

Brand & Website Redesign RFP

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CIVHC Vendor Questions Digest2		
1. CIVHC Vendor Questions Digest with Response Template	2	
2. Eligibility & Process	2	
3. Timeline	3	
4. Budget	3	
5. Brand & Messaging	4	
6. Audiences & Strategy	4	
7. Content Strategy & Migration	5	
8. Technology & CMS	6	
9. Governance & Stakeholders	7	
10. Design & User Experience	7	
11. AI & Advanced Features	8	
12. Analytics, Search & Accessibility	<u>9</u>	
13. Hosting, Security & Maintenance	9	
14. Post-Launch Support & Training	10	
15 Legal & Compliance	11	

Brand & Website Redesign RFP



CIVHC Vendor Questions Digest

1. CIVHC Vendor Questions Digest with Response Template

This document organizes all vendor questions from the Brand & Website Redesign RFP into themes. It also provides CIVHC's unified draft responses — designed to ensure consistency and fairness across all vendors.

2. Eligibility & Process

Questions

- Open or invite-only?
- Any prerequisites (NDA, pre-qualification)?
- Can international vendors bid?
- Is onsite presence required?
- Number of vendors participating? Were past vendors invited?
- Relationship with existing agency bidding?
- Selection process (finalists, qualities in a partner)?
- NDA needed before sharing info?

Unified Response

This is an open RFP; no invitation or prior relationship is required. International firms are NOT eligible, and remote participation is acceptable — there is no requirement for onsite presence. There are no mandatory NDAs or pre-qualification processes prior to proposal submission; CIVHC can review NDA requests if proposals move forward. A competitive process will be used to identify finalists (expected 3–5), with evaluation based on fit with CIVHC's mission, quality of approach, cost alignment, and demonstrated experience in health data and nonprofit sectors.

Brand & Website Redesign RFP



3. Timeline

Questions

- Launch target date and drivers?
- Proposal deadline discrepancy: Sept 17 vs Sept 24?
- Confirm milestones Aug-Oct?
- Any concurrent projects impacting work?
- Events/deadlines within 12 months to work around?

Unified Response

Note: Earlier RFP versions included a conflicting September 17 date. The correct deadline is September 24, 2025, 5:00 PM MT. This clarification ensures consistency across all vendor communications.

The target launch date is Q2 2026, driven by CIVHC's upcoming reporting cycles and stakeholder engagement needs. Proposal submissions are due by September 24, 2025, 5:00 PM MT. Milestones are: Q&A due Aug 22, responses by Sept 5, interviews Oct 7–Oct 8, selection Oct 15, and contract Oct 31. No other large-scale CIVHC initiatives are expected to interfere, though normal reporting and program activities will run in parallel.

4. Budget

Questions

- Confirm \$30–60k assumption?
- Clarify budget range?
- Should proposals emphasize core deliverables vs. innovation?
- Is six-figure budget feasible?
- Provide anticipated budget range?

Unified Response

While we are not sharing a specific budget range, CIVHC expects this to be a significant project, likely in the low-to mid-six figures. We are looking for vendors to recommend the most effective approach and provide a clear, transparent cost breakdown by scope area. The optional features

Brand & Website Redesign RFP



listed in the RFP such as AI personalization or advanced analytics can be proposed as add-ons or optional phases.

5. Brand & Messaging

Questions

- Brand refresh vs. full rebrand?
- What aspects of current brand are biggest concern?
- Existing brand perception research available?
- Extend redesign into other materials?
- Graphic templates/collateral in scope?

Unified Response

CIVHC seeks a brand refresh, including an update to our logo and color palette. The organization name is not in scope for the brand refresh. Specifically, this includes refinement of logo, colors, typography, and messaging. CIVHC has anecdotal brand perception insights but no formal external survey providing brand research/feedback. The redesign will extend to all CIVHC documentation and templates (PowerPoint, reports, fact sheets, and social media templates) to ensure consistency. Current brand guidelines and visual assets will be shared.

6. Audiences & Strategy

Questions

- Who are priority audiences?
- Key goals for redesign?
- How does project connect to 3–5 year strategy?
- Success metrics (KPIs)?
- Strategic outcomes expected?
- Upcoming initiatives/campaigns to support?

Brand & Website Redesign RFP



Unified Response

Current priority audiences include policymakers, researchers, funders, and the public. We also wish to expand our reach to new audiences including providers, health systems, health technology companies, and the pharmaceutical industry. Goals are to improve accessibility and clarity of CIVHC's expertise, the value of the CO APCD data, expand reach, and reinforce CIVHC's role and the role of claims data in improving health care value.

Success will be measured by engagement metrics (traffic, time on site, downloads), stakeholder feedback, and ability to support successful reach into new and existing market segments. The redesign aligns with CIVHC's strategies of elevating CIVHC's commitment to our partners and communities through innovative, industry-leading data products and services with credibility, integrity, and responsible stewardship.

7. Content Strategy & Migration

Questions

- Who provides new/revised content?
- Content types most important?
- Which current content frustrates users?
- Audience journeys/navigation needs?
- Key visitor actions (request data, subscribe)?
- Compliance or messaging guidelines?
- Approximate number of pages/documents to migrate?
- Multilingual support needed?
- Content governance and workflow expectations?

Unified Response

The partner agency will refine, edit, and draft new content as needed, with CIVHC input. The most important content types are: reports, data visualizations, resources, and blogs. The new site should create streamlined journeys for different client types (providers, pharma, health systems, policymakers, researchers, etc.). We estimate that approximately 500–700 pages/resources will need review/migration. We anticipate keeping our Spanish-language pages, with potential to expand translation.

Brand & Website Redesign RFP



User frustrations include navigation complexity and difficulty finding technical vs. public content.

8. Technology & CMS

Questions

- Preferred CMS?
- Salesforce integration details?
- Hosting preferences?
- Existing stack details?
- Integrations (Salesforce, GA4, Mailchimp, AI chatbot, APCD dashboards)?
- Carry over custom tools?
- · Resource Library functionality?
- Role-based access/SSO needed?
- Data visualization platforms?
- Improvements to data pipelines?
- Security compliance?
- Analytics stack?

Unified Response

CIVHC currently uses WordPress, but other open-source CMS solutions can be proposed if they better support sophistication and the ability to scale over time. Salesforce integration is primarily for forms, contacts, and newsletter sign-ups; deeper integration may be explored in future. CIVHC's current hosting is via AWS; proposals should recommend a secure, scalable setup with WAF and daily backups. Existing data visualizations (Shop for Care, APM calculator, dashboards) must be preserved with improved integration (iframes or embedded tools). Resource Library should remain. Role-based access is not currently required but may be scoped as optional. Tableau is preferred for data visualizations; other platforms will be considered.

Brand & Website Redesign RFP



9. Governance & Stakeholders

Questions

- Approval process?
- Who is on project team, who has final approval?
- How are decisions made internally?
- Stakeholders to involve in research?
- Number of stakeholders to interview? Incentives?

Unified Response

CIVHC's project team will include our Impact (Marketing/Communications) team, IT, and senior leadership, with final approval resting with the organization's Executive Team. Decisions are generally collaborative but require executive sign-off for major deliverables. Stakeholder input will include 8–10 interviews across CIVHC constituencies, including staff, our Board of Directors, and current clients/users. CIVHC can provide access to participants; incentives are not anticipated.

10. Design & User Experience

Questions

- Rounds of revisions?
- Current challenges driving redesign?
- Objectives for UX improvements?
- Websites admired?
- Balance data visualization vs storytelling?
- Modern accessible design that reflects expertise?
- Persona-based navigation vs. alternatives?
- Templates/page types expectations?
- Data-viz design system components?

Brand & Website Redesign RFP



Unified Response

CIVHC is open to fewer design rounds if efficiency and alignment are demonstrated; up to five are budgeted. Current challenges include a large amount of content, site complexity, outdated navigation, and difficulty accessing data. Primary objectives are to improve navigation and site clarity and to create tailored journeys through the site and CIVHC content by market segment/organization type and balance between data-heavy visuals and storytelling. Secondary objectives are mobile responsiveness and accessibility (WCAG 2.1 AA). CIVHC is open to inspiration from peer nonprofit and health data sites. The redesign should convey CIVHC's authority and accessibility. Vendors should expect to deliver 10–12 unique layouts including homepage, program pages, data dashboards, and resource library. Design system should include both UI and basic data visualization elements.

11. Al & Advanced Features

Questions

- AI/chatbot features required or exploratory?
- Scope of AI optimization?
- Preferred AI search platform?
- RBAC for chatbot?
- Future AI roadmap features?
- Compliance/privacy concerns for AI accessing APCD data?
- Deployment restrictions?
- Log storage, retention, anonymization?
- Future-proofing for automation?
- Al training data responsibilities?
- Chatbot success metrics?
- Chatbot use cases?

Unified Response

As indicated in the RFP, all AI features are exploratory at this stage and should be priced and scoped as optional; proposals should treat them as optional add-ons with cost estimates.

Brand & Website Redesign RFP



Priority AI use cases include but are: enhanced search, basic chatbot, and personalization of content by persona. Advanced analytics and predictive dashboards may be considered later. Compliance with HIPAA and state regulations is required; no regulated data should be exposed. CIVHC prefers leveraging established search/AI platforms (Elastic, Azure) with potential future LLM integration if compliant. Chatbots should initially support FAQs, resource discovery, and data request guidance. Metrics may include resolution rate and user satisfaction. Training data will come from CIVHC content sources (reports, FAQs, PDFs).

12. Analytics, Search & Accessibility

Questions

- Analytics platform preferences?
- Advanced analytics?
- Accessibility standards?
- Audit frequency?
- Multilingual support?
- SEO scope and governance?

Unified Response

CIVHC uses GA4 and expects to continue. Advanced analytics tools (e.g., heatmaps, Hotjar) can be proposed as add-ons. Accessibility compliance must meet WCAG 2.1 AA or higher. Post-launch audits should be conducted annually. Spanish language support will be maintained; additional multilingual capacity may be scoped. Vendors should propose technical SEO setup at launch, with ongoing SEO optional.

13. Hosting, Security & Maintenance

Questions

- Hosting requirements?
- Security compliance?
- Existing security measures?

Brand & Website Redesign RFP



- Backup/recovery frequency and retention?
- Expected concurrent user load?
- Performance benchmarks?
- Long-term support expectations?
- SLA requirements?
- Offshore delivery acceptable?
- Launch constraints (DNS, SSL)?

Unified Response

Preferred hosting is AWS or comparable secure cloud service. Compliance with HIPAA and state/federal security standards is required. Backups should be at least daily, with 30–90 day retention. Peak concurrent users are estimated in the hundreds; performance should target <3 second load times and passing Core Web Vitals. CIVHC prefers an option for long-term vendor maintenance (patches, updates) but is open to hybrid models with staff. SLAs should be proposed. Offshore development with onshore account management is acceptable if compliant.

14. Post-Launch Support & Training

Questions

- Who owns content updates?
- CMS training needed?
- Support model preferred?
- Frequency of audits?
- Training delivery method, number of staff?
- Post-launch activities: bug triage vs UX/content fixes?
- Expected velocity for support hours?

Unified Response

CIVHC Communications will own content updates post-launch. Staff will require CMS training (approx. five—seven staff). Online training is acceptable. CIVHC prefers a support retainer model with quarterly accessibility/performance audits; vendors should specify ongoing support

Brand & Website Redesign RFP



options. The stabilization period (30–90 days) should include bug triage and minor UX/content fixes. Support hours and SLA targets should be proposed for comparison.

15. Legal & Compliance

Questions

- Proposal appendices beyond 25-page max?
- IP ownership and open-source licenses?
- Insurance, indemnity, accessibility warranty requirements?

Unified Response

Proposals should adhere to the 25-page maximum, but CIVHC is open to reasonable appendices for resumes, case studies, or references. CIVHC will retain full ownership of all deliverables. Use of open-source libraries under permissive licenses is acceptable but should be documented. Vendors should align with CIVHC's standard contract requirements, including insurance and accessibility compliance warranties.