

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|--|---|
| 1 | | | What level of access and support will be provided by the current data vendor during the transition period? | The current data vendor will be responsible for activities as noted in the sections listed below: 1. RFP Appendix 1: Deliverables and Transition Timelines. 2. Tab 6 of the Bidder's Attachment worksheet file. (https://civhc.org/wp-content/uploads/2024/10/CIVHC-DATA-MANAGER-RFP-Bidders-Attachments.xlsx) |
| 2 | | | Could CIVHC clarify the specific performance benchmarks and SLA expectations, particularly regarding data processing turnaround times? | See RFP Appendix 2B: Service Level Agreements |
| 3 | | | Are there any additional security protocols or certifications CIVHC requires beyond HIPAA and HITECH compliance? | The data management vendor must obtain approval from CMS to serve as a data custodian for Medicare data files. See Bidder's Attachment Tab 4. |
| 4 | | | Are there preferred tools or platforms for data migration, or is the selection left to the vendor's discretion? | CIVHC is open to proposals that support timely, accurate and secure data transfers. The selected vendor's method is subject to CIVHC's approval. |
| 5 | | | Please share the limitations/challenges with the current vendor platform | The current contract does not permit further extensions or renewals. |
| 6 | | | Is there a budget ceiling? | Reasonableness of proposed budget and best value will be considered as part of scoring responses. |
| 7 | | | Should the Bidder's Attachment worksheet be submitted as an excel file, or converted to PDF before submission? | Please submit the Bidder's Attachment in Excel worksheet format. Bidders may, at their option, submit a PDF version of the file for future reference, but this is not required. |
| 8 | | | Please clarify which Tabs in the Bidder's Attachment should be submitted for the Technical Item, Narrative Response to Domains and Operational Services Requirements (4.10). | The tabs that must be submitted include: <ul style="list-style-type: none"> • Tabs 1 through 3 of the Bidder's Attachment relate to the three Domains. Details on these requirements are described in sections 4.10.3 through 4.10.5 of the RFP. Only complete the tabs for the domains included in your proposal. Please use the drop down to note whether you will be bidding on each domain. • Tabs 4 through 7 of the Bidder's Attachment relate to the Operational Requirements. Details on these requirements can be found in sections 4.10.6 through 4.10.9 of the RFP. These tabs must be completed by all Bidders no matter which domains are included in your proposal. • The requirements for Tab 8 (Staffing Worksheet) of the Bidder's Attachment can be found in section 4.17.2 of the RFP. This tab must be completed by all Bidders no matter the domains included in your proposal. • The requirements for Tab 9 (Cost Proposal) can be found in Section 4.17. This tab must be completed by all Bidders no matter the domains included in your proposal. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|--|---|
| 9 | | | Is the budget narrative, Tab 9 in the Bidder’s Attachment, or should the Bidder use their own template? | The budget narrative section should describe the costs included in the Project Staffing Worksheet and the Cost Proposal template in the Bidder's Attachment. The narrative section of the budget is limited to 3 pages and should be included as part of the overall narrative RFP response. All Bidders must use the Project Staffing Worksheet and the Cost Proposal template in the Bidder's Attachment and not use their own template. |
| 10 | | | Is there a crosswalk of which Tabs correspond to which section of the proposal? | <ul style="list-style-type: none"> • Tabs 1 through 3 of the Bidder's Attachment relate to the three Domains. Details on these requirements are described in sections 4.10.3 through 4.10.5 of the RFP. • Tabs 4 through 7 of the Bidder's Attachment relate to the Operational Requirements. Details on these requirements can be found in sections 4.10.6 through 4.10.9 of the RFP. • The requirements for Tab 8 (Staffing Worksheet) of the Bidder's Attachment can be found in section 4.17.2 of the RFP. • The requirements for Tab 9 (Cost Proposal) can be found in Section 4.17. |
| 11 | | | Should the cost proposal be submitted as a separate file? | The Cost Proposal (Tab 9 of the Bidder's Attachment) must be sent as a part of the Bidder's Attachment file. All tabs of the Bidder's Attachment must be included in the RFP submission even if Bidder is not bidding on one of the domains. |
| 12 | | | Data Enhancements: How do you define “sequester” of SUD claims. | Substance Use Disorder (SUD) claims must be identified and isolated from ongoing analytic resources and tasks, accessible only to a limited number of CIVHC users. This process of sequestering data may also apply to other records considered sensitive records. |
| 13 | | | Linkages and Whitelisting: Is a live link to external resources such as AAPC Codify or AnalySource a requirement or would importing equivalent list-based groupers into environment be sufficient? | CIVHC looks forward to hearing proposals that are as broad as possible in terms of security, with an eye towards eliminating administrative burden with functionality and with data. CIVHC also aims to be responsive to dynamic client needs that require functionality of platforms or sites that support robust data quality and reporting. |
| 14 | | | Does CIVHC anticipate needing to track Family ID across time and enrollments (meaning an individual could have multiple assignments) or strictly at a point in time (e.g., in a given member month). | CIVHC seeks a solution that allows for the identification of a family unit (e.g., designating the primary insured and dependents, linking newborns with mothers, etc.). |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|---|--|
| 15 | 2 | 7 | How should "potential" architectural improvements be planned and budgeted? More specifically, how should we distinguish between innovate and operate? A few examples: - The innovation staffing and budget should be a percentage of the total budget - The innovation staffing/budget should be a multiple of the operate budget | CIVHC welcomes proposals that will improve operational efficiency and looks forward to hearing Bidders' options for budgeting. |
| 16 | 2.3 | 8 | Is the Vertica Database Storage size of 17 TB the licensed capacity for raw data ingested into Vertica or the database storage footprint with column compression? If it is the latter, what is the licensed Vertica capacity? | The footprint of the Vertica Database is 17 TB and the size is scalable to meet CIVHC's growing needs, increasing at approximately 1.2 TB/year since 2020. |
| 17 | 2.3 | 8 | What is predominantly stored in the 34 TB of file storage? | The data includes current and historical claims data files at different stages of processing, quality control and value-added features, as well as the analytic and research products created with this data. |
| 18 | 2.3 | 8 | Please provide volumetrics around the data in the source systems, including all of the following: - the number of source systems - total data volume per source system (number of objects, number of records, data size) - monthly data volume per source system (number of new/updated objects, records, data size) - the technology of each source system, and the integration method currently in place (e.g. enterprise application, data ingested via API endpoints) | Incoming CO APCD files adhere to one of the following formats: • Colorado APCD data submission guide (https://civhc.org/wp-content/uploads/2024/10/Data-Submission-Guide-DSG-v-16-Redline-Final.docx) • Colorado APCD Alternative Payment Model and Pharmacy Rebate Data • Files provided under the data sharing agreement describing Medicare services, providers and other information under the CMS Data Use Agreement (https://resdac.org/cms-data) Current total volume of submission files from all source systems: 468 GB/ 45,018 files. Alternative Payment Model and Pharmacy Rebate files comprise approximately 3 GB of that data. |
| 19 | 2.3 | 8 | What is the expected growth of source systems and data volume over the duration of this contract? | See Table 1: CO APCD Metrics for volume of data. Future growth depends on changes in the market place. |
| 20 | 2.3 | 8 | What is the current frequency of data ingestion (near real time, hourly, daily, weekly, monthly, quarterly)? Please include all frequencies if the answer varies by source system or object | <ul style="list-style-type: none"> • CO APCD eligibility, claims, and provider file submissions from payers are submitted on a monthly basis. • Non-claim payment files (e.g., Drug Rebates, Alternative Payment Models) are submitted on an annual basis. • CMS Medicare data files are provided quarterly. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|---|--|
| 21 | 2.4 | 9 | <p>CIVHC, with the assistance of the DMV, delivered 65 data extracts and four custom, standard, and public reports between July 2023 and June 2024.</p> <p>a.) How are these extracts/reports funded?</p> <p>b.) Should the costs to develop these extracts be included in this contract?</p> <p>c.) Are these deliverables - at this volume - expected to continue during the initial contract term? If not, what is the expected volume the Bidder should plan for?</p> | <p>CIVHC partners with diverse clients to support various projects and funding is allocated dependent on the type of client and contract established. The DMV is expected to support the deliverables list outlined in RFP Appendix 1A.</p> |
| 22 | 2.4 | 9 | <p>What reporting mediums (e.g. Tableau, PowerBI, emailed extracts, etc.) are in place? Please catalog all reporting mediums (including data marts) that serve data extracts, dashboards, or other data products, including an estimated percentage of total data products associated with each.</p> <p>Said another way, how are users accessing this data today?</p> | <p>Please refer to the Deliverables list in RFP Appendix 1A for required reports and deliverables and the Bidder's Attachment Tab 3 "Enclave, Data Access, Analysis."</p> |
| 23 | 2.4 | 9 | <p>What integrations currently interact with the APCD data marts and associated data products?</p> <p>Please catalog all integrations (e.g. applications) that interact with APCD data</p> | <p>The APCD Data Marts are custom secure areas that are configured by the specific sponsoring entity. Data Mart users have configured files and resources to support agency-specific research and analytic needs. The DMV must ensure that Enclave updates maintain consistent formats to permit seamless updating of Data Mart customizations. Tools available within the Data Mart include: Tableau, UltraEdit, analytic tools such as R, SAS, DBeaver, Microsoft Suite, Python, Adobe, etc.</p> |
| 24 | 2.4 | 9 | <p>What are the security components used to control data access to the data marts, applications, and integrations. Examples include:</p> <ul style="list-style-type: none"> - Role Based Access Control (RBAC) - Row Level Security (RLS) - Column Level Security (CLS) | <p>CIVHC seeks a solution that provides role-based access controls (RBAC) that preferably restricts data at the most detailed level possible (row and column level) but are open to RBAC at a file/table level. the Please refer to Bidder's Attachment Tab 3, Enclave, Data Access, and Analysis.</p> |
| 25 | 2.5 | 11 | <p>Would you provide architecture diagrams and information on the existing technical architecture?</p> | <p>This information will be provided upon contract signing.</p> |
| 26 | 2.5 | 11 | <p>Please provide data and process flow for the current identity management and cleanup solution</p> | <p>This information will be provided upon contract signing.</p> |
| 27 | 2.5 | 11 | <p>Please provide an overall architectural diagram(s) that show all data flows and technical components for domains 1, 2, and 3</p> | <p>This information will be provided upon contract signing.</p> |
| 28 | 2.7 | 12 | <p>Our consulting staff is tenured, but our company is newer. Our company does have current health care clients and will also provide references from past customers prior to our company's formation. Will both current and prior experience references for our core team be accepted?</p> | <p>Current company and prior experience will be reviewed as part of the evaluation process.</p> |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|--|--|
| 29 | 2.7 | 13 | For Requirement 2.7.4, please clarify what specific State and Federal rules, regulations, and statutes you are referring to. Please give examples of files provided under a Data Use Agreement with the Centers for Medicare and Medicaid Services. | Bidders may consult information and files at www.ResDAC.org for additional information about CMS files available to states under the State Agency Request program. <ul style="list-style-type: none"> This article summarizes federal regulations: https://resdac.org/articles/federal-regulations-governing-release-cms-data See also: https://civhc.org/2024/10/11/limitations-of-co-apcd-data/; https://civhc.org/2024/04/10/query-behavioral-health-and-substance-use-disorder-claims-in-the-co-apcd/ |
| 30 | 3.1 | 14 | Regarding domain 2 specifically, approximately what percentage of records in integrated stores have improper/inconsistent identification? | Current identity management methods result in 66,128 (0.18%) null member composite IDs. |
| 31 | 3.1 | 14 | Regarding domain 2 specifically, What percentage of newly ingested records require manual intervention to associate to the proper identity? | In 2024 there were 5,000 overrides submitted for member eligibility data. |
| 32 | 3.2 | 15 | Do you want responses to include PoV Components that are not estimated as part of the formal response on how they would manage CIVHC's innovation needs?" | Bidders may propose Optional Services as part of the narrative response (section 4.15) and associated costs on Bidder's Attachment Tab 9: Cost Proposal . |
| 33 | 4.2 | 17 | The proposal submission format specifications exempt footnotes, headers, and footers from the 11-point font size requirement. Can CIVHC please confirm whether the same exemption applies to content within tables? | Tables should also use the 11 point font size. |
| 34 | 4.2 | 17 | The proposal submission format specifications require line spacing of 1.5 lines. Can CIVHC please confirm whether line spacing in footnotes, headers, footers, and tables is exempted from this requirement? | Footnotes, headers, footers and tables may be single spaced. |
| 35 | 4.2 | 17 | The proposal submission format specifications require the Bidder to rename the submitted Excel worksheet file to "[Bidder's Name] Bidder's Attachments to RFP". Can CIVHC please confirm whether this should be the entire file name for the submitted file or if other components (e.g., date, RFP name, dashes) should/may also be included? | Please ensure that the Bidder's name appears in the file name; any additional information may be added after "[Bidder's Name] Bidder's Attachments to RFP" |
| 36 | 4.10.3 | 20 | What is the current submission portal? Please provide details on the submission experience (end user guides) and architecture diagrams for this portal | See https://civhc.org/get-data/co-apcd-info/submitter-resources/ |
| 37 | 4.10.3 | 20 | What is the current training portal or documentation look like for submitters? For example, the Texas ACPD manager has an extensive user group and documentation set. Does CIVHC currently have similar now and if so, please share the link. | See https://civhc.org/get-data/co-apcd-info/submitter-resources/ |
| 38 | 4.10.3 | 20 | Is the current submission portal desired to stay in place and integrated into the new data management platform? | The new DMV is required to design, establish and maintain a submission portal. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--|---------------|---|---|
| 39 | 4.10.4 | 21 | Is CIVHC using any entity resolution software/providers today (such as Verato)? | The current DMV has proprietary processes in place to manage identity resolution and is supported by CIVHC staff. CIVHC has also initiated a collaboration with one of Colorado's HIEs to support inclusion of more data points for identity management. |
| 40 | 4.10.5 | 21 | How are identities managed for CIVHC users and how is access currently granted? | See Bidder's Attachment file Tabs 3 (Enclave, Data Access, Analysis) and 4 (Privacy and Security), for guidance. |
| 41 | 4.10.6 | 22 | What are the current data governance policies in place that need to be followed? Are there specific guidelines for data lineage, data quality, and stewardship? We will propose new processes/standard for any gaps, but an overview of current governance practices would be helpful. | CIVHC seeks a DMV that will provide "best in class" data governance practices. The Bidder may describe its approach in its narrative. CIVHC currently follows state, federal, and best-practice policies for data stewardship. Additional details will be provided upon contract signing. |
| 42 | 4.10.6 | 22 | What are the requirements for backup and recovery? Does the system need to meet any specific recovery time objectives or meet a specific recovery point? | See RFP Appendix 2B: Service Level Agreements |
| 43 | 4.10.7 | 22 | Does CIVHC have a current ticket management system for external requests and reported issues? If so, what is that system and who manages it today? | CIVHC uses Salesforce for internal production and management. |
| 44 | 4.10.7 | 22 | Is CIVHC using any LMS software or have a preferred system for managing and retaining training materials? | CIVHC expects the DMV to propose and provide training and documentation for submitters and data users. |
| 45 | 4.15 ("Future / Optional Services") and Excel worksheet file (Tab "1. Data Collection & Processing") | 24-25; DC-100 | The RFP's list of future/optional services for the Bidder to address includes "John's Hopkins ACG © system" (3f). The Excel worksheet file, however, includes item DC-100, which requires the Bidder to generate grouper results twice each year using a series of tools, including Johns Hopkins Adjusted Clinical Groups (ACGs). Can CIVHC please clarify (1) if twice-yearly ACG grouper results are a requirement that should be included in the Bidder's cost proposal and (2) if the cost to license ACGs is covered (or would be covered if ACGs are future/optional scope) by CIVHC or instead is the responsibility of the Bidder? | CIVHC currently maintains a license for John's Hopkins ACG system but is open to licensing being held by the DMV. CIVHC does require that the data can be processed as noted in the Bidder's Attachment, but listed the ACG system as an example of an outside data source requiring linkage. The list shown in section 4.15 is not exhaustive. |
| 46 | 4.17.2 | 26 | The RFP's instructions for completing the Bidder's cost proposal include supplementing the budget narrative with the tab labeled "8. Staffing Worksheet" from the RFP's related Excel worksheet file. Can CIVHC confirm whether the cost proposal narrative section 4.17.2 ("Staffing Worksheet") should contain a copy of that tab's content or whether the Excel contains all wanted information for this response section? | The Cost Proposal Narrative should highlight the elements that distinguish the Bidder's proposal and are advantageous to CIVHC. The staffing worksheet does not need to be copied into the Cost Proposal narrative. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|-------------|--|--|
| 47 | 4.17.3 | 26 | Similarly, the RFP’s instructions for completing the Bidder’s cost proposal include supplementing the budget narrative with the tab labeled “9. Cost Proposal” from the RFP’s related Excel worksheet file. Can CIVHC confirm whether the cost proposal narrative section 4.17.3 (“Cost Proposal Template”) should contain a copy of that tab’s content or whether the Excel contains all wanted information for this response section? | The Cost Proposal Narrative should highlight the elements that distinguish the Bidder's proposal and are advantageous to CIVHC. The Cost Proposal Narrative does not need to include a copy of the worksheet. |
| 48 | 4.17.4 | 26 | When CIVHC mentions licenses and services in the payment model, does this include licenses for the core data platform itself and not just developer licenses for building the platform? For example, if Databricks and AWS were proposed, would we bundle those platform costs into our bid or does CIVHC prefer we propose provisioning those services in CIVHC's name and managing them? | CIVHC expects that licenses and services that are central to the platform management and development are included, or bundled, into the platform costs unless there are cost savings realized by provisioning these services in CIVHC's name. With the latter, CIVHC expects that the data vendor will manage all operational needs for this platform. |
| 49 | 4.17.4 | 26 | The RFP’s instructions for completing the Bidder’s cost proposal include this section (“Proposed Payment/Pricing Model”), which appears related to the Excel worksheet file’s tab labeled “10. Payment Model” but does not refer to the Excel tab. Can CIVHC please confirm whether the required information is to be included in narrative format, in the Excel worksheet file tab, or both? | The narrative should highlight the elements that distinguish the Bidder's proposal and are advantageous to CIVHC. "Bidder's Attachment Tab 10 Payment Model" invites Bidders to propose a schedule for payments to be made under this contract. Bidders may include brief remarks or notes below the table to clarify or explain the components of the proposed amounts. The Cost Proposal Narrative does not need to include a copy of the worksheet. |
| 50 | 4.17.4 | 26 | Related to the above question, if the Excel worksheet file’s tab (“10. Payment Model”) is to be completed and submitted, can CIVHC please clarify if CIVHC would like the Bidder to summarize their proposed payment model in the unshaded cell B5 or elsewhere (e.g., as part of the optional brief comments below the table)? | "Bidder's Attachment Tab 10 Payment Model" invites Bidders to propose a schedule for payments to be made under this contract. Bidders may include brief remarks or notes below the table to clarify or explain the components of the proposed amounts. |
| 51 | 4.4.4 | 17 | The RFP’s cover letter instructions require the Bidder to attach a red-lined version of the Standard Contract if the Bidder is proposing any exceptions/modifications. If submitting a red-lined version of CIVHC’s Standard Contract, can CIVHC please confirm (1) whether a Word or PDF version is preferred and (2) the desired placement of this additional attachment in relation to the attachments listed earlier in the proposal organization table (RFP Section 4.2, “Proposal Format”)? For either approach, would CIVHC prefer to provide a standalone version in Word or PDF for use by Bidders? | If Bidders choose to redline CIVHC's standard contract, this should be noted in the cover letter. Attach the red lined document at the end of the narrative proposal document, after all attachments, in PDF format. |
| 52 | Appendix 1 | 30 | Table 1A-2: Projected Repeated Deliverables outlines the expected deliverables the new vendor will be responsible for in early 2026. Please clarify the content of the deliverables and expected level of effort to produce those deliverables. | Specific content of the deliverables noted will be shared upon contract signing. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|----------------------------|-------------|---|---|
| 53 | Appendix 1 | 30 | The RFP's first appendix includes a table "1A-2. Projected Repeated Deliverables" that requires the new vendor to generate three distinct deliverables: (1) "EnFund CCMCN Lightbeam Q3" in March 2026, (2) "EnFund Providers of Distinction Data Set" in April 2026, and (3) "Medicaid Enrollment Transition Refresh 2" in May 2026. Can CIVHC please provide additional information related to the scale and scope of this work (e.g., online links to previous iterations, a summary of the reporting)? | These are specific data extracts that are updated to incorporate updates, new submissions, value adds, and/or additional fields from the CO APCD. They typically include up to a year of updated data. Additional details will be provided upon contract signing. |
| 54 | Cost Proposal Excel, tab 9 | 4.17 | The Cost Proposal tab (Tab 9) captures costs for Year 1 Implementation plus three years of operations through June 2029. The RFP states on page 1 that "The initial contract period, for any contract awarded as a result of this RFP, will have an initial term of three years starting in summer 2025 with the potential to extend by up to four additional years." Please clarify the period of performance for the initial term. | Contract Year 1, beginning 7/1/25, is an implementation year during which the new DMV will develop capacity for full operations no later than June 30, 2026, and preferably before that time. The initial term of this contract ends 6/30/28. The fourth year included in the Cost Proposal Tab is for informational purposes only. |
| 55 | Cost Proposal Excel, tab 9 | 4.17 | The Cost Proposal does not include space for the four option years. Where should those costs be captured? | Contract year 1, beginning 7/1/25, is an implementation year during which the new DMV will develop capacity for full operations no later than June 30, 2026, and preferably before that time. The initial term of this contract ends 6/30/28. The fourth year included in the Cost Proposal Tab is for informational purposes only. |
| 56 | Cost Proposal Excel, tab 9 | 4.17 | Do you have a budget allocated for this initial term? If yes, can you disclose your budget for all three domains? | Reasonableness of proposed budget and best value will be considered as part of scoring responses. |
| 57 | Excel Domain 1 | DC-1 - 9 | For the registration and onboarding process, What level of automation are you expecting for Submitters? On continuum from fully manual (i.e.: Complete and submit PDF) to full self service (Fill-in Online Form). | Bidders should propose an efficient solution for initial registration and onboarding and that minimizes manual inputs for submitters when re-registering. |
| 58 | Excel Domain 1 | DC-1 - 9 | For the registration and onboarding process, are you expecting the potential data submitter to have visibility of their application and progress through onboarding process. | Submitters should be able to review their registration information and see the status and progress of onboarding and update processes. |
| 59 | Excel Domain 1 | DC-9 | What role will the successful vendor play in the onboarding process? | See Bidder's Attachment Tab 1 and Appendix Table 1B: Transition In Timeline in the RFP for requirements. |
| 60 | Excel Domain 1 | DC-10- 32 | Please confirm that individual Healthcare Providers are not expected to use the PORTAL to submit their claims? Only Payers? | The CO APCD collects information from health care payers. See https://civhc.org/get-data/co-apcd-info/submitter-resources/ |
| 61 | Excel Domain 1 | DC-10- 32 | Is a Portal mandatory? Would you consider using automated feeds as alternative to data submitters having to manually login and upload files? | Bidders may propose data submission methods that meet all requirements described in the RFP and Bidder's Attachment file and all state law and regulatory requirements on permitted data submissions, submitter compliance and transmission security. Bidders must also obtain CMS approval as a Medicare Data Custodian. |
| 62 | Excel Domain 1 | DC-10- 32 | What format is the Claims Data currently being submitted in? | See https://civhc.org/get-data/co-apcd-info/submitter-resources/ |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--|---------------------|---|---|
| 63 | Excel Domain 1 | DC-13 | With regard to the transition to APCD-CDL™, are you expecting Vendors to manage the transition with the submitters OR use technology to transform the data from format provided into the Common Data Format | The DMV will provide technical assistance to submitters in achieving conforming APCD-CDL submissions and provide a mapping and transformation solution to ensure data consistency over time. |
| 64 | Excel Domain 1 | DC-20 | What constitutes an overdue submission? | See https://civhc.org/get-data/co-apcd-info/submitter-resources/ |
| 65 | Excel Domain 3 | EDA-36 | Can you elaborate on 'maintain'. Does it relate to maintaining the format of the incoming data OR the current processing mechanism/approach? If vendors are required to maintain your existing processing, can you elaborate on the approach and technology used? | Information on data processing steps will be provided upon contract signing. The new DMV will be provided with documentation and processing steps taken to build the reports that populate the Data Marts. The new DMV is expected to retain those formats such that the Data Mart resources are seamlessly transitioned and allow users to conduct fully integrated analysis across "old" and "new" DMV resources. |
| 66 | Excel Domain 3 | EDA-43 | Please clarify whether both 'updated tools' and 'reports' should be available in real time. | Yes, reports on tool updates should be available in real time. |
| 67 | Excel Domain 3 | EDA-43 | Please elaborate on the goal or objective CIVHC is looking to achieve with this requirement. | The purpose of these reports is to provide visibility into the Enclave's performance, operations and baseline functionality. |
| 68 | Excel worksheet file (Tab "1. Data Collection & Processing") | DC-101 | This item requires the Bidder to "support use of AnalySource or similar tool for pharmacy classification and pricing available in the data enclave and ability for CIVHC to maintain and perform necessary updates." Can CIVHC please clarify (1) if a license for AnalySource currently is maintained by CIVHC or its current vendor and (2), if so, whether CIVHC personnel and/or its current vendor receive and perform updates in the Enclave? | CIVHC holds the AnalySource license, including ad hoc creation of data files for upload into the Enclave. AnalySource is not maintained or updated in the existing Enclave. |
| 69 | Excel worksheet file (Tab "1. Data Collection & Processing") | DC-101 | Whether the Bidder's proposed solution is AnalySource or similar pharmacy classification tool, can CIVHC please specify the data fields from this tool and/or the use cases that it primarily supports? | A partial list of use cases for categorized prescription drug medications includes: <ul style="list-style-type: none"> • Required reporting for the state's Prescription Drug Affordability Review Board • Public reporting (see https://civhc.org/get-data/public-data/focus-areas/prescription-drug-rebates/) |
| 70 | IM-12 | Identity Management | How does CIVHC measure high quality composite ID vs. a lower quality? | Bidders are welcome to describe their recommended solution to ensure a consistent Composite ID regardless of payer and time. The DMV will be required to reprocess all current and historical identities in the CO APCD. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|---------------------|--|--|
| 71 | IM-12/13/14/15 | Identity Management | Can a definition of Provider ID be provided? How is provider ID different than a Member ID? | A provider identifier refers to an individual provider, practice, medical group, pharmacy, facility, etc. The DMV is responsible for establishing a process that uniquely identifies providers for aggregation and analysis and is persistent and consistent across payers. Review of historical data may be necessary. A member identifier refers to an individual (member and subscriber) appearing in a payer's submitted member eligibility and claim files. The DMV is responsible for creating a unique identifier per member/subscriber that is persistent and consistent across payers. Review of historical data may be necessary. |
| 72 | IM-16 | Identity Management | Can additional details on family ID be provided? | CIVHC seeks a solution that allows for the identification of a family unit (e.g., designating the primary insured and dependents, linking newborns with mothers, etc.). The DMV must create family associations based on its analysis of data elements present in the member eligibility and claims data files, and provide documentation about the logical processes use. |
| 73 | IM-17 | Identity Management | What specific details are required to outline for methodology of composite IDs? | The DMV must create a composite member ID based on its analysis of data elements present in the member eligibility and claims data files, and provide documentation about the logical processes used to generate and assign the composite IDs. The DMV must create a one-time crosswalk of new DMV composite IDs to legacy composite IDs. |
| 74 | IM-18 | Identity Management | Delivery in this case refers to the resulting composite ID, is that correct? Not that the Bidder needs to send the "required data" to another party. | Yes, if identity management is performed by a DMV subcontractor or partner. If the DMV performs this function as part of its regular data processing, then there will not be a need to send the data to another party. |
| 75 | IM-2 | Identity Management | Are there any defined SLA requirements? | See RFP Appendix 2B: Service Level Agreements |
| 76 | IM-20 | Identity Management | What is the expected frequency of reporting:? | This reporting aligns with ongoing data production schedules. See RFP Appendix 1A. |
| 77 | IM-23 | Identity Management | Are report expectations known? | Quarterly reports should include a review of progress made on data quality improvements. |
| 78 | IM-3 | Identity Management | Would "logical separation" meet this requirement? | DMV must certify that CO APCD data assets, including Medicare data, are segregated from all other data assets held by DMV and cannot be accessed by DMV staff who are not specifically authorized to access this data. CO APCD data, at any level of aggregation, may not be co-mingled with other DMV data assets. |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|----------------------|--|---|
| 79 | IM-34 | Identity Management | Can a definition of what is included in the "functions"? | DMV must perform all required steps to securely receive, process, link and build member and provider Composite IDs from files submitted by payers or as otherwise processed by the DMV. Results of identity management processes (whether performed in-house by the DMV or by an external partner/contractor) must be fully integrated at an appropriate processing step into data files for loading into the Enclave. |
| 80 | IM-36 | Identity Management | Will high level logic suffice, in cases where intellectual property is protected? | CIVHC seeks a collaborative relationship that provides exceptional transparency into all DMV processes. |
| 81 | IM-5 | Identity Management | What data elements would you expect to be included in the quality reporting? Would this include match rate analysis? | CIVHC seeks a "best in class" identity management solution that offers well-developed reporting and quality measures. |
| 82 | IM-9 | Identity Management | How does CIVHC differentiate a Provider ID and a Member ID assuming that an individual may be both? | A provider identifier refers to an individual provider, practice, medical group, pharmacy, facility, etc. The DMV is responsible for establishing a process that uniquely identifies providers for aggregation and analysis and is persistent and consistent across payers. Review of historical data may be necessary. A member identifier refers to an individual (member and subscriber) appearing in a payer's submitted member eligibility and claim files. The DMV is responsible for creating a unique identifier per member/subscriber that is persistent and consistent across payers. Review of historical data may be necessary. |
| 83 | PM-1 | Project Management | Are there specific expectations around "industry-accepted, proven project management techniques" or can we just provide what our PMO process is? | The Bidder should describe its approach to project management. |
| 84 | PM-15 | Project Management | What direct messaging channel is utilized? | CIVHC is open to proposals to use existing or new messaging technology that facilitates clear and open communication while tracking response times and resolutions. CIVHC currently uses Slack and Microsoft Teams for internal direct messaging. Those tools are currently only accessible outside of the Enclave environment. |
| 85 | PS-11 | Privacy and Security | Can CIVHC provide more detail in comprehensive audit logging? How is access defined? Are you seeking audit logs for human access or system access? | Due to the sensitive nature of CIVHC's data assets, the DMV must provide detailed, timely ongoing tracking of access attempts, successes and session duration. |
| 86 | PS-12 | Privacy and Security | Does Data Loss Prevention (DLP) satisfy this requirement? | The Bidder should describe its Data Loss Prevention program. |
| 87 | PS-14 | Privacy and Security | Does DLP satisfy this requirement? | The Bidder should describe its Data Loss Prevention program. |
| 88 | PS-18b | Privacy and Security | Can we provide high-level diagrams? | CIVHC will need to understand how CO APCD data assets are protected and reserves the right to request more detailed information on network configuration under the DMV contract. |
| 89 | PS-18c | Privacy and Security | Can CIVHC provide safe and secure storage for our documentation? | Yes |

| Question Number | RFP Section Number | Page Number | Question | Response |
|-----------------|--------------------|--------------------------------|---|---|
| 90 | PS-18h | Privacy and Security | Is a high level report sufficient? | Due to the sensitive nature of CIVHC's data assets, the DMV will be required to provide penetration testing results, including remediation of identified issues. |
| 91 | PS-6 | Privacy and Security | Can you point to the CMS requirements? | <p>Bidders may consult information and files at www.ResDAC.org for additional information about CMS files available to states under the State Agency Request program and the Qualified Entity Certification Program.</p> <ul style="list-style-type: none"> • This article summarizes federal regulations: https://resdac.org/articles/federal-regulations-governing-release-cms-data • See also: https://civhc.org/2024/10/11/limitations-of-co-apcd-data/; https://civhc.org/2024/04/10/query-behavioral-health-and-substance-use-disorder-claims-in-the-co-apcd/ |
| 92 | PS-7 | Privacy and Security | Do you require direct remote access to IDM platform, or access to the IDM results? | The priority is access to the results. As long as there are proper oversight and data quality mechanisms in place, CIVHC does not need direct access to the IDM platform. |
| 93 | TS-1 | Transition Services | What files are being referenced? | Please refer to items TS -1a through TS- 1g |
| 94 | TS-1b | Transition Services | How does this relate to Domain 2? | Bidders are welcome to describe their recommended solution to ensure a consistent Composite ID regardless of payer and time. The DMV will be required to reprocess all current and historical identities in the CO APCD. |
| 95 | TS-1c | Transition Services | For Domain 2, would Identity object meet this requirement? | The Bidder should describe how identity object meets this requirement. |
| 96 | TS-2 | Transition Services | For Domain 2, would the expectation that there be a way to link persons across systems? | Yes. |
| 97 | TST-8 | Technical Support and Training | What would be required for Domain 2? | The Bidder should describe the documentation and level of transparency on how the data will be stored, secured, processed, and delivered. |
| 98 | TST-9 | Technical Support and Training | For Domain 2, would Identity Object suffice the requirement? | The Bidder should describe how identity object meets this requirement. |