel, or delivery Personnel as well?

Answer: Respondents must provide all project personnel assigned to the contract.

33. **Question:** Section 6.2.11 pertains to “Key Personnel.” Could the Office please provide a definition of ‘key personnel’ and how Respondents are expected to detail the key personnel associated with their proposal?

Answer: Respondents are expected to, as an integral part of their proposal, identify all personnel intended to work on the project, which includes the identification of those positions the respondent deems integral to its proposal. OHS is not in a position to identify or classify respondent personnel as such.

34. **Question:** What level of detail is required for OHS to approve a staff change? In other words, is staff change bringing new staff on or switching staff out? Is this a fixed price, time-and-materials contract, or hybrid? If it is a fixed-rate contract, why is hourly-rate information required? If hybrid, please clarify.

Answer: OHS must approve all staff changes, including bringing new staff on or switching staff out. See the answer to the Second Addendum, Section VI, Question 17.

35. **Question:** Section 5.2.VI, “Show us your solution,” elicits several questions:

- a. **Question:** The RFP states that selected Respondents will have one session of approximately three hours to demonstrate their solution and how it will meet the requirements set forth in the scope. A single, three-hour demonstration seems insufficient for demonstrating the enormous range of capabilities required by the RFP. Will OHS plan for ancillary demonstration sessions if needed?

Answer: Each respondent will have the same opportunities to present their proposal and, if OHS determines additional time is appropriate, all respondents will be offered equal opportunities.

- b. **Question:** This section does not detail who will be present for these demonstrations. Will OHS contractors be present for the demonstration, and if so, how will you ensure that they are objective and not subjective as they have been in the past? If so, who will be included? If OHS state staff are present, how will OHS ensure that the demonstration audience includes individuals with the technical expertise needed to properly evaluate the solutions?

Answer: Respondents will present their proposals only to the Project Review Committee.

- c. **Question:** Will there be a standardized rubric or assessment criteria made available for the demonstrations to ensure that these demonstrations are assessed objectively? How will this be done, considering the RFP states OHS “encourages creativity and insights on the anticipated proposal”?

Answer: All completed proposals received will be evaluated using the same objective criteria. This does not preclude a respondent from developing creative solutions that remain consistent with the project goals.

- d. **Question:** Could you please specify what kinds of access will be required for the solution prototype?

Answer: The solution prototype should demonstrate a combination of technology, statistical data disclosure limiting techniques, and analytic capabilities that ensure data security, confidentiality, and integrity, as well as trustworthy analytic results. Presenter(s) of a prototype should demonstrate the prototype's capabilities and may provide the Project Review Committee with online access upon request.

- e. **Question:** The wording of this RFP would indicate that OHS expects Respondents to have already created, tested, and deployed (at least in a development environment) a usable solution, in some form. Please confirm that development processes would not be funded under the terms of this RFP.

Answer: OHS' expectation is that respondents will have demonstrated experience developing a usable solution to detail as part of their submission. This work is not covered under the RFP or resulting contract.

36. **Question:** Can Respondents provide a redacted version of the proposal, as any proposal submitted can be requested under the FOIA?

Answer: No.

37. **Question:** Could the Office please define "Business Section," as included in Section 6.2.5.4?

Answer: The reference to Business Section is an error and refers to Section 5.2 Application Content.

38. **Question:** In Section 6.2.5.12, the RFP states that OHS has the right to "contract for all or any portion of the scope of work or tasks contained within this RFP, with one or more Respondents." If a Respondent is selected for a portion of this Scope, will that respondent have the ability to return and adjust the proposed solution and associated costs?

Answer: OHS may offer one or more portions of the scope of work to one or more respondents. If so, the respondent would be offered only that portion of the scope consistent with the respondent's proposal. Revisions may be negotiated during the contracting process.

39. **Question:** Section 6.2.5.17 states, "Reopen the bidding process if the SIM determines that all Responses are unacceptable." Could the Office please clarify what "the SIM" means?

Answer: The reference to SIM is in error. The reference should be to OHS.

40. **Question:** Can existing OHS commercial contractors bid on this RFP?

Answer: Yes.

41. **Question:** Section 6.2.8.1.c states “No attempt has been made or will be made by the Respondent to induce any other person or firm to submit or not to submit a Response for the purpose of restricting competition.” Could the Office please provide clarification on this statement? Communication between vendors is common in business operations and it is unclear on what legal grounds OHS would stake this requirement?

Answer: Section 6.2.8.1.c does not state that vendors cannot communicate, but that a Respondent, by submitting a proposal for this RFP, understands that with such submission they are also certifying that they have not engaged in anti-competitive conduct detailed in said section. Such certification that they have not engaged in such conduct is a required element of a complete proposal.

42. **Question:** Section 6.2.8.3 states, “The Respondent agrees to obtain prior written consent and approval from the OHS for press releases that relate in any manner to this RFP or any resulting contract.” Can the Office confirm if it, the Office, will obtain prior written consent and approval from the accepted Respondent prior to release a press release?

Answer: Standard contract terms require that all communications concerning OHS driven projects must be reviewed and approved by OHS.

43. **Question:** Section 6.2.11 pertains to “Key Personnel.” Could the Office please provide a definition of ‘key personnel’ and how Respondents are expected to detail the key personnel associated with their proposal?

Answer: See response to question 33.

44. **Question:** Section 6.2.12, what is the current availability of funds and what is that funding source contingent upon? This is important, as there will be fixed costs associated with this project that, should the project be terminated, would need to be paid out in full. Can the Office confirm that it will guarantee funding for incurred costs in the case of early termination?

Answer: The selected respondent(s) will contract with OHS to perform agreed upon work, within specific timeframes, with clear tasks and deliverables. Payment will be based on work done, deliverables received, and proper invoicing for staff time associated with work on said tasks/deliverables. All known costs should be included in a respondent’s proposal.

45. **Question:** It is also unclear how to break the project costs down by DDI and Operations and Maintenance; can the Office please clarify their expectations here?

Answer: This question is outside the scope of the RFP.

46. **Question:** The Assessment table as listed under Section 6 elicits several questions:

a. **Question:** What does ‘required’ mean?

Answer: It means it is mandatory.

b. **Question:** Based on the table, no points are deducted for respondents who do not provide The Proposal Face Sheet, Transmittal Letter, Project Aspect, and Standard Forms? Or are Respondents who fail to provide those components not considered for award?

Answer: Respondents who fail to provide those components will have their proposal deemed incomplete and will be rejected.

47. **Question:** What are the requirements for the resources to ‘travel’? Is it acceptable to provide a cost estimation for travel costs? What is the lead time for requesting on-site support? This impacts the cost of travel.

Answer: All anticipated costs associated with a respondent’s proposal should be included in detail.

48. **Question:** What does a one-time cost for a cloud-environment mean, exactly?

Answer: Identify, if applicable, any costs that may occur once and do not reoccur during the length of the contract.

49. **Question:** Attachment C states that “Payment shall be based on actual costs incurred not to exceed the Contract maximum for each budget category, and for the Contract overall.” What is the Contract maximum?

Answer: At this time, the total budget is not being made available. In the event that no proposal is within the Project budget, additional review and consideration of the RFP may be necessary.

50. **Question:** Attachment C states, “in the budget request, awardees should distinguish between activities that will be funded under this agreement and activities funded with other sources.” What does ‘other activities’ mean? Why would Respondents need to include other work efforts in their applications? Are Respondents required to disclose and submit a full enterprise budget, beyond the specifics of the work efforts under the RFP, and why?

Answer: All anticipated costs associated with a respondent’s proposal should be included in detail. The reference to “other sources” is in error and refers to a previous initiative.

51. **Question:** Attachment C states: “The Respondent may wish to request funding for personnel from their organization for the activities under this RFP. The Respondent may, alternatively, decide to request the funding for consulting services.” Is the Office looking for the Respondents to obtain funding outside of OHS to fund these work efforts? Please clarify this statement.

Answer: This statement was included in error and not applicable to this RFP. This is a time and materials project, as specified in the Second Addendum, Section VI, Question 17.

52. **Question:** Attachment C requires Respondents to provide a Fringe and an Indirect rate. Could the Office please provide definitions for these? A state agency may understand what fringe is, but commercial vendors may not; additionally, commercial vendors may not want to provide their margin rate.

Answer: Information about fringe and indirect costs may be found in Attachment C, Subsection b and at <https://www.osc.ct.gov/manuals/IndirectCosts/manual.htm>.

53. **Question:** Attachment C requests annual salary. If a commercial contractor is responding to this, is the Office expecting salary information?

Answer: See the Second Addendum, Section VI, question 11.

54. **Question:** Attachment C details the requirements for Consultants; could the Office please describe the difference between Consultants and Contractors or Subcontractors?

Answer: These terms are used interchangeably throughout.

55. **Question:** For Attachment C, where should Respondents categorize technology such as software and subscription costs? What about technical hardware equipment?

Answer: A respondent should include as much information and detail as it deems necessary to detail its proposal. Any such costs may be submitted in the format specified in Attachment C, Section D which requires a description of the item, cost, frequency, and any other material information necessary to detail the proposal.