

SOLICITATION AMENDMENT #4

<p>YH21-0018</p> <p>CMS Interoperability and Patient Access</p>	<p>Solicitation Due Date:</p> <p>Monday, August 22, 2022, 3:00 pm Arizona Time</p>	<p>Procurement Officer: Tracey Thomas</p> <p>Email: procurement@azahcccs.gov</p>
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A signed copy of this amendment must be submitted with your solicitation response.

This Solicitation is amended as follows:

A. The following changes have been made to the RFP document:

Paragraph # or Title	Page #	Amendment
Table of Contents	2	Attachment A: Minimum Qualifications is hereby removed and replaced.
Table of Contents	2	Attachment D: Pricing Schedule is hereby removed and replaced.
Table of Contents	2	Exhibit 1: CMS Solution Requirements Checklist is hereby added to the solicitation.
Scope of Work	12	Section 7, Technical Solution Requirements, Subsection 7.7, Hosting and Security, Tech-58, shall include an additional bullet: <ul style="list-style-type: none"> AHCCCS/ MQD are expecting to view the utilization data found in the third-party applications by viewing what data is in the contractor's system.
Scope of Work	35	Section 11, Pricing, Subsection 11.1, Pricing Schedule, Attachment D is hereby removed and replaced.
Special Instructions to Offerors	47	The reference to "Exhibit A" is hereby replaced with "Section 4, Submission of Proposal".
Special Instructions of Offerors	47	Section 5, Contents of Proposal, Part B, B4 – Pricing Schedule (Attachment D) is hereby removed and replaced.

Special Instructions of Offerors	47	Section 5, Contents of Proposal, Part B, B5 - Minimum Qualifications Pass/Fail (Attachment A) is hereby removed and replaced.
Special Instructions to Offerors	48	Section 5.1 is hereby updated as follows: Transmittal Letter: The Transmittal Letter must include the principal contact for the proposal along with an address, telephone number, fax number, and an e-mail address if that contact is different than the individual authorized for signature. A person authorized to commit the offeror to its representations and who can certify that the information offered in the proposal meets all general conditions must sign the letter. In addition to the required detailed legal analysis, the Offeror shall summarize in their Transmittal Letter a list of distinct portions, including exact page numbers, of their document is requested to be kept confidential. See paragraph 12 PARAGRAPH 13 "Request for Confidential/Proprietary Determination" of this section (below).
Special Instructions to Offerors	50	B2-Approach/Methodology Narrative Proposal (page limit 25) "Proposal Response Requirements" is hereby update as follows: Describe the offeror's approach to delivering the services outlined in the Scope of Work, Section 8. Approach and Methodology. Provide a response for each area in Section 8.
Special Instructions of Offerors	51	Section 5, Contents of Proposal, Subsection 5.3, Pricing Proposal, should read as follows: The evaluation will be based on the proposed prices, as indicated on Attachment D: Pricing Schedule submitted with offeror's proposal.

B. Answers to Questions are attached hereto.

OFFEROR HEREBY ACKNOWLEDGES RECEIPT AND UNDERSTANDING OF THIS SOLICITATION AMENDMENT.	THIS SOLICITATION AMENDMENT IS HEREBY EXECUTED ON THIS DAY, IN PHOENIX, AZ.
SIGNATURE OF AUTHORIZED INDIVIDUAL:	SIGNATURE: SIGNATURE ON FILE
TYPED NAME:	TYPED NAME: Meggan LaPorte, CPPO, MSW
TITLE:	TITLE: Chief Procurement Officer
DATE:	DATE:



**ATTACHMENT E
QUESTIONS AND ANSWERS FORM**

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Question#	VENDOR NAME	Paragraph # or Title	Page #	Vendor Question	AHCCCS Response
1.	Conduent	4.2 Solicitation Amendments	43	The RFP states that "Each Solicitation Amendment shall be signed with an original signature by the person signing the Offer." Since this is an electronic submission, can the State confirm that electronic signatures are acceptable?	Yes
2.	Conduent	B2- Approach/Methodology Narrative Proposal, item 1	51	The B2-Approach/Methodology Narrative Proposal table, Item 1, asks that Offerors "Provide a response for each area in Section 8 (A-I)." We were unable to locate Items A-I in Section 8 of the Scope of Work. Please confirm Offers should address the entire Scope of Work, Section 8.	Yes, it's Section 8.2. However, respond to all of Section 8.
3.	Conduent	B1- Technical Narrative Proposal, Items 5, 7; B2- Approach/Methodology Narrative Proposal, items 1, 2, 3, 4, 5; Page Limits	49-50; 47	As noted in Question 2 above, it appears that B2-Approach/Methodology Narrative Proposal table, Item 1, requires a response to the entire Scope of Work, Section 8. However, several items in Scope of Work, Section 8, are addressed elsewhere: <ul style="list-style-type: none"> • Risk and Issue Management, Section 8.2.6, in B2, Item 2 • Project Schedule, Section 8.2.7, in B2, Item 3 • Training, Section 8.4, in B2, Item 5 • Privacy and Security, Section 8.5, in B1, Item 5 (See question 3 below) • Continuity of Operations and Recovery, Section 8.6, in B1, Item 7 • Technical Support, Section 8.8, in B2, Item 4 Considering the page limits, please confirm Offerors can respond in detail only once, and direct reviewers to the appropriate section for complete responses to these items in the second instance, despite the notice that "AHCCCS will not consider information outside the allotted page limit or any other information provided elsewhere in the Proposal when reviewing a specific response to an individual submission requirement."	Page limits will remain as is.



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4.	Conduent	B1 – Technical Narrative Proposal, Item 5	49	The B1 - Technical Solution Narrative Proposal, Item 5, labeled “Privacy and Security,” asks that offers “respond point-by-point to all requirements in Scope of Work, Section 8.” Please confirm that Offerors should respond to Scope of Work, Section 8.5, which comprises the Privacy and Security requirements.	Yes. Section 8.5.
5.	Conduent	B1 – Technical Solution Narrative Proposal, Item 6	49	The link to the State of Arizona Baseline Infrastructure Security Controls 2017 document provided in item 6 of Table B1 routes to a page that doesn’t exist. We were able to find an Excel document titled Arizona Baseline Security Controls 2017_v2. Can the State confirm this is the correct document and/or provide the appropriate form? Can the State also confirm that this questionnaire should be submitted as a separate Excel document and does not count against the page limit?	The full Arizona NIST Baseline Security Controls spreadsheet can be found here: https://aset.az.gov/sites/default/files/Arizona%20Baseline%20Security%20Controls%202017_v2.xls
6.	Conduent	B1 – Technical Solution Narrative Proposal, Item 6 TECH-46 PVS-04	49 11 25	<p>The RFP has various security requirements below:</p> <ul style="list-style-type: none"> • Table B1, item 6: The offeror shall provide its FEDRAMP (Federal Risk and Authorization Management Program) SSP (System Security Plan) OR complete The State of Arizona Baseline Infrastructure Security Controls 2017 https://aset.az.gov/arizona-baseline-security-controls-2016-excel and receive authorization from The State of Arizona Department of Administration. • TECH-46: The Contractor shall at all times comply with FEDRAMP (Federal Risk and Authorization Management Program), SSP (System Security Plan) or state of Arizona Baseline Infrastructure Security Controls and MARS-E or HI-TRUST compliance while in control of AHCCCS/MQD data. • PVS-04: As part of the proposal submission, the Contractor shall submit a security and privacy assessment and SSAE-18 assessment or its equivalent. <p>State of Arizona baseline controls, MARS-E and SSAE 18 have significant overlap of controls, if not identical. Given the scope of work adhering to all three frameworks is redundant from security perspective. Can the State</p>	MARS-E would be the overarching framework that should be adhered to for implementing the project, which is based off of NIST 800-53. With that being said, if this is going through a Statewide security review, the State of Arizona Baseline Infrastructure Security Controls will still



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				identify one framework from the three that we will adhere to for implementing the project?	
7.	Conduent	PVS-04	25	Requirement PVS-04 asks Offerors to provide “a security and privacy assessment and SSAE-18 assessment or its equivalent” as part of the proposal submission. Can the State please confirm that it does not count against the prescribed page limits?	This does not count against the prescribed page limits.
8.	Conduent	PVS-15	26	Requirement PVS-15 asks Offerors to provide, as part of the proposal submission “proof of compliance with all the following requirements, at the standards that are current for each requirement, and submit supporting information of compliance to AHCCCS/MQD.” Can the State please confirm that it does not count against the prescribed page limits?	This does not count against the prescribed page limits.
9.	Conduent	PVS-16	26	Requirement PVS-16 asks Offerors to provide, as part of the proposal submission, “proof of compliance with all the following requirements, at the standards that are current for each requirement, and submit supporting information of compliance to AHCCCS/MQD.” Can the State please confirm that it does not count against the prescribed page limits?	This does not count against the prescribed page limits.
10.	Conduent	Contents of Proposal	47	Special Instructions to Offerors, Item 5, refers Offerors to “Exhibit A Proposal Submission Instructions.” We were not able to locate Exhibit A in the materials provided. Can the State please provide the referenced Exhibit?	There is no Exhibit A, refer to solicitation amendment 4.
11.	Conduent	Pricing Proposal	51	Special Instructions to Offerors, Item 5.3 directs Offerors to “Attachment A: Pricing Schedule.” Please confirm Offerors should refer to Attachment D.	Yes, also refer to solicitation amendment 2.
12.	Conduent	B1 – Technical Narrative Proposal, Item 8.3	48	The B1 - Technical Solution Narrative Proposal, Item 8.3, asks offerors to include architecture diagrams. Can the State please confirm that architectural diagrams do not count against the page limit?	Architectural diagrams do count in the page limit.
13.	Conduent	N/A	N/A	Are there any restrictions on the file size that can be submitted in ASFS?	There should be no limitation on the file size. If you have issues uploading, please contact the procurement officer.
14.	Conduent	Fonts and Margins	47	May Bidders use a smaller, still readable font for each of the following: a) headers and footers b) requirement text c) exhibits/figures/graphics	No



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				d) tables	
15.	Conduent	TECH-13	8	<p>Requirement TECH-13 states: For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.</p> <p>Please provide anticipated historic claim and member volumes for AHCCCS.</p>	<p>Member counts for this RFP can be found in section one entitled "AHCCCS/Med-QUEST OVERVIEW"</p> <p>AZ FFS medical claims between 1/1/2016 and 6/8/2022 is 31,852,989.</p> <p>AZ FFS pharmacy claims between 1/1/2016 and 6/8/2022 is 4,166,465.</p> <p>HI FFS medical claims between 1/1/2016 and 6/8/2022 is 9,467,345.</p> <p>HI FFS pharmacy claims between 1/1/2016 and 6/8/2022 is 110,107.</p>
16.	Conduent	TECH-13	8	<p>Requirement TECH-13 states: For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.</p> <p>Please provide anticipated historic claim and member volumes for MDQ.</p>	See #15
17.	Conduent	TECH-13	8	<p>Requirement TECH-13 states: For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.</p> <p>Please provide anticipated monthly average of claim volume for AHCCCS.</p>	See #15
18.	Conduent	TECH-13	8	<p>Requirement TECH-13 states: For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.</p>	See #15



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				Please provide anticipated monthly average of claim volume for MDQ.	
19.	Conduent	TECH-13	8	<p>Requirement TECH-13 states: For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.</p> <p>What are the estimated number of members who will request access to the API through a third party application?</p>	This number is unknown. This will be the first time AZ and HI members have been offered this access.
20.	Conduent	TECH-29	9	<p>Requirement TECH-29 states: The Contractor shall, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (b)(2), make encounter data accessible no later than one (1) business day after AHCCCS/MQD receives the data from providers, other than encounter data from MCOs, PIHPs, and PAHPs, compensated based on capitated payments.</p> <p>Please provide anticipated encounter data and member volumes for AHCCCS.</p>	See #15
21.	Conduent	TECH-29	9	<p>Requirement TECH-29 states: The Contractor shall, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (b)(2), make encounter data accessible no later than one (1) business day after AHCCCS/MQD receives the data from providers, other than encounter data from MCOs, PIHPs, and PAHPs, compensated based on capitated payments.</p> <p>Please provide anticipated encounter data and member volumes for MDQ.</p>	See #15
22.	Conduent	Attachment D	n/a	What does the * in column D 'Update Frequency' refer to?	The asterisk is hereby deleted.
23.	Conduent	Attachment D	n/a	Please provide details how rows 10 and 12 should be used in for the Pricing Schedule.	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.



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24.	Conduent	Attachment D	n/a	There are no formulas in in Attachment D. Should bidders provide summary information in the spreadsheet?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
25.	Conduent	11.1 Pricing Schedule and Attachment D	35	Offeror shall provide a firm fixed price for each completed and accepted deliverable listed in the Attachment D: PRICING SCHEDULE. No additional payments shall be made for travel or per diem. The pricing shall be inclusive of all costs associated with the delivery of the service and includes staff time, mileage, insurance, and administrative cost. No additional fees will be paid by AHCCCS. DEL-01 and DEL-02 within the Closing Phase in attachment D that state the update frequency is FINAL. Is this meant as a one-time payment based on implementation?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
26.	Conduent	11.1 Pricing Schedule and Attachment D	35	Offeror shall provide a firm fixed price for each completed and accepted deliverable listed in the Attachment D: PRICING SCHEDULE. No additional payments shall be made for travel or per diem. The pricing shall be inclusive of all costs associated with the delivery of the service and includes staff time, mileage, insurance, and administrative cost. No additional fees will be paid by AHCCCS. The language and layout of Attachment D: PRICING SCHEDULE appear to be specific to implementation and not ongoing operations. Please clarify how bidders should apply operational costs into the pricing schedule.	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
27.	Conduent	TECH-58	12	Requirement TECH-58 states: The Contractor shall maintain a hosted support environment where customer service agents, including those at AHCCCS or MQD, can review emulated data from the API endpoint in support of our members. This hosted support environment shall be available within thirty (30) calendar days of the time at which the solution goes from the development and test environment to the production environment.	Yes, AHCCCS/ MQD are expecting to view the utilization data found in the third-party applications by viewing what data is in the contractor's system. <ul style="list-style-type: none"> AHCCCS/ MQD are expecting to view the utilization data found in the third-party applications by viewing what data is in the contractor's system.



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				<ul style="list-style-type: none"> • The environment must emulate data that the member can view through the API, • Data must be refreshed in this environment near real time of AHCCCS or MQD data refreshes with data refreshes not to exceed twenty-four (24) hours, and • This environment needs to be accessible by web browser for non-technical staff to query and view what data the member can access via the API endpoint. <p>As members view the API data through various third-party applications that the Contractor does not own, will AHCCCS/MQD consider other methods to support the customer service agents and members with data questions?</p>	
28.	Conduit	TECH-69	13	<p>Requirement TECH-69 states: The Contractor shall make data available regarding API utilization from the prior month that includes at least the following in a pipe delimited file:</p> <ul style="list-style-type: none"> · AHCCCS or MQD member ID, · Date and time the member accessed the API, · What information was accessed (examples are provider directory, formulary, claim history), and · What third party application or browser accessed the API <p>As members access the API data through third-party applications not associated with the Vendor, what web browser API access is AHCCCS/MDQ expecting?</p>	The expectation is that the contractor will have a record of who pulled data for either the Patient or Provider API's and which third party application was used to view that data.
29.	Conduit	TECH-38	11	<p>Requirement TECH-38 states: The Contractor's solution shall/must provide the provider remittance and member cost sharing information for all FFS claims including All Inclusive Rates (AIR) or any other alternative payment methodology at which AHCCCS reimburses.</p>	This data will be found via the AHCCCS PMMIS. The All-Inclusive Rate (AIR) is applicable to IHS/638 Facilities as well as 638 Nursing facilities. 638 FQHCS also have an Alternative Payment Model (APM) which mirrors the AIR. Again, this information is found within PMMIS and is built into the payment models for the above mentioned providers (facilities).



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				Please define any special layout or data requirements necessary to support AIR or any other alternative payment methodology at which AHCCCS reimburses.	
30.	Conduit	TECH-39	11	Requirement TECH-39 states: The Contractor's solution shall/must provide ongoing updates beyond phase 1 and 2 implementations and during the life of the contract. These include: · All new Da Vinci use cases · New FHIR implementation guides Please define what is meant by "phase 1 and phase 2 implementations."	The sentence should have read, "The Contractor's solution shall/must provide ongoing updates beyond the implementation and during the life of the contract."
31.	Conduit	TECH-73	14	Requirement TECH-73 states: The Contractor shall ensure the solution includes, at no additional cost, potential interoperability regulation changes including, but not limited to those in CMS-9123-P: · Extension of payer-to-payer exchange requirement to FFS programs, · Addition of a payer-to-payer API, · Inclusion of pending, denied and active prior authorization information, · Additions to the provider API, and · Inclusion of lab data As the rules for CMS-9123-P have not been finalized, please explain the expectation of AHCCCS/MQD on how bidders should include these potential rules in the pricing schedule (Attachment D).	This is an all-inclusive contract and price does not fluctuate based on any CMS mandates and updates, current and future, to this rule.
32.	Conduit	UNIFORM INSTRUCTIONS TO OFFEROR. 4.4. Public Record.	43	Will the State please confirm it will provide the Offeror the opportunity to redact any information Offeror believes to be confidential, proprietary, trade secret, and/or otherwise exempt from public disclosure under applicable public records law prior to disclosing any information in the Offeror's Offer, primarily to prevent unauthorized disclosure of Offeror information that is confidential, proprietary, trade secret, and/or otherwise exempt from public disclosure under applicable public records law?	Refer to Special Instructions to Offerors Section Thirteen (13), Request for Confidential/Proprietary Determination.
33.	Conduit	Throughout, including without	3, 42	Will the State please confirm the State and Offeror will have the opportunity to negotiate and sign a final contract that reflects the results of negotiations	Refer to Special Instructions to Offerors Section Twelve (12), Final Proposal Revisions / Best and Final Offers.



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		limitation, SPECIAL INSTRUCTIONS TO OFFERORS, 11. Negotiations and OFFER AND ACCEPTANCE and UNIFORM INSTRUCTIONS TO OFFERORS, 3.2, 4.1, 4.3, and 6.4		before the terms of the RFP, proposal, and contract are binding on the State and Offeror?	
34.	Conduent	N/A (New)	--	Will the State consider adding a reasonable overall limitation of liability that includes a cap on direct damages except for certain specific reasonable carveouts?	The RFP is inclusive of all terms and conditions and does not allow for a limitation on liability. Offerors may include exceptions to terms in their proposal, however these may affect responsiveness. Please refer to section 3.2 in the Special Instructions to Offerors.
35.	Conduent	N/A (New)	--	Will the state consider adding a disclaimer of indirect, incidental, special, consequential, exemplary or punitive damages or losses?	See #34
36.	Conduent	Multiple	56	Will the State please confirm that the State and Offeror will have the opportunity to negotiate Intellectual Property terms that are applicable to and appropriate for the proposed solution, primarily to ensure that rights to pre-existing and/or independently developed Offeror and third-party intellectual property are not inadvertently transferred?	See #34
37.	Conduent	UNIFORM TERMS AND CONDITIONS. 4.4 and 4.5 (Availability of Funds)	57	Will the State please confirm that the State shall notify the Contractor as soon as it has knowledge that funds may be reduced or no longer available and that Contractor shall be entitled to an equitable adjustment to price, schedule, scope, and any other provisions reasonably affected by the reduction or lack of future funding?	Yes. The State will notify the Contractor as soon as possible in this situation.
38.	Conduent	multiple	58	Will the state please confirm that Contractor's indemnification obligations will be limited to third party claims for direct damages to the extent directly	See #34



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				caused by Contractor's contract breach or negligence in performance of the contract?	
39.	Conduent	Multiple	58	Will the State please confirm Contractor will have an opportunity to take over any legal action and settle or defend any such action at Contractor's sole expense, and the State will provide reasonable assistance in defending the action? The Contractor shall not be liable for any cost, expense, or compromise incurred or made by the State in any legal action without the Contractor's prior written consent, which shall not be unreasonably withheld.	See #34
40.	Conduent	UNIFORM TERMS AND CONDITIONS. 6.4 Force Majeure.	59	Will the State confirm Contractor will not be subject to default due to delays caused by the State?	All delays that are the direct result of the State will not result in default actions.
41.	Conduent	UNIFORM TERMS AND CONDITIONS. 7.5. Compliance With Applicable Laws	60	Will the State confirm that any changes in applicable law after the RFP due date shall be subject to mutual agreement on schedule, scope, price, resource, and/or other impacts (if any)?	Any material changes to applicable law will be discussed with the Parties and those discussions may include changes to the contract as appropriate given the nature of the change.
42.	Conduent	UNIFORM TERMS AND CONDITIONS. 8.2. Stop Work Order.	60	Will the State please consider a thirty (30) days prior written notice?	No.
43.	Conduent	UNIFORM TERMS AND CONDITIONS. 8.5. Right of Offset.	61	Will the State provide Contractor notification and a thirty (30) day cure period? Will Contractor have an opportunity to earn back the offset? How will the offset amount be derived?	The State generally offers a long period for a Contractor to cure any deficiencies before they are subject to offset; however, depending on the egregious nature of the deficiency and the past opportunity to cure, no guarantees may be offered for situations that would fall under this action.
44.	Conduent	UNIFORM TERMS AND CONDITIONS. 9.5 Termination for Default	61	Will the State please consider a sixty (60) days' notice and cure period?	No, please see #43.
45.	Conduent	SPECIAL TERMS AND CONDITIONS, SECTION 8	64-65	Will the State agree to make the confidentiality provisions mutual, primarily to avoid unauthorized disclosure of Contractor information that is	Refer to Special Instructions to Offerors Section Thirteen (13), Request for Confidential/Proprietary Determination.



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				confidential, proprietary, trade secret, and/or otherwise exempt from public disclosure under applicable public records law?	
46.	Conduent	SCOPE OF WORK, 9. Service Level Agreements.	33	Will the State please consider adding a reasonable cap on the dollar amount of Service Level Agreement penalties the State may assess?	No
47.	Conduent	SCOPE OF WORK, 11.2 Retainage.	35	Will the State consider reducing the retainage amount?	No
48.	Conduent	SCOPE OF WORK, 11.2 Retainage.	35	Will the State consider releasing retained fees upon successful completion of each deliverable rather than at the final project acceptance?	No
49.	Conduent	UNIFORM INSTRUCTIONS TO OFFERORS, 3.3.1 Exceptions to Terms and Conditions	42	Will the State please confirm the State will give the Offeror the opportunity to clarify or withdraw any exception(s) the State finds unacceptable before the State rejects the Offer based on the exception(s)?	Yes, the State will typically give Offerors reasonable opportunity to clarify or withdraw exceptions.
50.	Conduent	PROJ-01	16	Requirement PROJ-01 states: The Contractor acknowledges that AHCCCS may not be able to meet the time frames specified in a project management plan (PMP) or project schedule or that AHCCCS/MQD may determine that it is necessary to delay and/or modify the timing and sequencing of the implementation. While AHCCCS is committed to the project and shall use reasonable efforts to provide staff and resources necessary to satisfy all such time frames, AHCCCS shall not be held responsible or deemed in default for any delays in solution implementation provided AHCCCS uses its reasonable efforts to accomplish its designated responsibilities and obligations as set forth in the PMP. Will the State please confirm the Contractor will be entitled to an equitable adjustment to price, schedule, scope, and any other provisions reasonably affected by the State's delay (if any)?	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.



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51.	Conduent	PROJ-02	16	<p>Requirement PROJ-02 states: In addition, AHCCCS and/or MQD have the authority to delay implementation and installation of the solution, or any part thereof. The Contractor agrees to adjust the PMP and project schedule deadlines to consider any AHCCCS and/or MQD or Contractor caused delays; provided, however, that the Contractor shall continue to perform all activities not affected by AHCCCS and/or MQD caused delay. In the event AHCCCS' adjustment to the timeline causes the Contractor scheduling conflicts or personnel unavailability, AHCCCS and/or MQD shall determine a revised schedule in collaboration with the Contractor and the Contractor shall prepare a revised schedule at the direction of the states which may delay the commencement and completion dates of the project and shall take into consideration the readjusted time frames and any necessary resequencing of the activities. Such readjustment, rescheduling or modification of the project shall be at no additional cost to AHCCCS and/or MQD.</p> <p>Will the State please confirm Contractor will be entitled to an equitable adjustment to price, schedule, scope, and any other provisions reasonably affected by the State's delay (if any)?</p>	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.
52.	HiPaaS			What are the typical file sizes for Patient, Provider, Claims, Drug Formulary, T-MSIS and other input data?	File sizes are not known as they have not been created.
53.	HiPaaS			How many members are expected to participate in the Arizona Medicaid program?	Member volumes can be found at https://www.azahcccs.gov/Resources/Reports/population.html
54.	HiPaaS			How many concurrent users and peak users are expected?	The State is unable to estimate this number at this time.
55.	HiPaaS			Is there currently a member portal for users to log into?	No, a member portal for users to log into does not exist.
56.	HiPaaS			How is the member portal hosted?	See #55.



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57.	HiPaaS			What Authentication process is used? OAuth 2.0, SAML, LDAP?	Review the two final rules where CMS has outlined authentication processes. These were released from the US Department of Health and Human Service (HHS): • Centers for Medicare and Medicaid Services (CMS) Interoperability and Patient Access rule (CMS-9115-F) https://www.federalregister.gov/documents/2020/05/01/2020-05050/medicare-and-medicaid-programspatient-protection-and-affordable-care-act-interoperability -and • Office of the National Coordinator for Health IT (ONC) 21st Century Cures Act Rule https://www.federalregister.gov/documents/2020/05/01/2020-07419/21st-century-cures-actinteroperability-information-blocking-and-the-onc-health-it-certification
58.	HiPaaS			What process will be established for 3 rd Party Application approvals?	The bidders 3 rd Party Application approvals process should be outlined in the response.
59.	HiPaaS			Are there any restrictions on offshore development?	See Uniform Instructions to Offerors: Section 3.11 Offshore Performance of Work Prohibited: Any services that are described in the specifications or scope of work that directly serve the State of Arizona or its clients involve access to secure or sensitive data or personal client data shall be performed within the defined territories of the United States. Unless specifically stated otherwise in the specifications, this paragraph does not apply to indirect or “overhead” services, redundant back-up services or services that are incidental to the performance of the contract. This provision applies to work performed by subcontractors at all tiers. Offerors shall declare all anticipated offshore services in the Offer.
60.	HiPaaS			Where can we find “The State of Arizona Baseline Infrastructure Security Controls 2017 excel” and how to receive authorization from The State of Arizona Department of Administration?	The full Arizona NIST Baseline Security Controls spreadsheet can be found here: https://aset.az.gov/sites/default/files/Arizona%20Baseline%20Security%20Controls%202017_v2.xls



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61.	HiPaaS			For user management, who will be managing the users, their credentials, and user registration?	The offeror is expected to manage the process on behalf of AHCCCS.
62.	Team NewWave	AHCCCS/MQD Overview	4	On Page 4 of the Med-Quest Section it is stated that “MQD provides coverage to approximately 440,000 members. Over 90% of the MQD program’s expenditures are through managed care programs and 58 members are under fee-for-service.” Please clarify how many members the solution needs to cover for MQD, 10% of 440k or 58 members?	There are approximately 58 members.
63.	Team NewWave	AHCCCS/MQD Overview	4	What is the anticipated change in number of covered beneficiaries on an annual basis for both AHCCCS and MQD?	Member information can be found at https://www.azahcccs.gov/Resources/Reports/population.html
64.	Team NewWave	7.8 Metadata & Monitoring	13	Does AHCCCS/MQD currently tag data with sensitivity indicators/classifications? Without this tagging it would be impossible to offer selective consent in the API to the requesting user.	Consent is at the member level and for that members data and provider data does not require consent per the CMS Interoperability and Patient Access rule (CMS-9115-F).
65.	Team NewWave	Tech-61	13	TECH-61 requires Privacy and Security information to be provided in English, Spanish and Navajo languages. What other languages does AHCCCS/MQD typically require language translations for?	No other languages besides English, Spanish and Navajo languages.
66.	Team NewWave	TECH-08	7	Does AHCCCS and MQD maintain structured CLINICAL data that would be intended to be used in the US Core Patient Access API?	Offerors must be fully compliant with the CMS Interoperability and Patient Access rule (CMS-9115-F) which includes sharing of clinical data.
67.	Team NewWave	TECH-31	10	Do you use a Business Partner to administer your Drug Plans? If yes, who do you use?	AHCCCS and MedQuest each use different Pharmacy Benefit Managers and reprocure from time to time.
68.	Team NewWave	TECH-31	10	If using a business partner, such as a Pharmacy Benefit Manager, do they provide a FHIR API? If yes, do you make use of that API?	AHCCCS and MedQuest each use a different Pharmacy Benefit Manager (PBM) and reprocure from time to time. It is unknown at this time exactly how these PBM’s will connect.



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69.	Team NewWave	Tech-60	12	Will AHCCCS / MQD provide synthetic test data?	AHCCCS / MQD will not provide synthetic test data.
70.	EY	B1 - Technical Solution Narrative Proposal	49	Can the State provide the link for the State of Arizona Baseline Infrastructure Security Controls 2017? The link in the RFP was non-functional.	The full Arizona NIST Baseline Security Controls spreadsheet can be found here: https://aset.az.gov/sites/default/files/Arizona%20Baseline%20Security%20Controls%202017_v2.xls See #5
71.	EY	MNO-03	28	Can the State specify the SLA penalties for requirement MNO-03?	Answer will come in Solicitation Amendment #5
72.	EY	TECH-08	7,8	Can the State specify how many years of historic data is required to be made accessible via API?	For the patient access API, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (g)(1)(i) and (ii), the Contractor must comply with the requirements of paragraphs (a) through (f) of 42 CFR § 431.60 and 42 CFR § 457.730 with regard to data with a date of service on or after January 1, 2016, that are maintained by AHCCCS/MQD.
73.	EY	TECH-09	8	Can the State provide an estimate of the data volume by domain or business object for data across the CMS ecosystem?	See #15
74.	EY	TECH-10	8	Can the State confirm that data is being made available only via SFTP or are there other systems that will behave as data sources?	Most data will be provided through SFTP but the Pharmacy Benefit Managers may have alternate ways to provide data.
75.	EY	TECH-12/30 SLA-02	8,10,33	For each of these datasets, can the State respond to the following questions: 1. In which AHCCCS/MQD data store does this dataset reside? 2. By how many hours/minutes does the data store lag the transactional system? 3. Please describe the technical stack for the data store (e.g., App Tier: Java; Database: Oracle; OS: Linux)	This information is not relevant to this RFP.
76.	EY	TECH-46	11	Can the State confirm that SOC2 Type 2 may be used in place of MARS-E or HI-TRUST compliance?	For the type of data that will be processed, stored, or transmitted, MARS-E/HITRUST is required.



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77.	EY	TECH-58	12	Can the State confirm that support personnel should be allowed to emulate patient access on the Production system itself via a separate and protected API endpoint?	AHCCCS/ MQD are expecting to view the utilization data found in the third-party applications by viewing what data is in the contractor's system.
78.	EY	TECH-66	13	Can the State provide a list of requirements for fraud, waste and abuse regulations as per the AHCCCS/MQD?	No additional information will be provided here.
79.	Gainwell Technologies LLC	3. Purpose of the Request for Proposal	5	Please confirm that the scope of work limited to only account for the FFS and CHIP active lives, estimated (AZ = 255K) and (HI=55) and not the Managed Care lives as outlined in the RFP background?	The scope of work is limited to approximately 255,436 in Arizona and 58 in Hawaii and not all Medicaid lives in Arizona and Hawaii.
80.	Gainwell Technologies LLC	3. Purpose of the Request for Proposal	5	Are the CHIP member counts included in the FFS counts listed (AZ = 255K) and (HI=55) in the AHCCCS/Med-QUEST Overview?	The scope of work is limited to approximately 255,436 in Arizona and 58 in Hawaii.
81.	Gainwell Technologies LLC	Tech-29	9	The requirement references encounter data, which indicates that Managed Care lives will be included in scope. Does the requirement anticipate both FFS and encounter claims to be available through the API for their beneficiaries? If so, would AHCCCS please provide the count of active lives in the Managed Care population that should be included?	The scope of work is limited to approximately 255,436 in Arizona and 58 in Hawaii. The Managed Care population is not included in the scope of this project.
82.	Gainwell Technologies LLC	3. Purpose of the Request for Proposal	5	Can you please provide the total expect claim count for eligible members for each state?	See #15
83.	Gainwell Technologies LLC	Tech-09	8	What is the source data platform and can AHCCCS provide additional details on the data origination or format intended beyond columnar pipe delimited flat files?	The source will be the agencies data warehouse.
84.	Gainwell Technologies LLC	7.3 Façade or Repository / ETL	7	Leveraging a data standard has significantly reduced both the administrative cost to the state and price from the vendors to the state. T-MSIS data formats have been commonly leveraged across Medicaid programs for CMS Access Interoperability and may bring significant value to AHCCCS. Would AHCCCS consider leveraging T-MSIS format as the standard for this CMS Interoperability and Patient Access Services proposal?	This project covers a subset of the Medicaid lives in Arizona and Hawaii and T-MSIS covers all Medicaid lives covered in Arizona and Hawaii. T-MSIS files are not being considered for this project.
85.	Gainwell Technologies LLC	Tech-09	8	Who is the data provider, i.e., data warehouse, MMIS, etc.? Is there a single vendor/provider or multiple providers based on claim type?	Pharmacy Benefits Manager (PBM) and the AHCCCS data warehouse are the data providers.



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86.	Gainwell Technologies LLC	Tech-29	9	The requirement references encounter data other than “encounter data from MCOs, PIHPs, and PAHPs, compensated based on capitated payment.” Will the data vendor preselect only eligible claims and filter out non-eligible?	The plan is to only send medical claims for the population covered by this RFP.
87.	Gainwell Technologies LLC	11. Pricing	35	AHCCCS has requested an all-inclusive rate. This will result in vendors increasing prices to AHCCCS to account for known and unknown rules (TECH-73) and maturity levels that AHCCCS may not be prepared to deploy. To avoid AHCCCS incurring cost throughout the life of the contract that may only be applicable in Year 3. Would AHCCCS consider an all-inclusive rate for the currently available data and maturity, with a rate card for future enhancements?	No, these considerations will not be made.
88.	Gainwell Technologies LLC	Tech-30	10	Will clinical data be included in the scope for this initial phase of deployment or is AHCCCS intending to include Clinical data iteratively post deployment, as an expansion or phase 2? Is clinical data currently available?	Clinical data may be available in the future but at this time AHCCCS does not have this data available.
89.	Gainwell Technologies LLC	Attachment D		Almost all, if not all Access Interoperability Solutions are provided in a SaaS model. How does AHCCCS intend on leveraging the Attachment D - Pricing Schedule by deliverable to account for said model? Would AHCCCS consider reviewing the Pricing Schedule to focus on the technical components versus the Project Management	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
90.	Gainwell Technologies LLC	Attachment D		Would AHCCCS consider revising the Attachment D - Pricing Schedule to account for an Implementation/Initiate Phase, Deployment/Execute Phase and Operations & Maintenance (O&M) (new) Phase for post Deployment/Execute activities?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
91.	Gainwell Technologies LLC	Attachment D		Please clarify the timeline for the Initiate Phase to ensure all vendors are providing similar metrics for pricing. For example, Initiate Phase should be for the 1 st 6 months of the project, as a result, Deliverable DEL-08 would only be accounted for 26 times in Year 1 and no longer continue through the following years?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.



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92.	Gainwell Technologies LLC	Submission of Proposal	47	Would AHCCCS be amenable to the vendors leveraging Arial font?	No. Refer to Special Instructions to Offerors Section Four (4), Submission of Proposal.
93.	Gainwell Technologies LLC	5.1 Transmittal Letter	48	2 nd paragraph references another portion of text for the Transmittal Letter requirement - "See paragraph 12 of this section (below)". Please provide the exact text that paragraph 12 would be reference related to this requirement.	This should say Paragraph "13" Request for Confidential/Proprietary Determination.
94.	Gainwell Technologies LLC	Additional Information (OPTIONAL)	52	Please let us know if Section 7. Additional Information (OPTIONAL) has any page limits	See Section 7 of the RFP's Special Instructions to Offerors wherein it explains that Offeror's may add additional information INSIDE the page limits, and this optional additional information is not intended to allow Offerors to circumvent the page limits.
95.	Ready Computing	11.2	35	Are fixed costs, such as hosting and licenses, included in the retainage amount?	All fees are included in the retainage fee.
96.	Ready Computing	Attachment D	1	The structure of the pricing schedule does not allow for fixed costs such as hosting and licenses. How should we indicate such fees?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
97.	Ready Computing	5 Offeror Minimum Qualifications to Bid	5	What impact level is your data classified as according to FedRAMP?	High.
98.	Ready Computing	1 AHCCCS/Med-QUEST Overview	4	What is the nature of the relationship between AHCCCS and Med-QUEST?	Arizona has an agreement (ISA) with Hawaii to run and manage its MMIS system.
99.	Ready Computing	7.1 Overall Architecture	7	How is Arizona data distinguished from Hawaii data?	All data between the States is separated. All files and processes between Arizona and Hawaii will be treated as distinct. As an example, when we send member data there will be two files, one from Arizona and another for Hawaii.
100.	Ready Computing	1 AHCCCS/Med-QUEST Overview	4	What kind of relationship does AHCCCS have with Med-QUEST to be an authorized custodian of Med-QUEST data?	Arizona has an Interagency Service Agreement (ISA) with Hawaii to run and manage its MMIS system.
101.	Ready Computing	7.1 Overall Architecture	7	Please clarify when stating that Arizona and Hawaii data is required to be segregated, do you require system segregation or logical database segregation?	Arizona and Hawaii data is required to be segregated as they are completely two different Medicaid organizations. Generally, logical database segregation is utilized to keep the Arizona and Hawaii database separate.
102.	Ready Computing	7.1 Overall Architecture	7	Does this segregation apply to the MPI?	Arizona and Hawaii data is required to be segregated as they are completely two different Medicaid organizations.



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103.	Ready Computing	General	5	How harmonized are the policies between Arizona and Hawaii?	Data policies are harmonized but being that they are completely different organizations there are differences.
104.	Ready Computing	KNOW-03	24	What is the expected scope of the training?	Scope of training should include: 1) List of file interfaces including layouts, transmission method, and purpose 2) Application screens including data mapping to where the data is sourced and where new/updated data is stored 3) Navigation of application screens 4) Data dependencies/requirements 5) Job scheduling tool used including triggers for initiating and impacts of abends 6) Process flows, including those through other entities/systems 7) Ticketing system(s) used, both for new development and for defects
105.	Accenture	Special Instructions to Offerors, Table B1, Narrative Proposal Section Number 5	49	Proposal Response Requirements for Narrative Proposal Section B1-5 Privacy and Security states that, "The offeror shall respond point-by-point to all requirements in Scope of Work, Section 8. Describe in detail the offeror's approach to how the solution meets or will meet the requirement." Can the State clarify if this statement refers specifically to Scope of Work, Section 8.5 Privacy and Security?	See #4.
106.	Accenture	3. Purpose of the Request for Proposal	5	Will the State allow for a Prime Contractor submitting with a 3rd Party Software-as-a-Service (SaaS) provider to satisfy the requirements of the RFP?	Refer to Uniform Instructions to Offerors, Section 3.4 and Uniform Terms and Conditions Section 5.2.
107.	Accenture	5. Offeror Minimum Qualifications to Bid	5	Will the State allow for an Offeror to supplement this requirement through the experience and qualifications of a teaming partner?	No, the Offeror (Prime Contractor) must meet the minimum qualifications.
108.	Accenture	3. Parties to this Contact	5	Will the State expand this definition to allow for a Prime Contractor and a SaaS partner with which the State would sign the software subscription agreement or is the State seeking to contract directly with a software provider only?	No, the State is not expanding the definition, the State is seeking to contract directly the Offeror this purpose.



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109.	Accenture	Special Instructions to Offerors, Table B2, Narrative Proposal Section Number 1	50	Proposal Response Requirements for Narrative Proposal Section B2-1 Approach/Methodology states, "Describe the offeror's approach to delivering the services outlined in the Scope of Work, Section 8. Approach and Methodology. Provide a response for each area in Section 8 (A-I)." Can the State please clarify the reference to section A-I? Does this instead refer to requirements in Scope of Work, Section 8.2?	See #2
110.	Accenture	Questions Due	1	Will the State please allow for a 2nd round of clarification questions after the initial answers are posted and extend the proposal due date to June 30th to allow all potential offerors time to incorporate changes to their solutions and proposals?	At this time we do not have a second round of questions built into our timeline.
111.	Accenture	3. Purpose of the Request for Proposal, 6.2, TECH-02, TECH-16, TECH-73, PROJ-01, PROJ-02, MNO-01	1, 6, 7, 8, 14, 16, 28	A number of the requirements anticipate that there will be no additional charges for technical changes and updates, including updates due to regulatory changes, delays caused by the State or another party, etc. As the scope of the regulatory changes, associated technical updates and impact of future changes on the implementation post go-live cannot be known at the time of contracting, what is the mechanism that the State would propose for the Contractor to recover these additional costs and amend the RFP to address this issue?	This is an all-inclusive contract with an all-inclusive rate.
112.	Accenture	6.1	6	Can the State please clarify that updates to federal standards apply only to the Patient Access and Provider Directory APIs that are in the scope of this procurement and do not include federal changes that might expand the scope of the implementation beyond what is currently contemplated in the Solicitation?	If the federal standards are updated, we will expect that the solution will be updated to comply with those federal mandates (Refer to Section 6 Contractor Responsibilities).



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113.	Accenture	TECH-39	11	Can the State please confirm and amend that future Da Vinci uses cases and FHIR implementation guides are specific to the Patient Access and Provider Directory APIs contemplated in the solicitation and do not apply to other APIs not in scope?	Da Vinci uses cases and FHIR implementation guides may change over time as new data elements are federally mandated, see TECH-39.
114.	Accenture	8.3 Testing, 8.9 Certification, 8.10 Transition	20-23, 29, 29-30	Can the State please clarify where within the response Offeror's should respond to requirements in Scope of Work for the following sections: Section 8.3 Testing Section 8.9 Certification Section 8.10 Transition	You may address this in your Narrative Proposal Section Number 1 of B-2 Approach/Methodology Narrative, see page 50 of the RFP.
115.	Accenture	Section 7.3 Façade or Repository/ ETL, TECH-08	7-8	Part (3) of TECH-08 states, "The Contractor shall, for the patient access API, at a minimum, support integration of AHCCCS/MQD data to be accessible content as required in 42 CFR 431.60(b) and 42 CFR 457.730(b) including: (3) clinical data, including laboratory results, that is not maintained but if maintained by AHCCCS/MQD in the future, no later than one (1) business day after the data is received by AHCCCS/MQD". Can the State please expand upon the statement "if maintained by AHCCCS/MQD in the future? Is the intent for offerors to build an all-inclusive solution for clinical data, which will not be used until and unless the source data eventually is populated and include this within their price?	CMS has mandated that clinical information be made available through this solution if such information is maintained.
116.	Accenture	8.3.3 Operational Readiness TEST-25	23	Will the State please provide a projected Production volume number to ensure consistent estimates are used by all potential Offerors?	See #15
117.	CNSI	Scope of Work, Item 5 Offeror Minimum Qualifications to Bid	5	If the vendor's solution is currently in production in a FEDRAMP Moderate cloud environment and the vendor commits to submitting the FEDRAMP SSP prior to project go live, will the state consider this sufficient to meet the minimum bidding qualifications?	The SSP should be submitted at least 90 days before project go live.



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118.	CNSI	5.3	51	Section 5.3 references Attachment A: Pricing Schedule. Please confirm that Pricing should be submitted using the Attachment D template and should be referenced as Attachment D in the proposal.	Yes. See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
119.	CNSI	5.2	49	Narrative Proposal B1.6 requires submission of FEDRAMP SSP or completed State of Arizona Baseline Infrastructure Controls. Please confirm that these items are excluded from the page count for this volume.	These items are excluded from the page count.
120.	CNSI	5.2	50	Approach/Methodology references that the proposal should provide a response for each area in Section 8 (A-I). Please confirm that this refers to Sections 8.2.1 through 8.2.8 of the Scope of Work (page 15).	See #2
121.	CNSI	5.2	51	Please confirm that if the Proposal Response Requirements do not require a point-by-point response (e.g. Training – Section B.2.5) then a general response that comprehensively describes the Offeror’s solution and approach is appropriate.	A point-by-point response is not needed if the response can be comprehensive and effectively summarized.
122.	CNSI	Attachment D		Attachment D does not include all of the Deliverables identified in the Request for Proposal. Will the Government provide an updated version of Attachment D that includes all Deliverables / CLINs so that each pricing submission is responding to the identical format to enable fair comparison?	See updated Attachment D: PRICING SCHEDULE with this solicitation amendment #4.
123.	CNSI	TECH-10	8	How will historical data be provided to the solution? Please provide the annual AZ and HI historical data volume for claims, encounters, pharmacy and clinical from Jan 1 2016.	See #15
124.	CNSI	TECH-22	9	Does the State have an Enterprise Identity Management Solution for Member authentication that the Contractor solution shall integrate with? If yes, please provide details on the existing EIM solution.	No
125.	CNSI			Testing (8.3), Certification (8.9) and Transition (8.10) are not included in the proposal response requirements. Are vendors required to respond to these sections? If yes, please update the proposal response instructions to reflect where these responses belong.	See #114
126.	CNSI			Please provide the annual AZ and HI FFS claim daily/monthly/yearly volume for the last 3 years.	See #15
127.	CNSI			Please provide the annual AZ and HI Encounter claim daily/monthly/yearly volume for the last 3 years.	See #15



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128.	CNSI			Please provide the annual AZ and HI Clinical Data daily/monthly/yearly volume for the last 3 years.	At this time neither AZ nor HI retain clinical data.
129.	CNSI	Uniform Ts & Cs	56	Section 3.7 Property of the State says that “Any materials, including reports, <i>computer programs</i> , and other deliverables, created under this Contract are the sole property of the State. Additionally, Section 3.8 Ownership of Intellectual Property states that “Any and all intellectual property, including but not limited to copyright, invention, trademark, trade name, service mark and/or trade secrets created or conceived pursuant to or as a result of this contract and any related subcontract (“Intellectual Property”), shall be work made for hire and the State shall be considered the creator of such Intellectual Property.” If a Contractor intends to deliver Intellectual Property that may be commercially owned by the Contractor or third parties that provide software, will the State accept and negotiate an offer that includes commercially available licensing for Contractor Intellectual Property?	See Uniform Instructions to Offerors Section 3.3 Exceptions to Terms and Conditions
130.	CNSI	MNO-01	28	It is standard practice for SaaS solutions for clients to pay for the configuration and testing of product changes in their own environments. Please confirm that costs related to the implementation of a given rule change in the AZ/HI environment (e.g, configuration of the product to accept new data sources for the rule change or testing of the rule change with AZ/HI data) can be charged through a change order to AZ/HI.	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.
131.	CNSI	PROJ-03	15	Please provide a full list of all tools the vendor is expected to utilize or integrate with, including but not limited to - project management, data management, testing, or integration.	Currently the State of AZ is using SharePoint, MS Office, and MS Project for ongoing projects.
132.	CNSI	8.9	29	Please identify which certification checklist or standards will apply to this project.	Vendor shall be responsible for complying with all CMS certification requirements as defined and/or updated by CMS throughout the implementation and operation of the solution.
133.	CNSI	PVS-13	26	The AHCCCS Electronic Data Exchange Request Form appears to be a business agreement between entities. Will a single agreement between the vendor and AHCCCS be sufficient or will each employee need to sign a separate form?	One data exchange request is submitted and an External User Affirmation Statement for all persons identified to have access to the Solution and data.



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134.	CNSI	TECH-52	12	Please provide a list of the data suppliers and their associated data files (interfacing system and types of data) that will provide information to the solution?	AHCCCS and MedQuest plan on submitting all required data elements found in the CMS Interoperability and Patient Access Final Rule.
135.	CNSI	3.7 5.3.2	42	Where should taxes be identified in the price sheet?	We do not believe that there are any taxes for this service, but if you feel that there are taxes you can add an explanation to the bottom of the price sheet. FYI – if taxes are applicable, taxes will not be included in the cost scoring.
136.	CNSI	TECH-61	13	Please provide a list of Spanish and Navajo translation vendors used by the state.	Statewide awarded contractors are publicly viewable in our Arizona Procurement Portal (APP) under Statewide Foreign Language Interpretation and Translation Services. If you have difficulty finding them please Contact Helpdesk at 602.542.7600.
137.	IBM	Scope of Work- TECH-02, MNO-01, Special Instructions 5.3.1	5, 6 7 28 51	The State is requested an all inclusive contract that includes the labor for all future federal and state mandated requirements. While it is the vendors intent to utilize the software release cycle to update the software and remain compliant, the labor costs to implement and train the State staff is difficult to estimate without understanding the potential changes. Will the State allow for change requests as required for the implementation of these changes and as additional standards are released from Federal oversight?	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.
138.	IBM	Uniform Instructions to Offers 3.7.1	42	The State has asked for the social security number of the offeror employees. Would the State clarify this request to what employees that would need to comply with this request (i.e., Just employees that reside in AZ and are delivering services directly to this opportunity)?	See Federal requirements 26 U.S.C. § 6041A.
139.	IBM	Uniform Instructions to Offers 4.4	43	The Offerors submission may contain content that is considered intellectual property, will the State please allow for redaction of strategic information in the response?	Refer to Special Instructions to Offerors Section Thirteen (13), Request for Confidential/Proprietary Determination.
140.	IBM	Special Terms and Conditions 12.1	66	The Offeror will report cases of fraud and abuse by subcontractors and employees but will not have the ability within the scope of the contract to identify fraud by Members. Will the State please adjust this requirement to specify subcontractors and employees?	The term will remain as is.
141.	IBM	8.2.4 Change Management	18		The Contractor shall include the percentage of the staff member's time devoted to this project during solution development and after implementation.



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				<p>PROJ-19: The Contractor shall identify all key positions in the project governance structure and provide specific descriptions of their roles and responsibilities. The Contractor shall include the percentage of the staff member's time devoted to this project during solution development and after implementation. At a minimum key positions include the following; • Project manager • Project team leaders • Project sponsor • Executive sponsor</p> <p>Will the State confirm that key positions listed are not required, for compliance with RFP requirements, to be fully dedicated to the project at time of implementation or post-implementation?</p>	
142.	IBM	OFFEROR MINIMUM QUALIFICATIONS TO BID:	5	<p>The Offeror must have its FEDRAMP (Federal Risk and Authorization Management Program) SSP (System Security Plan) OR completed The State of Arizona Baseline Infrastructure Security Controls 2017</p> <p>Will the state clarify that FedRAMP authorization (or equivalent) is for infrastructure components hosting the proposed service?</p>	FedRAMP High.
143.	IBM	7.4 Consent and Identity Management / OAuth-OpenID Workflows	9	<p>TECH-22 The Contractor shall, for the patient access API, design, develop and implement on behalf of AHCCCS and MQD an identity management solution that maintains a rigorous authentication and authorization framework based on best practices and CMS mandates including standards identified in the Interoperability and Patient Access rule (CMS-9115-F) within the first 120 calendar days of the contract.</p> <p>Will the state clarify whether the proposed service is to federate with existing identity stores that serve patients' Medicaid-related services, or if the service is to allow members to register and maintain independent IDs as part of the proposed service itself?</p>	The identity management solution is for authentication for member access to their data.
144.	IBM	7.2 Solution Components	7	<p>TECH-06</p> <p>The Contractor shall design, develop, implement, maintain, secure and remain up to date with the technologies and specifications found in the CMS Interoperability and Patient Access Final Rule (CMS-9115-F) that reference 42</p>	When any applicable Code of Federal Regulations (CFR) references or any successor statute or regulation occur this solution shall comply with those regulations.



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				<p>CFR § 431.60, 42 CFR § 457.730, 42 CFR § 431.70, and 42 CFR § 457.760, and any applicable Code of Federal Regulations (CFR) references found within those CFR's or any successor statute or regulation.</p> <p>“Any applicable Code...or any successor statute or regulation” creates an unbounded requirement to any vendor. Will the state clarify that the intention of this requirement is limited to regulations directly relating to or succeeding the direct scope of the Patient Access Final Rule itself?</p>	
145.	IBM	7.5 APIs and FHIR Adapters	9	<p>TECH 29: The Contractor shall, as specified in 42 CFR § 431.60 and 42 CFR § 457.730 paragraph (b)(2), make encounter data accessible no later than one (1) business day after AHCCCS/MQD receives the data from providers, other than encounter data from MCOs, PIHPs, and PAHPs, compensated based on capitated payments.</p> <p>Does the state maintain any encounter data beyond what is maintained by MCOs, PIHPs, and PAHPs? Will any encounter data be provided during the initial scope of implementation?</p>	This RFP is for the FFS population and not the entire Medicaid population of either State.
146.	IBM	7.5 APIs and FHIR Adapters	10	<p>TECH 30: The Contractor shall, as specified in 42 CFR § 431.60(b)(3) and 42 CFR § 457.730(b)(3), make clinical data, including laboratory results, if AHCCCS/MQD maintains any such data, accessible no later than one (1) business day after the data is received by AHCCCS/MQD; to current AHCCCS/MQD members or the AHCCCS/MQD member's personal representative through the API.</p> <p>Please provide more information about any clinical data or laboratory results maintained by the state that should be made available to the proposed service.</p>	Currently AHCCCS nor MedQuest have clinical data. There have been discussions on working to attain that data and if that happens it would need to be shared through this solution.



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147.	IBM	7.3 Façade or Repository / ETL	8	<p>TECH-10 The Contractor shall accept SFTP batch transfer of data through columnar pipe delimited flat files.</p> <p>What will be the source of the data that the state will transmit to the proposed service? What application suite or integration software will be transmitting the source data to the proposed service? What kinds of mapping and transformation is the transmitting system capable of? Is the state open to leveraging other file formats, or transmitting data to the service directly as FHIR?</p>	The source for data will be a data warehouse. We will expect specifications for columnar pipe delimited flat files for this solution. Those files will be transmitted daily.
148.	IBM	7.3 Façade or Repository / ETL	8	<p>TECH-18 The Contractor's solution for the patient access API must have an Extracted\Transformed\Loaded (ETL) process for data that resides in an existing data store or in a different data store that was populated using approved, secured, and supported technologies.</p> <p>The state has asked for a managed service. Is it the intention of the state to approve vendor software architecture or software choices beyond the security compliance requirements as stated or referenced in this RFP?</p>	The State has noted their intentions throughout this RFP the expectation is that those requirements are met.
149.	IBM	7.4 Consent and Identity Management / OAuth-OpenID Workflows	9	<p>TECH-25: The Contractor's solution for the patient access API must be able to generate and apply a Part 2 (42 CFR Part 2) consent for disclosure of substance use disorder records prior to allowing access to Part 2 records.</p> <p>TECH 26: The Contractor's solution for the patient access API must be able to restrict access to certain records based on patient consent level.</p> <p>Will the state clarify why a patient would need to consent to disclose that patient's records to that patient? This requirement seems to be related to payer-to-payer or future third-party consent regulations.</p>	Consent is not required for a patient to access their own records. But the records should still carry the Part 2 flag upon its disclosure.



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150.	IBM	7.4 Consent and Identity Management / OAuth-OpenID Workflows	9	<p>TECH-21 The Contractor shall permit access to the solution based on assigned user roles. The Contractor shall work with AHCCCS/MQD in the development, assignment, and management of user roles.</p> <p>What user roles does AHCCCS/MQD envision beyond those mandated by the SMART on FHIR and related Patient Access implementation guides?</p>	At this time AHCCCS does not envision any other roles beyond what is stated in this RFP and Interoperability and Patient Access Final Rule.
151.	IBM	7.5 APIs and FHIR Adapters	10	<p>The Contractor shall, as specified in 42 CFR § 431.60(b)(4) and 42 CFR § 457.730(b)(4), make information about covered outpatient drugs and updates to such information, including, where applicable, preferred drug list information, any tiered formulary structure, and/or UM procedure that pertains to those drugs, accessible no later than one (1) calendar day after receipt of the information or updates to such information from the AHCCCS/MQD PBMs. The states' PBMs update the approved drug lists, which are updated frequently, including daily, weekly, and quarterly. The Contractor will be provided with all of the drug lists used by AHCCCS and MQD including Medicare Part B Drug Lists.</p> <p>How will the states' PBM provide formulary data to the proposed service? What data formats can the PBM provide, and how can the PBM transport the data to the proposed service?</p>	State PBM's are subject to procurement rules and thus a PBM may change over time. At this time the PBM's have not finalized their methodology for transferring data.
152.	IBM	7.5 APIs and FHIR Adapters	10	<p>TECH 37: Provider Directory API – content requirements. As specified in 42 CFR § 431.70(b) and 42 CFR § 457.760 paragraph (b), the Contractor's solution for the Provider Directory within the API must provide a complete and accurate listing of AHCCCS/MQD provider information as specified in section 1902(a)(83) of the Social Security Act, including provider names, addresses, phone numbers, and specialties, and this shall be updated no later than every thirty (30) calendar days after AHCCCS/MQD receives new provider information or updates to provider directory information.</p>	AHCCCS is planning on distributing data for this solution through a pipe delimited file and the standards for that file are provided by the Contractor.



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				What system will be providing the Provider Directory API data? Will this data be formatted as FHIR data and transmitted over SFTP? If not, please provide more details about how the provider management system will provide this data to the proposed service.	
153.	IBM	7.7 Hosting and Security	11	TECH 47: The Contractor's solution shall have a performance monitoring dashboard that shall be available 99.95% of the time, twenty-four (24) hours a day, seven (7) days a week, including planned downtime. Will the state clarify that the uptime SLA <i>excludes</i> planned downtime?	The uptime SLA includes planned downtime.
154.	IBM	7.7 Hosting and Security	12	TECH 48: Except for scheduled downtime and approved maintenance times, the Contractor's solution shall be available 99.95% of the time, twenty-four (24) hours a day; seven (7) days a week, including planned downtime. Will the state clarify that the uptime SLA <i>excludes</i> planned downtime?	The uptime SLA includes planned downtime.
155.	IBM	7.7 Hosting and Security	12	TECH-53: The Contractor's solution shall accommodate a user interface response time of two (2) seconds or less per discrete transaction. Will the state clarify that the response time can be calculated at the data-level service? Vendors cannot calculate or be held to a user interface response time for third party applications.	The response time can be calculated at the data-level service.
156.	IBM	7.7 Hosting and Security	13	TECH-61: The Contractor shall ensure member resources be posted within thirty (30) calendar days of the time at which the solution goes from the development and test environment to the production environment. The Contract shall provide privacy and security information in accordance with 42 CFR 431.60(f) and 42 CFR 457.730(f) that is at a 6th grade reading level, including but not limited to English, Spanish, and Navajo languages and other languages as identified by AHCCCS/MQD in an ADA compliant format in an easily accessible location on or a link through the AHCCCS and MQD public websites and through other appropriate mechanisms through which AHCCCS/MQD ordinarily communicates with current and former	Currently, there are no languages beyond English, Spanish and Navajo that the State of AZ mandates. The contractor will be expected to manage documentation in English, Spanish, and Navajo languages.



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				AHCCCS/MQD members seeking to access their health information held by AHCCCS/MQD. What languages beyond English, Spanish, and Navajo will AHCCCS/MQD mandate? Will the state provide translation services for documents beyond English and Spanish?	
157.	IBM	8.2.1 General Project Management Requirements	16	PROJ-02: In addition, AHCCCS and/or MQD have the authority to delay implementation and installation of the solution, or any part thereof. The Contractor agrees to adjust the PMP and project schedule deadlines to consider any AHCCCS and/or MQD or Contractor caused delays...Such readjustment, rescheduling or modification of the project shall be at no additional cost to AHCCCS and/or MQD. The state seems to be forcing a vendor to accept the risk of costs overruns because of an unbounded implementation delay that is not the fault of that vendor. While a vendor would and should work with state to minimize and impact, will the state clarify that delays that are not the fault of the contractor will be managed through a change control process?	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.
158.	IBM	8.2.1 General Project Management Requirements	18	PROJ-23: The Contractor's key personnel positions may not be vacant for more than ten (10) business days without a qualified substitute (temporary replacement). Will the state consider a longer timeframe for key personnel vacancies? 10 days may not allow any vendors enough time to hire staff or transition from other accounts—and have them approved by the state.	No, the Contractor's key personnel positions may not be vacant for more than ten (10) business days without a qualified substitute (temporary replacement).
159.	IBM	8.5. Privacy and Security	25	PVS-04: As part of the proposal submission, the Contractor shall submit a security and privacy assessment and SSAE-18 assessment or its equivalent. Third party SSAE-18 audits are held for each operational accounts and require significant input by the Contractor and the auditor. Will the state consider	Third party security assessments will be accepted.



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				regular, relevant security audits performed for the service at the service level instead?	
160.	IBM	Attachment_D Pricing Schedule		Please verify that additional deliverables may be added to Attachment D in creating the pricing schedule	Refer to Solicitation Amendment Two (2)
161.	IBM	Attachment_D Pricing Schedule		How should annual M&O and/or software be represented in the Pricing Schedule (Attachment D)?	Refer to Solicitation Amendment Two (2)
162.	IBM	Attachment_D Pricing Schedule		Offerors understand that the Federal government will continue to improve the Interoperability rules. Will State please allow Offerors to include a pool hours estimate for the labor implementation of future Federal and State mandated changes? These hours will be used via a mutually agreed change control process between the State and the Offeror.	The contract is an all-inclusive contract which includes federal and/or state mandated change and updates. The Contractor shall not request any additional funding for any changes or updates that are requested or required under this contract.
163.	Edifecs	1 - Overview	4	Please confirm that MedQuest FFS has 58 (fifty-eight) members	MedQuest FFS has 58 members.
164.	Edifecs	Tech-13	8	Is the State wanting to load historical data for all Medicaid members or only active FFS Medicaid members?	Historical data for all past and present FFS members since 1/1/2016.
165.	Edifecs	7.1 Overall Architecture	7	Can AHCCCS and MQD member data coexist in the same data space or should each member's data be kept separate?	Data must be separated.
166.	Edifecs	7.1 Overall Architecture	7	Does the State intend for the solution provider to set up separate patient and provider API endpoints for AHCCCS and MQD or will AHCCCS and MQD share the patient and provider API endpoints?	The solution provider must set up separate patient and provider API endpoints for AHCCCS and MQD.
167.	Edifecs	Tech - 21	9	Does the State have an existing identity provider such as LDAP, Active Directory, Azure B2C or is the State looking for the vendor to provide member registration services to access the API?	In regards to TECH-21, the solution provider must be able to provide member registration. Utilization of Active Directory may be possible.
168.	Edifecs	Tech-38	11	Please explain All Inclusive Rates and how this pertains to the FFS claims data for the Patient related data	This is a standard term that just means we will not be paying separately for travel, overhead, or other costs if they are applicable to the contract. Your rate should be inclusive of all costs.
169.	Edifecs	PURPOSE OF THE REQUEST FOR PROPOSAL (RFP)	5	Will the State provide all relevant data for Patient and Provider API in CMS recommended IGs, ie CARIN, CMS JSON, etc? If not please specify format for each data item in scope.	AHCCCS is planning on distributing data for this solution through a pipe delimited file and the standards for that file are provided by the Contractor.



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170.	Edifecs	TECH-08	7	Beyond the medical claims, do you receive third party claims such as Pharmacy, dental, vision and behavioral claims that need to be sent to the Interoperability solution? If Yes, can these claims be provided in the same format as medical claims such as the CARIN CPCDS format?	AHCCCS is planning on distributing data for this solution through a pipe delimited file and the standards for that file are provided by the Contractor. There will be data provided by the PBM for pharmacy claims and formulary and we are unsure what format those will be provided.
171.	Edifecs	TECH-08	7	What are the types of clinical data you receive and manage? (example: Lab results, Admission transactions, discharge summary, Care Management)	Currently AHCCCS nor MedQuest have clinical data. There have been discussions on working to attain that data and if that happens it would need to be shared through this solution.
172.	Edifecs	TECH-08	7	If you receive and manage clinical data, do you consolidate and normalize all of the clinical data in a data repository, identified with a master patient index?	Currently AHCCCS nor MedQuest have clinical data. There have been discussions on working to attain that data and if that happens it would need to be shared through this solution.
173.	Edifecs, Inc.	Sec#8.2.1 - General Project Management Requirements PROJ-01 and PROJ-02	16	How would scope, timelines, and cost be contained?	AHCCCS ISD Project Team will oversee.
174.	Edifecs, Inc.	Sec#8.3.1 Testing General: TEST – 02:	21	Would the State provide base requirements or participate in Fit Gap activity before system requirements can be documented? What would be the anticipated timelines?	A proposed Fit Gap activity would in the project schedule that is submitted in the first thirty (30) calendar days of the contract
175.	Edifecs, Inc.	8.3.1 Testing General: TEST – 08:	21-22	Based on our interpretation, it seems that the UAT test execution is owned by AHCCCS while the test cases, scenarios, and test data will be owned by us. Is our assumption correct? If so, how do we procure data from AHCCCS? If so, should the entity that designs the solution design the UAT test cases?	AHCCCS would own UAT including test cases, scenarios, and execution. The test cases and scenarios the contractor is required to provide are those from earlier testing phases such as System Integration Testing (SIT). I would expect an initial seeding of the data from AHCCCS would be performed and then part of the solution would require processes to keep the data in sync between the 2 systems.



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176.	Edifecs, Inc.	8.3.1 Testing General: TEST – 15:	22	Based on our interpretation, it seems that mapping documents along with the base business requirements are owned by customer in general. We can turn in developed artifacts and documentation associated with it but not the requirements document as they form the basis to support the AHCCCS team. Please confirm if this is acceptable with AHCCCS.	This requirement relates to data being provided to the Contractor from AHCCCS. The expectation is that each data element will have mapping of how it flows to the location in which it is ultimately stored, including any transformation of that data. In essence, documenting the ETL rules applied to the data. These documents would be created and maintained by the Contractor and provided to AHCCCS.
177.	Edifecs, Inc.	8.3.1 Testing General: TEST – 16:	22	If this were to be a SaaS proposed solution, is AHCCCS looking to have Read, or Read/Write access to infrastructure? Please respond considering the proposed solution as SaaS offering.	AHCCCS would require read access for a proposed SaaS offering.
178.	Edifecs, Inc.	Sec# Uniform Instruction to Offerors: 3.11 - Offer Preparation	43	As a cost-saving approach, we'd like to propose a hybrid (onshore/offshore) resource model while staying compliant with HIPAA and CMS privacy policies. Is AHCCCS open to this approach? We would like to better understand the State's offshore policy and restrictions. a) Are there restrictions on using offshore resources during implementation and ongoing hosting/support operations? b) using offshore resources for limited and non-production related work such as creating implementation guidelines or map development, system configurations, (where there is no PHI involved in any of these activities) during implementation can significantly reduce the cost of such projects to our customers. Is the State open to allow offshore resources for such activities? c) For our SaaS/Hosting operations - the data is stored onshore in the US, but our offshore team will have "access" to hosted systems and customer data including PHI. Is this allowed?	The term will remain as is, and AHCCCS will discuss any approaches to maintain compliance with the awarded vendor.



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179.	Edifecs, Inc.			Is AHCCCS looking forward to implement a SaaS or an on-prem solution? Please clarify and share your preference in order for us to provide accurate pricing model and customize the proposal based on the State's preference.	AHCCCS looking forward to a SaaS solution.
180.	Edifecs, Inc.			Is there any expectation for a fix number of environments? If yes, please specify the number of environments required.	Expectation is that there will be an environment that supports End-to-End User Acceptance Testing that will support any testing that AHCCCS staff needs to perform to sign-off on acceptance of new development, enhancements, or fixes. This will include, but not be limited to, application screens, file transmissions, and other interfaces. Further, support for up to 2 concurrent releases being tested independently for each HI/AZ is needed.
181.	Edifecs, Inc.	8.3.1 Testing General: TEST – 07:	21	Is there any expectation for multiple test environments? If yes, please specify the number of test environments required.	Expectation is that there will be an environment that supports End-to-End User Acceptance Testing that will support any testing that AHCCCS staff needs to perform to sign-off on acceptance of new development, enhancements, or fixes. This will include, but not be limited to, application screens, file transmissions, and other interfaces. Further, support for up to 2 concurrent releases being tested independently for each HI/AZ is needed.
182.	Edifecs, Inc.	8.4. Training and Knowledge Transfer: KNOW 02:	24	From a solution perspective, we are bringing the technology to assist in the adoption of FHIR-related mandates as released by the CMS. The line item# KNOW 02 also talks about training the member users and it's not a usual thing. Because, the FHIR product that AHCCCS is planning to implement will enable the technology rather than being just a member user interface. Considering this, please clarify the following: 1) Is there any specific expectation to a specific scenario around member usability and for which application?	The selected contractor may be asked to provide information that would go directly to the member such as TECH-61. An example of training is found in TECH-58.



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				2) Is the expectation around member training really an expectation for help or documentation of the member application? Who is responsible for developing and maintaining this member application?	
183.	Edifecs, Inc.	8.4. Training and Knowledge Transfer: KNOW 09:	24	Is the vendor responsible for the documentation as seen by the AHCCCS' members? If yes, will that be considered separate from the training materials?	The selected contractor may be asked to provide information that would go directly to the member apart from the training materials. As an example, see TECH-05.