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Alabama Department of Mental Health
Certified Community Behavioral Health Clinics (CCBHC) Data Platform
RFP 2025-13 Q&A

1. Why is the agency posting a new bid for these services so soon after a recent bid for the same services was awarded, RFP 2025-08?
   Answer: There were critical data requirements that were not included in the original announcement.

2. Section 3.6.7 requires respondents to submit a "Valid StateRAMP Security Snapshot Score" with their response. Obtaining one takes "Approximately 3 Weeks", past the deadline when proposals must be mailed. Can the language be changed to provide such proof at a future date as opposed to with the response? Any solution that is heavily customized or does not currently exist will not have a valid proof or score.
   Answer: RFP wording in section 3.6 General Systems Functions Requirements should be superseded and replaced with the words "upon contract execution" instead of "at the time of proposal submission".

3. Which EHRs are currently utilized by the 19 CMHCs/CCBHCs?
   Answer: The EHRs used by the CMHC's are Avatar (Netsmart), CareLogic (Qualifacts), Echo Management Group, Credible (Qualifacts), and some in-house EHR's.

4. Which interoperability platform is used by the HIE?
   Answer: Medicaid's Alabama One Health Record

5. Can the department clarify the budget and funding source for this project?
   Answer: The ADMH has a set budget for this work. There will be mixed funding sources.

6. Can the department confirm the desired implementation timeframe or term for the awarded contract?
   Answer: The desired implementation date of the contract is January 15 but is subject to final approval by Legislative Contract Review Committee.

7. Does the department have any prohibitions regarding the use of offshore resources?
   Answer: Legal

8. The RFP is listed as due by 3 p.m. on 11/21 – is that 3 p.m. central time?
   Answer: Yes

9. What information must be included on the cover page? Should the signature be included on this page, or are we permitted to include a signed cover letter?
   Answer: A summary of your response.

10. Items B and C in the Statement of Work chart on page 6 specify that these sections cannot exceed 10 and 5 pages, respectively. Should these be included as individual sections that are independent from the information requested in sections 3 through 8 of the RFP and, if so, where in the document should they be placed? Neither appear in the prescribed format on page 38.
Answer: Yes, please include as independent sections.

11. Should we submit our responses to the RFP items listed on pages 12-36 (sections 3 through 8) in separate sections? Is there a page limit to our responses for these items?
Answer: Please see response to question #115.

12. Is there a certification we can submit in lieu of a StateRAMP Provisional or Authorized status letter or valid StateRAMP Security Snapshot Letter? The process of obtaining one of these may exceed the time left before proposals are due.
Answer: RK

13. What specifics are required for the completed detailed cost sheets (developed by Offeror) requirement listed on page 38?
Answer: The ADMH is looking for a detailed budget relating to the cost of doing business. Please include the standard budget line items in your response.

14. Which specific questions in sections 3-5 require an offeror response code response, and do all questions that require an offeror response code also need a narrative response?
Answer: Offeror's narrative responses help us to determine the accuracy of your selected response code, and are considered as part of the completeness of your submission. It is the PROPOSER's decision on whether or not to include this information.

15. Does the original signature have to be in ink or is an electronic signature sufficient?
Answer: Either is acceptable.

16. Is there a current population health system being utilized for ADMH CMHCs?
If there is an existing platform, is there an expectation to migrate any data into the new platform?
Answer: Yes, we do, yes there is.

17. How many users will be using the platform? Specifically, how many users for each role?
Answer: TBD

18. Can the state provide a comprehensive list of all systems expected to integrate with the platform?
Answer: ALOHR, Providers' EHR

19. The RFP mentions 19 ADMH CMHCs, can more detail be provided on what these systems are, what EHR vendor these clinics use?
Answer: See response to question #3.

20. Is there an expectation for the platform to support specific integration standards?
Answer: Yes, Industry Standards

21. What types of data standards will be used for clinical system integrations such as EHRs and HIE platforms?
Answer: Industry Standards

22. What Claims system vendor will integrate with this platform?
    Answer: Alabama Medicaid Agency and their vendor that handles their claims.

23. Regarding section 3.11.5, can more detail be provided for this requirement? Is there a security consideration for disabling the back button for web-based applications or another use for this requirement?
    Answer: Yes

24. 3.6.7, Page 15 - Would the state please confirm whether the RAMP Ready Status relates only for the hosting environment the solution resides in?
    Answer: Confirmed

25. 3.6.7, Page 15 - If a bidder's hosting facility is FedRAMP certified, would this meet Alabama's requirements?
    Answer: RK-OIT

26. 3.6.7, Page 15 - Is ADMH open to providing time for vendors to obtain their snapshot, provisional or authorized status from StateRAMP, or time prior to have their full solution hosted in a FedRAMP/StateRAMP cloud environment?
    Answer: Yes

27. General: Would ADMH please provide the budgeted amount that has been set for the initial term of the contract?
    Answer: See response to question #5.

28. General: There does not appear to be a section in the RFP which addresses a vendor's ability to mark aspects of their response as "proprietary" or "confidential". Would the State please address this and/or add a section which would enable vendors to be protected from the release of such information as financials, trade secrets, proprietary intellectual property (IP) and more?
    Answer: Legal

29. 3.7.4 : Can the state clarify what they mean by "direct network work"?
    Answer: Changes to any Internal State Network/State owned devices

30. 3.7.5 : Can you please provide more information on the use cases for the requirement to receive data from electronic mailing systems (email) and google maps?
    Answer: The ADMH will need data from these outside systems to track heat maps and geofencing for service locations, etc.

31. 3.7.8 : Can the state clarify what ad hock report development they expect a "non-technical user" to be able to complete?
    Answer: Should be able to use the reporting tool to build their own reports

32. 3.9.1 : Can you please provide clarity on who will have approval authority to any and all changes. The requirement lists CCBHC.
    Answer: The ADMH holds all approval authority not the CCBHC.

33. Section 1, Applicant Qualifications; Page 4- In Point 1, it states that the firm must meet the State of Alabama vendor requirements. However, these vendor requirements are not provided in the RFP document. Could the ADMH please specify which vendor requirements we need to meet and address in our response?

- Answer: In order to transact business in the State of Alabama all businesses domestic and foreign must be registered with the Alabama Secretary of State Office. (Domestic means within the State of Alabama. Foreign means out-of-state.) Website: www.sos.alabama.gov

- If contracted with the State of Alabama, all vendors must enroll <u>and</u> actively participate in E-Verify. Website: https://www.e-verify.gov/

- ALL vendor payments are processed thru the State of Alabama Accounting and Resource System (STAARS). All vendors must register with STAARS Vendor Self Service. Website: https://procurement.staars.alabama.gov/webapp/PRDVSS1X1/AltSelfService

34. **Evaluation Criteria: Page 6-**The table in this section appears to be from the older RFP document, as it does not include evaluation criteria, points, or page limits for Sections 3 through 9. These sections require detailed responses and were not part of the previous RFP. Could the ADMH please check and confirm.
Answer: The evaluation criteria listed on page 6 is correct.

35. Section 3.6 General System Functions Requirements, Page 15 – In point 3.6.4, vendors are required to include proof of current StateRAMP Authorization status in the form of a StateRAMP Letter. Our solution is FedRAMP authorized. Will this be sufficient to meet this requirement?
Answer: RK

36. Section 7.1 Company History – Vendors are requested to provide evidence of their company's commitment to the health care and mental health fields. Could the ADMH please specify what type of evidence is expected to address this requirement?
Answer: Vendors should provide information to show reputable history of service delivery related to work with mental health and other behavioural health conditions.

37. General- Could the ADMH please clarify the expected duration or length of the project? **What is the projected implementation date for the vendor's solution?**
Answer: The awarded contract will be for a two-year period with possible options of renewal each year after.

38. General- What is the budget allocated for this project?
Answer: See response to question 5.

39. General- How many users are expected to use the system?
Answer: The ADMH cannot confirm the number of expected system users at this time. We will look to the expertise of the selected vendor to determine user needs of each agency.

40. **Contact Page; Page 43** - The RFP instructs vendors to include the contact page before the executive summary and cost proposal. Does this imply that the cost proposal should be submitted as a separate document? No. If so, submission instructions outlined in Section 9.3 may need to be revised. Please clarify and confirm.

41. **Evaluation Criteria; Page 6**: The cover page has been allocated 5 evaluation points, but we could not locate any specific instructions regarding the content required for this page. Could the ADMH please clarify the elements or information that should be included on the cover page to meet this criterion?

Answer: The cover page should list for whom and why the RFP is prepared, and any other relevant information related to the agency that is responding.

42. Sections 3 Technical and Functional Requirement– Can we create Requirements Traceability Matrix (RTM) in Excel including the response codes outlined in RFP Section 9.5 to address the requirements listed in Sections 3, and submit it as a separate document with our main response? Please confirm.
Answer: Yes.

43. **Section 9.5 Instructions for Responses**: Vendors are instructed to use response codes to indicate their system's ability to meet specific requirements. It appears that these response codes should be applied to respond to the requirements outlined in Section 3 (technical and functional requirements). Could the ADMH please confirm if this understanding is correct or specify the sections where response codes should be used?
Answer: Yes, please respond in section 3.

44. Section 7.3 Financial Information- Financial Statements are confidential documents. Can we submit our financial statements as a separate document along with our main response?
Answer: You may elect to respond to this question by indicating that you will provide the Financial Statement separately upon request.

45. **Section 7.4 Client Reference List**: Can we provide references from our commercial clients with similar scope, implemented within the past three years?
Answer: Yes, that would be satisfactory.

46. **General**: Given the comprehensive scope of the RFP and the requirement to submit the response by mail—demanding early completion to meet the delivery timeline—would the ADMH consider granting a two-week extension to allow us to thoroughly address each requirement?
Answer: Do to the timeframe for which this RFP is being issued and required, no additional time can be extended.

47. As part of the Selection Criteria, its mentioned that we need to have "Specialized expertise and experience in statewide population health data management. ". Is this mandatory. If an organization has experience in EHR implementations for States and has a new product encompassing all the expected features; can they bid?
Answer: It is preferred that there be specialized expertise in the area of statewide population health management.

48. Would the State please provide the number and types of state-specific measures it would like to capture?
Answer: Please refer to the SAMHSA website here to locate the CCBHC Certification Criteria Appendix B-Behavioral Health Clinic Quality Measures.

49. Can the state provide the anticipated total number of lives with all 19 CCBHCs? What timeframe does the state foresee rolling out the additional 17 CCBHCs?
Answer: There may be up to 19 CCBHCs total in the future of this new model of care.

Statewide, there are approximately 81,000 lives that will be managed by through the population health management database. CMHCs will be rolled in at varying times throughout the demonstration but is anticipated that up to 2 or more per year may join each year of the demonstration.

50. . What is the EMR landscape amongst your participants? Can you please share how many legacy systems of record exist, and the technical architecture details on each one?
Answer: See response to question #3.

51. What method of data exchange and format are you expecting to support?
Answer: Anything in line with Industry Standards

52. What are the preferred and required risk models for population health management and the care coordination platform?
Answer: The ADMH would look to the expertise of the chosen vendor to identify the preferred and required risk models.

53. Overall Question: Does the state anticipate the need for maintenance and operation support during the contract?
Answer: Yes

54. Overall Question: Has a statewide EHR solution been procured? If so, what is it? Or does ADMH expect CMHCs to use their existing EHRs to integrate with the vendor's solution? In that case we will not have a centralized EHR. Is this correct assumption?
Answer: ADMH expects CMHCs to use their existing EHRs to integrate with the vendor's solution

55. Overall Question: Is the expectation that the system will be built and hosted in the vendor's platform? Can this be on Cloud (either Microsoft Azure, AWS or GCP or Private) or on-premise?
Answer: Required to be hosted on cloud, preferably a government cloud

56. Overall Question: Is all data governance measures in place for the data exchange necessary for this project? The ADMH has secured the proper data governance documents necessary for our current efforts. Or should the vendor anticipate to also assist with data governance between entities?
Answer: Most governance measures are in place, however, ADMH expects vendor to assist as needed.

57. Overall Question: Is there an existing statewide HIE (i.e., Alabama One Health Record) and/or behavioural health data oversight committee or workgroup that ADMH would expect the contractor to be working with? If so, which is that? If so, should we expect that clinical data and lab results will be submitted to the HIE, and the vendor's system should pull from the HIE?
Answer: No, there is not data oversight committee.

58. Overall Question: Can the state describe its technical resources/staff that will be made available to the awarded vendor for project management, etc.
    Answer: ADMH is anticipating to hire a technical project manager

59. How many data sources will need to interface with the system? Please provide the number and types (i.e., DB2, SQL Server, others) and size of source databases, and a description of the data types (e.g., claims, member, provider, etc.) and vendor product names from which data conversion is expected. If you are unable to provide this information, please share any metrics you can.
    Answer: Determined during the project evaluation by the vendor

60. What is the expected timing for updates to the system or data interchange between the vendor's system and the legacy systems (e.g., Nightly? Weekly? Other?)
    Answer: At least nightly

61. Roughly how many reports are required for SAMHSA and CMS? At what frequency are these reports due? Federal report requirements are subject to change.
    Answer: At this time, we are uncertain as to the amount of on-demand reports that will be expected.

62. Which risk stratification model is used by the State and is there anything additional on top of the same which is expected?
    Answer: Please see response to question #51.

63. In reference to the RFP Closing Data & Time listed in Section 9.9 on page 41 of 43 in the RFP, will the Department consider providing a two-week extension to allow additional time to accommodate a hard copy submission?
    Answer: No, no extension is available due to the time constraints.

64. In reference to Section I.A, Application Qualifications, the qualification requirement states that the Applicant must have proven experience with state or federal contract fulfillment. Would the Department consider broadening this requirement to include county or other local jurisdictions that have populations or complexity more than or equal to the population and complexity provided in this RFP?
    Answer: Yes, as long the vendor can show complex work with contract fulfillment this is acceptable. ADMH will consider any qualifications submitted.

65. In reference to Section 1.B in the Scope of Work on page 4 of 43 in the RFP, please provide additional details on requirements for a care coordination system such as details regarding the expected documentation, alerts, workflows, assessments, communication/messaging requirements between stakeholders/or organizations and/or any other care coordination requirements. (i.e. Can you provide examples of frequencies and types of workflows you are expecting? Will they use the platform to identify and address suspect codes and quality gaps closure?)
    Answer: The ADMH would look to the chosen vendor to provide reasonable guidance around

the frequencies related to workflows.

66. In reference to Section 1.B in the Scope of Work on page 4 of 43 in the RFP, is bi-directional integration needed only with EHRs or are there other systems?
Answer: EHRs and the HIE (ALOHR)

67. In reference to Section 1.B in the Scope of Work on page 4 of 43 in the RFP, please provide additional details for the referral exchange requirement. (i.e. What users at the CCBHC's will be expected to manage/exchange referrals? End-users of the system (i.e. Care Coordinators and other types of providers) Will referrals cover both behavioral and physical health related care? Yes Is there a need to also manage/exchange referrals with community-based organizations?) There could possible be the expectation to manage and or exchange referrals with other CBOs.

68. In reference to Section I.B, RFP 2025-13 CCBHC Platform Submissions and Address on page 5 of 43, the instructions for submission indicate that there should be four (4) copies submitted (1 original, 2 copies, and 1 electronically via a USB Flash Drive). It is understood that these should all be unredacted copies, but please provide instructions on the number of redacted copies that should be submitted. Should it be the same number of redacted copies?
Answer: See answer to question # 115.

69. In reference to Section 1.1, Objective on page 10 of 43, what is the Department's expected timeframe for implementation and Go-Live? Will the implementation be phased or will all CCBHCs go live at the same time?
Answer: The desired implementation date of the contract is January 15 but is subject to final approval by Legislative Contract Review Committee. Implementation will be a phased approach.

70. In reference to Section 1.3 in the Project Goals on page 10 of 43 in the RFP, please provide additional detail on the requirement for a risk stratification model (i.e., a list of variables it would like to be considered as part of the algorithm).
Answer: At this time, the ADMH does not have any preferred risk stratification models. We would expect the vendor to provide us with recommendations for such.

71. In reference to Section 2 in the Project Scope on page 11 of 43 in the RFP, please provide a list of all known/expected data sources and systems (HIE, Medicaid, Public Health, etc.) to be initially integrated.
Answer: See response to question question #18

72. In reference to Section 2 in the Project Scope on page 11 of 43 in the RFP, please provide a list of the EHR Systems in use at the 19 CCBHC's.
Answer: See response to question question #3.

73. In reference to Section 2 in the Project Scope on page 11 of 43 in the RFP, could the Department confirm there is an expectation that the vendor care coordination solution should capture care coordinator progress notes and enable these progress notes to be shared directly in the provider EMR system?
Answer: Yes, this is the expectation.

74. In reference to Section 2 in the Project Scope on page 11 of 43 in the RFP, could the Department please provide a list of any known KPI's it is seeking to measure?
Answer: The ADMH would look to the chosen vendor to develop a list of KPI for the project.

75. In reference to Section 3.6.2, Historical Data on pager 15 of 43, please provide the number of historical data sources and approximate size of the historical data that will need to be migrated.
Answer: Please see response to question #59.

76. In reference to Section 3.6.5, Hardware Expandability on page 15 of 43, please provide any available sizing estimates for data storage expectations and number of lives. This will help with designing the infrastructure to scale as needed with expectations.
Answer: Please see response to question #59.

77. In reference to Section 3.6.7, RAMP Ready Status on page 15 of 43, the requirement indicates that any resulting award will be made to selected respondent(s) offering a cloud product that processes, stores, transmits and/or could impact government data, only if the proposal includes written documentation that the cloud product has achieved Alabama StateRAMP Provisional or Authorized status or a valid StateRAMP Security Snapshot at the time of proposal submission. Based on the StateRAMP website (https://stateramp.org/product-list/) that lists all products that have a security status of Ready, Authorized, or Provisionally Authorized there are few, if any, vendors that could provide the scope of services outlined in this RFP. Does this requirement only pertain to the cloud environment and not include the applications that may be deployed on such an environment? If not, is the State willing to relax this requirement for comparable, industry recognized security certifications in lieu of this status such as HITECH or allow those without StateRAMP to deploy on the State's or Vendor's Government Cloud?
Answer: RK

78. In reference to Section 3.5 in Additional Fields on page 14 of 43 in the RFP, could the department list any additional State of Alabama specific quality measure requirements not otherwise listed in SAMSHA's measure spreadsheet?
Answer: Additional quality measures are yet to be determined by the ADMH.

79. In reference to Section 3.9.2, Quality Assurance Requirement on page 17 of 43, please confirm the number of environments that are planned/required for this solution (Development, Test/Training, Production).
Answer: Dev, Test, Training, Production

80. In reference to Section 5.4, Hosting Requirements on page 24 of 43, please provide the hosting provider for the State of Alabama's Government Cloud environment or if there is a preference in a cloud provider if the vendor utilizes a private cloud.
Answer: MS Azure Government Cloud (preferred)

81. Please provide a list of the types of users that will be utilizing the platform, such as Analytical, Non-clinical Care Team, Clinical Care Team, Administrative, etc.
Answer: Most if not of the users listed in the question could be an end-user of the platform

82. Could the Department provide any details on the role(s) within the Department and CCBH's will play in supporting this RFP implementation (clinical, business, technical, etc.)?
Answer: The ADMH will have the main role in the outcome of this RFP with varying degrees of involvement.

83. Understanding the funding sources/match rates could help vendors craft a creative pricing strategy to maximize its effectiveness. Could the department share any details on budget expectations including any federal grants it may be leveraging?
Answer: The ADMH encourages each vendor interested in this RFP to utilize their discretion in creating a price point that will ensure all deliverables of the RFP are met.

84. Do the Standard Terms and Conditions published by the State of Alabama Division of Procurement apply to this RFP? (Reference: https://prosalbucket.s3-us-east-2.amazonaws.com/PostProsal/66e062c1a692bbc659f5a697/20240910151618105_RFBStandardBoilerplateDOPITBBPV8.9.24.pdf)
Answer: Not all of the language apply. The language is for Request for Bids (RFB) which is issued to secure goods. Professional services are secured thru Request for Proposals (RFP). Applicable language: #2,3,4,5,6,7,8,9,11,12,13,14,20,33,34, and 35.

85. In reference to Section 9.4, Format of Responses on page 38 of 43, there are nine items are listed for contents of the response, but on page 6, under Evaluation Criteria, there are different sections listed with page limits. Does the section referred to on page 6 match the 2nd item on this list (Executive Summary & Cost Proposal) and that is the only area that there are page limitations? Yes. Is there a page limitation on the 6th item (Completed responses for each section of the RFP, including Offeror Response Code for Sections 3-5 items)? There is no page limit here.

86. What is the anticipated Period of Performance for this project?
Answer: Alabama's demonstration period as awarded is for a four-year period (2024-2028). Although this could change at the discretion of SAMHSA and CMS.

87. Is there and anticipated budget for this project?
Answer: Please see response to question #5.

88. Is there an anticipated contract type for this project (e.g. fixed price, cost reimbursable, etc)?
Answer: The ADMH will negotiate with selected vendor.

89. Can you clarify what develop "and or" maintain mean? Is there something already built or existing? Reference: Scope of Work Questions 3,4,5,6,7,8,12,14,15,16
Answer: Awarded vendor will both develop and maintain the system.

90. Scope of Work Question #2: Please clarify what "data feeds from various sources" are? For example, Medicaid claims data is a type of data, but what is the source of the data? Can you provide additional examples of data feeds and sources of data?
Answer: Medicaid claims data, ALOHR (HIE) data, and EHR data

91. Scope of Work Question #2: Will the data platform/data repository be state hosted?
Answer: To be determined by the awarded vendor

92. Scope of Work Question #5: Are the 19 health centers on an ASTP/ONC certified EHR in production?
Answer: This information is unknown at this time.

93. Scope of Work Question #5: Are the 19 health centers on the same EHR platform? If so, which EHR platform and which version?
Answer: No.

94. Scope of Work Question #5: Do the 19 health centers already have connections to the HIE? (e.g. for ADTs, etc.).
Answer: At this time, this information is unknown but it is a requirement of CCBHC participation in Alabama's demonstration.

95. Scope of Work Question #17: "Accommodate multiple CCBHC providers..."Accommodate what? E.g. Set security rules and permissions to accommodate multiple end-user CCBHC providers to gain access to patient data?
Answer: The chosen vendor should have the capacity to accommodate multiple EHR vendor

security rules/permissions and other system settings to ensure end-user system access to data and other workflows..

96. Scope of Work Question #17: Is "patient access" referring to patients accessing their own data or does this relate to providers accessing patient data?

Answer: It refers to both.

97. Item 3.13.5 (p20) Retaining data for all clients for minimum of 7 years and active clients for entire treatment period. Can ADMH estimate the total number of clients that are "active" now, across the 19 CCBHC providers? How long does a client remain "active" on average?

Answer: See response to question #49.

98. Intake data from several sources? What sources? What is the minimum set of sources for the contract?

Answer: Q90

99. Who are the users of the care coordination platform? What are their roles?

Answer: Care Coordinators – Care Coordination

100. What form of messaging system is required? Email? Chat?

Answer: Secure Direct Messaging

101. What types of reports do we need to create? And how many?

Answer: At this time, the ADMH are unsure of the type and number of reports that the selected vendor would be required to create.

102. Are the KPIs defined by us or the customer?

Answer: Customer

103. Item 3.10.1 (p18) Response Time: The applications software shall maintain an average response time of 1 second or less during ADMH prime working hours for all on-line applications. Please clarify which aspects of the application should the software maintain an average response time of 1 second or less.

Answer: Application, dashboards, and reports

104. Please provide the number of internal users (agency employees) who will need access to the system. Can you identify their roles as related to the project?

Answer: The selected vendor should be prepared to provide access for up to 50 AMDH employees. The ADMH would look to selected vendor to assist with identification of who these roles should be.

105. "Develop and or maintain a care coordination platform allowing for management of a population(s), documentation, alerts, worklists, and risk stratification." Other than acting as a data repository and reporting engine, how will the system be leveraged for care coordination?

Answer: The system would be leveraged to assist in referrals between care coordinators and providers.

106. Does the ADMH provide care delivery services? Or, do only the 19 Community Mental Health Centers provide care delivery services?

Answer: Yes to both.

107. Does ADMH provide referrals to providers other than the 19 Community Mental Health Centers?

Answer: Yes.

108. Does ADMH have any process flows that describe the interaction between the internal users, the 19 Community Mental Health Centers and the providers?

Answer: No, none that can be offered at the time of this response.

109. Please provide the number of external users (case managers, community partners, etc.) who will need access to the system.
Answer: It is unknown at this time how many external users will need access the system.

110. How many active patients would be supported by the platform? What would be the source of truth for patient data?
Answer: Please see response for to question #49

111. Is there existing middleware or will you be looking to implement a middleware solution for integrations as part of this solution?
Answer: No to the existing middleware, yes it should be part of the vendor solution

112. What outreach channels would need to be supported by the system?
Answer: Unknown.

113. How many cases are expected to be managed in the system annually?
Answer: See response to question #49.

114. Is there a budget appropriation in place for procurement for this system? If so, can you share the budget or not-to-exceed amount?
Answer: See response to question #5

115. Regarding 9.9 Proposal Submission Process and Schedule of Events: "RFP Submissions Four (4)—1 original, 2 copies, and 1 USB drive with one file. **No individual RFP sections**." Can you clarify what you mean by "No individual RFP Sections"?
Answer: Yes; If the file contains 50 pages, submit one file instead of each section individually.

116. Can the agency extend the deadline for response by 2-3 weeks?
Answer: No, due to the time constraints of the project.

117. Has the agency met with any vendors or seen demos of potential solutions? If so, can you elaborate on what solutions you have seen?
Answer: The ADMH currently has an emergency contract with NetSmart.

118. Which EHRs are used by the 19 ADMH Certified Mental Health Centers?
Answer: See response to question #3

119. Regarding Proposal preparation:
    a. The table on page 6 defines the Expertise and Knowledge as limited to 10 pages and the Qualifications, Experience, Prior Work as limited to 5 pages. Can you clarify which of Section 3-7 (pages 12-35) the state expects to be answered within those page limits? For example, responding to Technical and Functional Requirements doesn't seem to fit in either description of the aforementioned categories.
    Answer: The table and the associated number of pages are outside of the state expectations regarding Technical and Functional Requirements. Those details should be answered separately.
    b. May we provide additional attachments? For example, an Offeror Profile, Supplemental Information, etc. May we submit the General System Functions Requirements in a spreadsheet where we can use the response codes?
    Answer: Yes
    c. We predict it will be challenging to adequately respond to all items set forth in Sections 3-7 in only 15 pages. Will the agency extend the page limit to 50 pages?
    Answer: Yes, vendors will be permitted to extend there maximum number of pages to the response to no more than 50.

120. Please approximate the desired dates for project kick off and first production use. If the dates are flexible, please define a range of dates for each.
Answer: We cannot approximate the desired date(s) for project kickoff due to the number of approvals that has to happen prior to contract execution.

121. How do you define web app in context of your desired care coordination workflows?
Answer: Question not clear

122. To provide the most accurate proposal, please provide an extension of 3 weeks so that we may have adequate time to incorporate ADMH's responses to vendor questions into our response.
Answer: No additional time can be extended due to the time constraints of this project.

123. How many unique patients are seen yearly at the 19 CMHCs?
Answer: ~92,000 annually

124. What is the unique number of EMR systems for the 19 CMHCs?
Answer: 4

125. In Section 1 - Introduction, it states that Alabama is in the process of developing certification criteria. Please share what has been created thus far and what your plan is to be certified through CMS.
Answer: ADMH's CCBHC certification process has been developed but is undergoing revisions. At this time, the information cannot be shared.

126. Section 1.3 Project Goals - 02 states a desired ability to ingest data feeds from various sources and notes other state data feeds. How many sources need to be ingested (claims, EHR, direct entry and other data feeds)? Do you have a list of those feeds that can be shared?
Answer: Please see response to question #18

127. Regarding the Technical and Functional questions, specifically 3.6.7 Ramp Ready Status. Is this a requirement of the platform and infrastructure only or any of the tools that would be used on the platform/infrastructure? Our platform enables state-managed tools and, as a vendor, we would not have control over the certification of all ADMH's tools that may be used on our platform/infrastructure.
Answer: RK

128. Section 3.6.7 Ramp Ready Status discusses a requirement for StateRamp. The RFP does not specify when a vendor is to achieve full StateRAMP Authorized status. When does ADMH expect the awarded vendor to achieve Authorized status? Will ADMH accept a FedRamp Authorized Infrastructure as a Service (IaaS)/Platform as a Service (PaaS) offering in lieu of StateRAMP?
Answer: RK

129. Regarding section 3.8 Software design requirements, which states, "Custom help: The system supports the entry of custom help to all entry screens." Please describe the types of help needed and workflows to be supported.
Answer: The ADMH would desire for entry screens to be easy to navigate with minimum

clicks required by end users. We would look to our chosen vendor to assist us with what this may look like as well as what could be supported in terms of workflow.

130.   Regarding Section 4.1 Implementation Project Plan and Staffing Requirements, the only key personnel requested is the project manager, however, the requirements also state to share information regarding key individuals that will be committed to project. Will the resumes be counted on the page limits for the responses?
Answer: No.

131.   Please elaborate on requirement 3.8.1, which states, "Modifications of Existing Screens: The record viewing system supports the modification of existing screens including add new fields, removing (hiding) non-core fields, changing the location of fields, control over data entry rules, changes to validation checks, etc." How does ADMH define "record viewing system"? How is ADMH using the record viewing system today and how do you plan to use it in the future?
Answer: The "record viewing system" the vendor solution/application itself. The ADMH is currently using the system in test mode only and would ask the chosen vendor to recommend how this should look for the ADMH and for its CCBHCs.

132.   Please elaborate on requirement 3.8.2, which states, "Standard User Interface: All forms use the substantially same metaphors for searches, entering lookup information, saving data, updating data, moving to other parts of the form, creating reports, etc." What product are you using? Please define "metaphors for searches" and describe how it will be used.
Answer: Question not clear

133.   Please elaborate on requirement 3.8.3, which states, "System Navigation: Provides the ability throughout the system to go back to the main menu, to move to another screen, or to have user-defined buttons on the screen that will prompt the user to go to another form. The system allows for all information relating to a particular client, provider, etc., to be easily accessed from any screen in the system where such data exists." Please define what is meant by "form". Is this similar to a chart and/or assessment form?
Answer: To another screen that is accessible within the application

134.   Regarding the Custom Help requirement located in Section 3.8, which states, "Custom Help: The system supports the entry of custom help to all entry screens." what type of custom help is ADMH seeking? Are you referring to an embedded support number, a "forgot my password" link, or something different?
Answer: See response to question #129.

135.   Please clarify requirement 3.9.5, which states, "Internal Controls: The applications should provide the ability to balance, through access to appropriate reports and control totals, each production cycle. For example, establish contract monthly balances, reconcile master file update activities, etc." What contracts is ADMH are referring to in this requirement? Are you asking about contracts with payers/plans or are you asking about contracting with Oracle for services from a payment perspective?
Answer: The ADMH is looking for internal controls related to contracts with providers, other State entities and or other data vendors/repositories.

136. Please define "system" as it is used in requirement 3.10.4, which states, "Field Defaults: The system provides users with defined default values throughout the system." Additionally, please define the types of default values ADMH wishes to provide its users.
Answer: To be determined in discovery phase of the project.

137. Regarding section 9.4, paragraph 3, bullet 3, which states, "Acknowledgment of Acceptance of ADMH Contractual Requirements and other requirements stated in the RFP, listing any exceptions (if applicable)," please clarify where in the RFP the referenced "ADMH Contractual Requirements" are located.
Answer: Refer specifically to sections 7.4.8, 7.5, and 7.

138. Regarding section 9.4, paragraph 3, bullet 4, which states, "Corporate Resolution or other Evidence of Authority," please clarify what this is and what documentation is acceptable in support of this response element.
Answer**: A **corporate resolution** is a formal document created by a company's board of directors that details a binding corporate action. It outlines decisions made by the board, such as changes to dividend policies, executive compensation, or the issuance of debt1. Corporate resolutions help ensure accountability and transparency within the company. **Evidence of authority** refers to the documentation that verifies the authority of an individual to act on behalf of a corporation or other entity. This can include resolutions, letters of authorization, or other legal documents that confirm the person's power to make decisions or enter into agreements. Any of these documents are acceptable.

139. Regarding section 9.1, paragraph 1, which states, "Offerors should carefully review Section 7 of this RFP to make sure that the contractual requirements stated are acceptable. Inability to meet these contractual requirements may exclude an offeror from the evaluation and selection process." Please clarify the contractual requirements vendors are to review. Section 7 of the RFP contains the Offeror Profile questions vendors are to answer, not contractual terms.
Answer: See answer to question #137.

140. Regarding section 1, subsection C. Evaluation Criteria, please clarify how the functional responses will be evaluated. Are they included in one of the areas outlined in the table?
Answer: They will be evaluated by subsection B-Expertise and Knowledge.

141. Regarding section I, subsection C. Evaluation Criteria, which contains page limitations totaling 16 pages for the response, in conjunction with section 9.4 Format of Responses, paragraph 3, bullet 6, which states, "Completed responses for each section of the RFP, including Offeror Response Code for Sections 3-5 items," please clarify if there are page limitations for the vendor responses requested in Section 3-5 and, if so, what page limit applies.
Answer: There is no page limit here.

142. Regarding section 9.4 Format of Responses, paragraph 3, which outlines the elements vendors' proposals are to contain, please confirm that vendors should not return responses to section 6 - Project Reports and Project Control.
Answer: This is confirmed; do not return responses to section 6.

143. Regarding the requested vendor staff information, the RFP requests details regarding the vendor's proposed staff in Section 4 - Implementation Support Requirements as well as in Section 7 - Offeror Profile. Section 9.4 Format of Responses, paragraph 1 indicates that vendors are to submit all of the information requested in the order requested. Which section would ADMH like the vendor staffing information included in?
Answer: Responses should be returned as outlined in section 9.4.

144. Section 9.4 Format of Responses, paragraph 1 indicates that vendors are to submit all of the information requested in the order requested. Please confirm the reference to, "in the order requested," means that vendors should include the information in the order outlined in the bulleted list found in paragraph 3 of this same section. If this is not the case, please provide the desired order of information that vendors should follow.
Answer: This is correct; return as referenced by bulleted list.

145. **Evaluation Criteria, Statement of Work, Cover Page** 1 page **B. Expertise and Knowledge** 10 pages max **C. Qualifications, Experience, Prior Work** 5 pages max.
Could ADMH clarify if the page limits listed here apply to the current RFP?
Answer: It has been determined that up to 50 pages will be accepted.

146. Does ADMH have a target date for system implementation?
Answer: No target date has been set.

147. Does ADMH know how many different EHR systems are utilized by the 19 CCBHCs? Additionally, can ADMH identify which specific EHRs are in use?
Answer: Q3

148. Would the agency be willing to extend the due date by 2 weeks with a revised due date of 12/4?
Answer: No, only due to time constraints of the project.

149. How many internal operational users will need access to the system? (Internal Staff of the primary operational areas that perform transactions on the system or retrieve information)? Could you also include details on types of users/personas?
Answer: Users and types are to be determined.

150. How many external users/entities will need access to system data?
Answer: The ADMH foresees system data being accessed by members of the legislature, other state officials, and the general public.

151. Could you provide comprehensive details regarding the integrations required with the new platform? Specifically, we would like to understand: • The complete list of systems that need to be integrated. • The nature and volume of data within each of these systems. • The types and frequency of integration required for each system. • Detailed information on the number and types of tables and records in these systems. • The total data size involved in these integrations.
Answer: System integration question already answered. Integration frequencies question already addressed. Data type and sizes to be determined in project discovery phase.

152. Can you identify the vendor responsible for implementing the current system? Additionally, are they still actively involved in any enhancements or maintenance activities for this system?
Answer: Netsmart. Still active.

153. Has the Department reviewed any product demonstrations or solutions related to this project? If so, which vendors?
Answer: Yes, Netsmart.

154. Could the department please provide the anticipated budget for the full amount of funds budgeted for this modernization effort?
Answer: Please see response to question #5.

155. What is the term of this contract?
Answer: Please see response to question #37.

156. Is it correct to assume that appendices will not be included in page limit restrictions?
Answer: This is correct.

157. Page 38, section 9.4, do responses need to be formatted according to the order listed in this section? Answer: Yes.

158. How do the sections suggested in the proposal outline (section 9.4) align with the page limits mentioned in the SOW table under evaluation criteria on page 6 of the RFP?
Answer: They do not align. Please allow up to 50 pages maximum for your response.

159. Although there is an internal budget, can ADMH provide a detailed budget for this project to the public that we can utilize to develop our RFP submissions? If yes, can that be provided within the RFP Q&A?
Answer: We look to the responders of this RFP to provide a detailed budget to reflect assumptions of the required work.

160. For Scope of Work Item #14 ("Develop or maintain a user-friendly interface that compliments the CCBHC staff workflow and has minimal clicks to access various information in the client record."), is ADMH requesting the development of a statewide EHR? If not, what specific elements should be accessible?
Answer: No, the ADMH is not requesting the development of a statewide EHR; we are requesting a robust data platform to ingest data from provider EHRs.

161. If certain elements of the Scope of Work cannot be addressed, will a partial RFP submission be accepted?
Answer: The ADMH will accept all RFPs submitted in response to the opportunity.

162. Regarding the requirement for public facing dashboards, would it be acceptable for a vendor to provide data or dashboards to ADMH for them to compile, brand, and post?
Answer: ADMH will be responsible for posting ADMH data, however the development and branding of public facing dashboards should be done by the vendor.

163. Alternatively, regarding the requirement for public facing dashboards, would it be acceptable for a vendor to subcontract this work?
Answer: LR

164. For a vendor planning to submit for either StateRAMP or FedRAMP certification in 2025, would a FedRAMP certification be acceptable to fill your security certification requirement?
Answer: RK

165. Also for a vendor planning to submit for either StateRAMP or FedRAMP certification in 2025, would an established HITRUST certification be an acceptable temporary substitute for your security certification requirement, until a stated StateRAMP or FedRAMP status is achieved, if necessary?
Answer: RK

166. Regarding the requirement to allow clinical exchange with the HIE, will ADMH help broker the relationship with the HIE? What data types are expected to be ingested from the HIE?
Answer: Yes, ADMH will assist. Data types are unknown at this time.

167. Regarding the requirement to "Develop a continuous feedback loop to allow care coordinator progress notes to be captured in awarded vendor's system design to allow direct transfer of such into provider's EHR": Can you clarify which provider EHRs and which EHR vendors are anticipated to be receiving the progress notes from the awarded vendor's systems?
Answer: See answer #3.