

New York State Department of Health
Office of Professional Medical Conduct

Requests for Proposals No. 16342
New York State Physician Profile
Response to Written Questions

December 9, 2016

Amended December 20, 2016

1. Can you please provide fillable forms where applicable?

Answer: Fillable forms have been provided on the website.

2. Is there any funding expectation each year for this contract? If so, what is the funding range?

Answer: No. The cost proposal of each bidder will be evaluated in accordance with the RFP, Section 8.0 Method of Award.

3. Can startup companies bid for this project? Or as a subcontractor?

Answer: Bidders who meet the minimum qualifications as described in Section 4.0, page 16 of the RFP are considered eligible.

4. Will the project continue after the 4.5 years period?

Answer: The current legislation that requires the Physician Profile does not specify an end date. Legislation is subject to change during the contract term. Prospective bidders are encouraged to visit the Department's web site to keep informed of legislative updates. Available:

https://www.health.ny.gov/health_care/consumer_information/physician_profile/

5. If a change in applicable State or Federal laws, regulations, policies, or procedures results in a change of scope that materially affects the cost of services being provided by the proposing vendor, will that resulting change in scope be handled through a modification or amendment of the contract?

Answer: This would depend on the scope of the change. Refer to section 3.1.1(d) of the RFP. The bid provides some flexibility with the fully loaded change hours, however any changes required beyond that would have to be evaluated on a case by case basis.

6. It is assumed that these services are being provided by an organization presently. What is the name of this organization?

Answer: Maximus Health Services, Inc.

7. Will the current contractor be bidding on this proposal?

Answer: This question does not relate to the scope of work or proposal requirements of the RFP.

8. Why has the state not chosen to extend their existing contract with the existing vendor?

Answer: The current contract has been in place since 5/1/2010 and has been extended several times. New York State agencies must, however, procure commodities, services, and technology in accordance with Article 11 of the New York State Finance Law to protect the interests of the state and its taxpayers and promote fairness in contracting with the business community. Furthermore, the procurement process ensures a regular and critical review of the efficiency of service contracts.

9. Is the state bidding this out since the existing vendor services have been of poor quality?

Answer: No.

10. Is the existing vendor a NY company?

Answer: Yes.

11. What is the current annual value of this contract (What is the existing vendor being paid for these services)?

Answer: Approximately \$1.1M annually.

12. How much of this is for call center support?

Answer: The details of the current contract pricing may be proprietary. Bidders can request a copy of the contract from the Department's Records Access Office by sending a request email to foil@health.ny.gov.

13. How much of this is for other business process support? (As listed in Appendix C)

Answer: The details of the current contract pricing may be proprietary. Bidders can request a copy of the contract from the Department's Records Access Office by sending a request email to foil@health.ny.gov.

14. How much of this is for website hosting? How much of this is for the website software support?

Answer: The details of the current contract pricing may be proprietary. Bidders can request a copy of the contract from the Department's Records Access Office by sending a request email to foil@health.ny.gov .

15. What was the first year cost for the existing vendor including transition or development cost?

Answer: The earliest contract for this service which DOH has retained is the contract that was in place from May 1, 2004 – April 30, 2010. The annual value of that contract was approximately \$1.5M.

16. How much is the existing vendor sub-contracting to MWBE? Are they meeting the NY States mandate?

Answer: This question does not relate to the scope of work or proposal requirements of the RFP.

17. Does NY State have any preference on whether the existing application is used or a new application is developed?

Answer: No.

18. If the existing vendor is bidding this work, they have an unfair advantage since they would not have to bear the cost of learning about the existing application or developing a new application? If this is true, what is the point of NY State bidding this out?

Answer: The RFP is intended to make explicit the State's needs and current resources with respect to the Physician Profile. Bidders can propose to take over the solutions that have already been purchased by DOH or to propose their own. The Department is also providing up to six months for a new vendor to implement their proposed solution. In addition to these strategies, to level the playing field for all bidders, please see the response to question 20 for the current vendor's transition period responsibilities.

19. What is the "Departments Health Commerce Systems (HCS)"? Is our solution expected to work within HCS? More details about HCS needs to be provided for bid respondents to ensure their application can work within HCS?

Answer: The Health Commerce System (HCS) has been developed as a secure internet portal for collecting and distributing data among state entities, health facilities/providers and partners. The HCS provides the authentication and authorization capabilities required for securing externally accessed applications. While the main Physicians Profile site will not require secure access, the site to allow physicians to update their information does.

Options for utilizing the HCS include hosting the secure application within the HCS environment or utilizing the HCS for authentication and authorization and integrating with an offsite application through an ITS approved solution. If the HCS is not leveraged then a detailed solution must be presented that will provide the appropriate security specifically detailing how authentication and authorization will be designed and implemented.

20. Section 3.1.6(m): It is assumed that the existing vendor would provide the same to the new vendor?

Answer: The 2009 RFP for the exiting Physician Profile contract, on which the existing vendor bid, is publically available at:

<http://health.ny.gov/funding/rfp/inactive/0903231208/0903231208.pdf>

Page 25 of this RFP required the contractor to provide for an orderly and controlled transition of the Physician Profile responsibilities to either the State or a successor contractor at the expiration of the contract term. The full list of the current contractor's responsibilities for transition is available on page 25 of that RFP.

21. Section 3.1.7 (e): Has the existing vendor faced any lawsuits for inaccurate data which the Contractor had independently verified or any inaccurate data resulting from data entry?

Answer: No.

22. Section 3.1.1 (d): What is the format of the data feed (Flat file, excel, etc)?

Answer: The data feeds referenced in this section are those the Department is not currently using but that may come up over the life of the contract. The data feeds the Department currently uses for Physician profile are described in Attachment M, including the file formats.

23. Section 3.1.3: Does NY State desire there be a separate application for the call center?

Answer: The State does not have a preference.

24. Section 3.1.3: How long is an average call with a Physician? How long is an average call with a non-Physician caller?

Answer: Average call time for 2016 has been approximately 6.5 minutes per call. The current data does not separate calls with physicians versus calls with consumers.

25. Section 3.1.4: What will be the report format for Attachment K (graph/table format)?

Answer: Files should be formatted in the manner as defined by the Department. Currently, data files are in Excel format and all other reports are in table format.

26. Section 5.5: It seems that from the RFP that the State wished to have a 30% MWBE participation?

Answer: Yes.

27. Section 6.2.E.2: Should proposing vendors address Section 3.1.1 (c) – (g) in Attachment P, Proposed Technology Solution, or write a separate narrative?

Answer: Please address these Sections in Attachment P.

28. Section 3.1.4: Where should proposing vendors address Section 3.1.4 Reporting requirements of the SOW?

Answer: It is not required to address these in the technical proposal, however all bidders are required to attest in Attachment A that they can and will provide all services described in the RFP if selected for award.

29. Section 3.1.6: Where should proposing vendors address Section 3.1.6 (a – j) Takeover and Turnover of the SOW?

Answer: Please address as part of your response to #17 of the Technical Proposal Narrative, located on page 28 of the RFP, which begins “Describe how you will facilitate a successful takeover”.

30. Answer: Section 3.1.7: Where should proposing vendors address Section 3.1.7 (a – k) Additional Requirements of the SOW?

Answer: It is not required to address these specifically in the technical proposal, however all bidders are required to attest in Attachment A that they can and will provide all services described in the RFP if selected for award.

31. Section 5.5: If proposing vendor is utilizing a business that is both an MBE and WBE for 30% of the project, is that acceptable to meet the 15% to WBE and 15% to MBE goals?

Answer: A commitment to utilize a dual-certified firm for 30% of the project will satisfy the Department's goal.

32. Attachment E 2.2: Will proposing vendors have the ability to negotiate terms and conditions for the final agreement prior to contract execution including terms in Attachment E other than Appendix A?

Answer: As part of the Bidder's Certified Statements (Attachment A), bidders are required to certify that they accept the contract terms and conditions as set forth in the RFP. NYSDOH reserves the right to negotiate terms of the contract that are non-material in nature with the contract awardee, within the scope of the RFP and in the best interests of New York State. Nonetheless, bidders must be fully prepared to accept all of the terms and conditions as set forth in the RFP without modification should NYSDOH determine that they constitute the best interests of New York State.

33. Section 3.1.7: Is the department willing to consider a contractual limitation of liability?

Answer: As part of the Bidder's Certified Statements (Attachment A), bidders are required to certify that they accept the contract terms and conditions as set forth in the RFP. NYSDOH reserves the right to negotiate terms of the contract that are non-material in nature with the contract awardee, within the scope of the RFP and in the best interests of New York State. Nonetheless, bidders must be fully prepared to accept all of the terms and conditions as set forth in the RFP without modification should NYSDOH determine that they constitute the best interests of New York State.

34. Attachment E DOH Agreement, Appendix D Section W: Would the Department consider revising the insurance terms in Section W of Appendix D of Attachment E to ensure that the insurance requirements align with the specific language in proposing vendor's policies?

Answer: No.

35. Attachment P 6. Page 2: In reference to request in Attachment P Bidder's Proposed Technology Solution for a "Description of Registry Transition/Turnover", what does "Registry" refer to?

Answer: This should read "Description of Physician Profile Transition/Turnover". In the fillable forms attachment, Attachment P has been amended to remove the term "Registry" and replace it with "Physician Profile".

****Responses to Questions 36- 45 were appended to the Q& A on December 20, 2016****

36. Are there any plans to apply for enhanced federal financial participation under section 1903(a)(3) to the Social Security Act with this software? If so, there are many references to what does and does not qualify under this along with definitions of terms. May we reference this guidance if the State does plan to apply for matching funds?

Answer: No.

37. 2.1 "Operation and maintenance of the Physician Profile and Call Center is currently performed by a vendor under a contract" Who is vendor performing Physician Profile contract?

Answer. Maximus Health Services, Inc.

38. 2.1 "Operation and maintenance of the Physician Profile and Call Center is currently performed by a vendor under a contract". Is the most recent RFP award information available for this contract?

Answer. Details on the last RFP for the current contract are available at:
<http://health.ny.gov/funding/rfp/inactive/0903231208/>

39. 3.1 Important states, "Bidders may propose to use software other than existing profile software for one or more of the functions of this RFP with written approval from the State." (a) Is this required before submitting our proposal? (b) If not, wouldn't acceptance of our proposal which would likely include the technologies used serve as tacit approval? If not, does this suggest the State could make an award and later reject the technology used in that award?

a. No.

b. The written approval from the state will be the signed contract. The Department will review and approve the specifications of any proposed software prior to contracting with a vendor to perform the work.

40. 3.1.1b states, "Contractor will house the database server, web server and physician profile application". Please confirm that "house" <> "host". Also, does this mean SaaS technology cannot be used since the server is usually not directly housed by the Contractor? If SaaS is acceptable then can you clarify how this sentence would apply in this case?

Answer: RFP has been amended to indicate the Department is looking for an externally hosted solution.

41. 3.1.6.I.v. "The plan must acknowledge that all software assets developed and paid for under this contract are to be turned over to the State or successor contractor at the end of the contract in their entirety, regardless of what tools were used to create and manage them." Does this mean that SaaS cannot be used? If so, how does this occur?

Answer. Contractor must ensure any third party software used under the contract include licenses that are transferrable to DOH without additional cost.

42. 3.1.6.I.v. "The plan must acknowledge that all software assets developed and paid for under this contract are to be turned over to the State or successor contractor at the end of the contract in their entirety, regardless of what tools were used to create and manage them." Please confirm that COTS solutions are acceptable for this solution? In this case this sentence would refer to any customizations that were done on top of the COTS software.

Answer. Commercial off the shelf solutions are acceptable provided DOH has all the licenses required to use the software without incurring additional fees or expenses.

43. 3.1.3. a "The Contractor shall sufficiently staff and operate a Call Center within New York State". It is understood that as a New York State contract, the goal would be to create as many jobs for New York residents as possible; however, many call centers operate using remote or at home staff. Under this scenario please clarify how this sentence applies to the contract to be compliant. (a) Would this mean that 100% of the remote staff would need to be located in NY State? (b) If not 100% what percentage? (c) Would this potentially mean if a staff member was initially in NY State and moved to, say New Jersey, that the staff member would need to be removed from the project or that the company might be out of compliance with the contract? (d) If there is no target for at home workers then how does this apply given that there may be no centralized "facility" under which the call center is operated?

Answer. The RFP has been amended to require a “Call Center Solution” rather than a “Call Center”, which implies one centralized physical presence. The Call Center Solution must be operated by staff located within the continental United States.

44. 3.1.3.a “The Contractor shall sufficiently staff and operate a Call Center within New York State” What is the definition of a ‘Call Center’, especially given that many call centers use at home or remote agents; therefore, may have no centralized facility?

Answer. See response to #43. A call center is a solution set up to handle a large volume of telephone calls related to the physician profile from practitioners and consumers.

45. 3.1.6. v. “The State will own all program software which the Contractor shall transfer to the State...” Please confirm that COTS solutions are acceptable for this solution? In this case this sentence would refer to any customizations that were done on top of the COTS software.

Answer: Commercial off the shelf solutions are acceptable. Yes, any customizations to COTS would be owned by the state.