## **RFI N22787 HELMS Q&A**

## **Amendment #4**

The purpose of this amendment is to address questions posed by potential responders to this RFI.

(Question and Answer numbering below are a continuation of the numbering in Amendment #2)

**Q20**: Please elaborate further on your current environment. We note the current ILRS system is comprise of 11 applications and 18 different databases. Can you elaborate and highlight technologies, integrations, and reference architecture to support? Can you please provide a picture of the architecture?

**A20**: The current technology stack consists of MS-SQL server 2012, MS-Windows 2012 Servers, Microsoft Classic ASP and .Net Framework application code; utilization of Web, WCF and SSIS services, LaserFiche document management as well as Kofax for scanning operations and Adobe eForms and a third party survey tool that is used for submission of things like address correction requests.

Q21: How is governance administered for changes with user community and technical community?

A21: The Department has an established governance policy that provides a framework for the administration of Shared Solutions/Services within the organization. The Department also leverages the ITIL Framework practices that include mechanisms for Continual Product Improvement and prioritization of efforts.

Q22: How are technical changes migrated from one environment to another?

A22: The Department leverages the ITIL Framework practices for overall control of migration between environments. Environments for the current system are New Release, QA, Production, Development and Disaster Recovery. Periodically temporary environments may be established for the introduction of new or updated package testing.

**Q23**: How is source code controlled across environments?

**A23**: The Department makes use of a commercial source control package as a repository for all source code. Use of this product is enforced.

**Q24**: How much change management do you anticipate transitioning between current ILRS system and envisioned system?

**A24**: The Department has not yet sized organizational change management needs for the HELMS project. Stakeholder research and the selection of an ultimate solution will influence the Department's assessment of this need.

In regards to changes to existing business processes and organization, such changes for desired, future-state have been captured in the process flows and documentation of Exhibit A, Business Requirements. The selected solution will provide the optimal means of "how" to support Exhibit A's definition of "what" the system must do.

Q25: Are the processes documented in the RFI the same or different than current processes?

**A25**: In terms of the essential goals of a process – they are the same. But in terms of the actual activity that goes on, they can be very different. Some of the current processes are manual and paper/file based. While some paper inputs and outputs will need to be supported by the system, the goal is to automate and go paperless where possible. The process maps in the RFI document

the essential steps that need to be accomplished from a business perspective, and not the solution-dependent activity. They document the "what", not the "how".

Q26: Is the data clean or will it need to be cleansed and standardized across Administrative Units?

**A26**: The Department has just begun current-state data analysis. The magnitude of cleansing required to align the various Administrative Units is not yet known.

**Q27**: Is there a current governance structure between the Administrative Units to consolidate and mitigate changes to the systems and operating standards?

**A27**: DOH has an established governance policy that provides a framework for the administration of Shared Solutions/Services within the organization.

Q28: Can you provide insight to the number and types of users that will need training?

**A28**: The Department has not completed an assessment of this need, but for insight to our training needs, estimate 10-15 back office users and 500 internal users with varying degrees of system utilization. It is anticipated that train the trainer options would be used in our ultimate training program for HELMS.

Q29: Please elaborate on the definition of "logical single tenant"?

**A29**: The terminology "logical single tenant" means that the HELMS architecture is to support the Department solution exclusively and it will not be shared with non-Department authorized entities.

**Q30**: Regarding requirement 7 in Exhibit B, Section 2, does the DOH define "vendor" as the SI or the software vendor?

**A30**: Any and all vendor(s) and subcontractor(s), including an SI that contribute to the solution must maintain compliance with all requirements stated in Exhibit B.

**Q31**: Regarding the availability requirement in Exhibit C, Section 3, does the requirement only apply to unplanned downtime?

**A31**: Yes, the 8.76 hours of permissible down time per year applies to unplanned downtime.

**Q32**: Are there any concerns regarding the access of a licensee's data across commissions? As an example, should the MQAC be able to access all the license, enforcement, and adjudication information for someone whose license is issued by the NCQAC?

**A32**: General information about a licensee, their credentials and enforcement action taken on them, is public information and should be accessible across disciplinary authorities and business units. In adjudication, the "Administrative Record" is also public information and should be accessible to staff across business units. But access should be distinguished from focus. As part of their workflows, users should only be presented with applications, credentials, case files, documents and other work items that are relevant to their role, permissions and assigned program areas and credential types. Additionally, for individuals or entities that hold multiple credentials that might cross boards and commission, it is important Department staff know what actions/activities are happening across credentialed areas.

**Q33**: Per Exhibit A, Part 1, Section 6.1.1.3, there needs to be statuses for both over- and under-payment. Should under-payments be allowed with electronic payments? Or are these statuses only to track manual payments?

**A33**: Under payments will not be allowed for online payments but there may be need to allow for underpayments with in house manual transactions (mail in applications).

Q34: What is the estimated cost of the HELMS project?

**A34**: The vendor responses to this RFI will guide the Department in estimating the cost of the HELMS project.

**Q35**: Has the Department allocated funding for HELMS yet? If so, through which source (budget, CIP, state/federal grant etc)?

A35: The project will be funded by fees collected from health professions and facilities.

**Q36**: How is the Department currently meeting this need? Which vendor provides the incumbent HELMS?

**A36**: eLicense, supported by Micropact, is the prime component supporting licensing and enforcement needs today.

**Q37**: Would it be possible to name the three greatest challenges the Department is having with the current solution?

## A37:

- 1) As the landscape of healthcare disciplinary authority has evolved, demands for technology that enables autonomy in workflow configurations and issuance of more granular security permissions in a system with shared and commonly maintained data have elevated and surpassed the capabilities of technology currently in place.
- 2) Technology in place does not effectively support enforcement or educational program requirements:
  - The exchange of secure data with disciplinary authority appointees is manual and in paper form. This is because the current technology does not provide a satisfactory user experience to appointees. User-friendly technology that complies with technology security requirements is needed in a modernized solution
  - User-defined fields are used to manage the unique needs of enforcement, educational programs and the variable needs for the 348 license types administered. Ad hoc reporting is not feasible today. Because the current system does not have a data warehouse, reports must be run outside of core business hours and require significant manipulation to provide meaningful data analysis of the poorly indexed data.
  - There are many cases when staff have to enter the same data multiple times because it does not persist throughout the system, which presents unnecessary risk of human error and a slowed response rate.
- 3) Timely and accurate reporting. Reports must be run outside of core business hours and require significant manipulation to provide meaningful analysis of the poorly indexed data.

**Q38**: Should the Department decide to proceed past the RFI process, has a time frame been established in which an RFP may be issued?

**A38**: Please see response to question 16:

It is anticipated that the RFP will be released 1<sup>st</sup> quarter of 2018 with award occurring December 2018. The Department will use stakeholder research, including responses to this RFI to reach a final decision on implementation timeframe. Vendors have been asked to provide recommendations on implementation timeline, question 18.

**Q39**: Which other systems will have to integrate or interface with the HELMS, and will the State provide incumbent vendors for each system?

A39: Please see Exhibit C HELMS Technical Requirements, Section 1.

Q40: Which operating platform does the Department currently use? / Is desired for the HELMS?

**A40**: Please see response to question 20. The HELMS operating platform will be determined by the successful vendor who can meet the stated requirements and comply with requirements provided as Exhibits.

**Q41**: Can the Department elaborate on any additional drivers behind this acquisition that may not be addressed in the RFI?

A41: All drivers behind the anticipated decision package and RFP were addressed in the RFI.

Q42: What is the number of users anticipated for the HELMS?

**A42** Approximately 500 internal users and another 500 daily external users, with an increasing number expected as on-line services are expanded.

Q43: Who is the technical contact and/or project manager for the HELMS?

A43: Project Manager and single point of contact: Stephanie Goebel, HELMS@doh.wa.gov

Q44: Which divisions within the DOH will utilize the HELMS?

**A44**: Adjudicative Services Unit, Health Services Quality Assurance Division, Chiropractic Quality Assurance Commission, Medical Quality Assurance Commission and Nursing Care Quality Assurance Commission will utilize HELMS.

**Q45**: Have you had any external assistance preparing this RFI?

**A45**: No.

**Q46**: Does the Department anticipate any professional or consulting services may be needed to accomplish this effort? (i.e. project planning/oversight, PM, QA, IV&V, staff augmentation, implementation services etc.)?

**A46**: The Department will procure project QA consultation services. No other professional or consulting services such as those referenced are anticipated to be purchased at this time.

However, the RFP prime respondent at their discretion may make use of services similar to those listed as part of their proposed solution, however such use must be included in the prime respondent's RFP [proposal] responses.

**Q47**: As dealing with public sector, we understand that there is generally a process of board approval, has this process been completed?

**A47**: Funding for large IT acquisitions such as this requires approval by the legislature and the governor. The department is currently working with stakeholders (including boards and commissions) to develop a budget decision package for the next legislative session in 2018.

**Q48**: Can the state clarify if a contractor was involved in the compilation or documentation of the current requirements attached to the RFI? If so, can the state provide the name of the contractor. Also if so, can the state indicate whether the contractor is precluded from participation in the implementation?

**A48**: No contractor was involved in the compilation or documentation of the current requirements attached to the RFI.

**Q49**: Do attachments count against the page count in the RFI response.

**A49**: The Department is hopeful that vendor's complete RFI response to questions 1 - 21, including attachments, will be fewer than 60 pages in length. If additional pages are required to provide accurate and useful responses, more than 60 pages will be accepted.

Q50: What is the current annual budget for the legacy application?

**A50**: The Department requests that vendors provide cost estimates for question 19 response without consideration of current budget for the legacy application.

**Q51**: What vendor implemented the legacy application?

**A51**: A firm that has since been acquired by Micropact implemented the legacy application.

Q52: Is there a vendor currently providing maintenance services, if so, are they precluded from bidding?

**A52**: The current vendor providing maintenance services is not precluded from bidding.

Q53: What is the estimated budget for this project?

**A53**: The vendor responses to this RFI will guide the Department in estimating the cost of the HELMS project.

Q54: Can we get a copy of the Feasibility study completed for this project as referenced in the RFI?

**A54**: Yes. The existing feasibility study will be provided as an Amendment. Note: The existing feasibility study was completed by a vendor under contract by the Department. The resulting feasibility study presents a set of recommendations to the Department. The Department will use vendor responses to this RFI along with additional stakeholder outreach to influence decisions to be made regarding topics such as type of solution (COTS, SaaS/PaaS), degree of vendor support versus internal IT staff support, project budget and will possibly refine the ultimate feasibility study for the HELMS project with additional findings.

Q55: How many Named agency back office staff will need access to the system?

**A55**: Please see response to question 9 in Q&A responses release 3:

...If by back-office staff you are referring to system administrators, workflow/configurators, or other users requiring elevated permissions to support the system, the Department estimates approximately: 10-15 Named Users...

**Q56**: How many mobile field staff will need access to the system?

**A56**: Please see response to question 14 in Q&A responses release 3:

See Exhibit C Technical Requirements, Section 2, requirement 8: solution must provide "responsive design". The intention of this requirement is to provide users with the ability to use the solution from a mobile device, in general.

An example of a more specific need for mobile usage is in regards to inspection and investigation:

• There are approximately 120 staff members that perform investigations, inspections or both.

- When they mobile, the intention is to provide these users with the case information related to their inspection or investigation, along with the ability to collect new data/evidence and to log violations.
- a) The department is not looking for the actual mobile devices as part of the solution, only the related software application(s). Assume the application(s) would run on at least 120 mobile devices.
- b) The department would use its own devices.
- c) It is difficult to say how many forms are currently in use in the field. Some enforcement units have developed their own spreadsheets and forms for use on their mobile devices. Some facility investigation units encourage the use of computer based checklists, while others discourage it. Ideally the solution would allow for a customizable checklist to support the user in conducting their investigation or inspection. This checklist would be configurable for each type of facility or program area. The evidence/data collection feature does not need to be configurable by program area but does need to allow for different forms of data/evidence to be easily collected and uploaded to the system.
- d) We do not require the pricing for these features to be proposed separately unless it has a significant impact and should be considered an "exotic requirement".

**Q57**: Does the State of Washington have any restrictions, in law or policy, as to the utilization of resources outside of the United States to support state projects? If no, does the Department of Health have a position on the use of offshore resources for the HELMS project?

**A57**: Washington State does not have restrictions regarding contracting with resources or firms outside of the United States. The Department does not have a position on the use of offshore resources, with yield to security requirements stated in Exhibit B and technical requirements stated in Exhibit C that might present limitations to use of offshore resources. For example: under FedRamp and other security related areas data must be stored in the lower 48 states only; criteria set forth in NIST 800-54 regarding software development practices require third-party validation of vendor satisfaction of requirements; Exhibit C Quality of Service requirements suggest that vendor response/support must be provided at hours of convenience to the Department, regardless of time zone.