

Interoperability and eMPI Software RFP

Questions & Answers

Question 1	Section 3.7 California Data Exchange Framework (DxF) Policies and procedure. Are there specific security requirements documented for compliance with the DxF. Is there a link to the relevant policies and procedures.
CalMHSA Answer	Please visit the CalHHS Data Exchange Framework website for more information.
Question 2	5.3 Supports triggers and notification capabilities to users such as: Admit Is CALMHSA looking to implement ADT notifications using HL7 V2 messaging, or by implementing the HL7 Da Vinci Notification Implementation Guide?
CalMHSA Answer	Please indicate all means by which your solution can facilitate event notifications whether that be via HL7 v2, HL7 Da Vinci Notifications, or by other means.
Question 3	5.10.1 Patient Access API Is this API based on CMS 9115 Rule ? Or looking to also include the associated upgrades that are detailed out in the New Proposed CMS Advanced Interoperability Rule & Improving Prior Authorization (CMS-0057-P)?
CalMHSA Answer	Yes, this item stems from the CMS Patient Access and Interoperability ruling. Please address the item based on the current proposed language, but also provide information on the technical capabilities to work with API's from a general perspective. Please also state any limitations your solution may have regarding any API integration.
Question 4	5.10.2 Provider Access API Since this rule in CMS-0057-P is not yet finalized and approved, what is the expectation of CAPMHSA of the respondents to provide in their narrative?
CalMHSA Answer	Please respond based on the current proposed language for CMS-0057-P .
Question 5	5.10.3 Payer-to-Payer API Since this rule in CMS-0057-P is not yet finalized and approved, what is the expectation of CAPMHSA of the respondents to provide in their narrative?
CalMHSA Answer	Please respond based on the current proposed language for CMS-0057-P .
Question 6	5.10.4 Provider Directory API Is this API based on CMS 9115 Rule ? Or looking to also include the associated upgrades that are detailed out in the New Proposed CMS Advanced Interoperability Rule & Improving Prior Authorization (CMS-0057-P)?
CalMHSA Answer	Yes, to both components.
Question 7	5.10.5 Document Requirements Lookup Service API Since this rule in CMS-0057-P is not yet finalized and approved, what is the expectation of CAPMHSA of the respondents to provide in their narrative?

CalMHSA Answer	Please respond based on the current proposed language for CMS-0057-P .
Question 8	5.10.6 Prior Authorization Support API Since this rule in CMS-0057-P is not yet finalized and approved, what is the expectation of CAPMHSA of the respondents to provide in their narrative?
CalMHSA Answer	Please respond based on the current proposed language for CMS-0057-P .
Question 9	5.10.6 Prior Authorization Support API Does CALMHSA have an existing Adjudication/Prior Authorization system?
CalMHSA Answer	No.
Question 10	5.10.6 Prior Authorization Support API Which vendor provides your Prior Authorization system?
CalMHSA Answer	N/A.
Question 11	5.10.6 Prior Authorization Support API Does CALMHSA publish Medical Guidelines for procedures and services that require Prior Authorization? If so where are the guidelines published?
CalMHSA Answer	No.
Question 12	5.10.7 Bulk Since this rule in CMS-0057-P is not yet finalized and approved, what is the expectation of CAPMHSA of the respondents to provide in their narrative?
CalMHSA Answer	Please respond based on the current proposed language for CMS-0057-P .
Question 13	9.3 Non-healthcare organizations including Education, Social Services, Comm Is the data going to be Healthcare Data or Social Determinants of Health data even though the data sources are from NON-Healthcare Organizations?
CalMHSA Answer	We are looking for a solution that can handle all data types including, but not limited to, healthcare data and social determinants. Please include in your response how your solutions handle non-healthcare conforming data.
Question 14	Identity Mgmt Provider Do you have a current OPEN ID Connect identity Management Solution for the Secure API's or will this implementation need to have the selected vendor bring the identity management solution in the architecture and implementation
CalMHSA Answer	CalMHSA does not. Please include in your bid whether or not your solution comes with an OPEN ID Identity Management Solution for Secure APIs, and/or your approach for working with a third-party tool. Please visit the CMS Interoperability and Patient Access website for more information on the specific API implementation guides.
Question 15	Volume of Data What is the volume of your patient claims data and how many active members do you have per year, What is the churn rate per year of members leaving the plan?

CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p>
Question 16	<p>Clinical Data & FHIR Resources</p> <p>What Clinical Resources from the US Core are you looking to support as part of the Patient Access API?</p>
CalMHSA Answer	<p>If by US Core, you are referring to the USCDI v2 and above, we are looking to support all required data elements as specified under the CMS Interoperability and Patient Access ruling. Please respond based on the current proposed language for CMS-0057-P.</p>
Question 17	<p>Rx Claims Data</p> <p>Do you have any RX Claims or use a current PBM?</p>
CalMHSA Answer	<p>No.</p>
Question 18	<p>Data Mapping and Conversion</p> <p>Do you have the resources to map and convert the data for each implementation guide or are you looking for the selected vendor to do that effort as part of the implementation?</p>
CalMHSA Answer	<p>We do not. Vendors are asked to provide this information as a part of your proposal.</p>
Question 19	<p>Third Party Vendor FHIR APIs</p> <p>Do you have thrid party vendors that have FHIR APIs that can be connected to?</p>
CalMHSA Answer	<p>We do not. Vendors are asked to provide this information as a part of your proposal.</p>
Question 20	<p>Vendor Selection Criteria</p> <p>What is the short list and selection criteria for CALMHSA that will evaluate and select for this RFP</p>
CalMHSA Answer	<p>Vendors will be evaluated based on criteria including, but not limited to: General Information provided, Data Security, System Capabilities/Functionality, Cost, Implementation timeline, Support and Professional Service offerings, and References.</p>
Question 21	<p>Pricing Templates</p> <p>Is there a specific pricing/budget template that you would like us to use or do we submit in our own format?</p>
CalMHSA Answer	<p>Please use your own template.</p>
Question 22	<p>1. What is the population # (person lives) that are being served by CalMHSA that will be impacted with the interop and eMPI functionality? 2. IS CalMHSA looking for full-service IT management of the interop and eMPI technical support, maint, development? 3. Will service include support of DICOM image transfer?</p>

CalMHSA Answer	<p>1. Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p> <p>2. We are evaluating options. Please indicate if your organization provides full IT management of the solution, or if it is a platform to be adopted.</p> <p>3. It's a possibility. Please indicate if your solution can support DICOM integration.</p>
Question 23	<p>General Question</p> <p>What is the expected implementation start date for this project?</p>
CalMHSA Answer	Q2 of 2023.
Question 24	<p>General Question</p> <p>What is the deadline for implementing the required services solicited with this RFP?</p>
CalMHSA Answer	Q2 of 2023. We will be evaluating each proposal's current capabilities at the time of submission and the ability to deliver the requested functionality and services as a part of the initial implementation.
Question 25	<p>General Question</p> <p>Does CalMHSA envision this as a solution that will be provided to all of its constituent counties?</p>
CalMHSA Answer	Yes.
Question 26	<p>General Question</p> <p>What is the expected volume of historical data/legacy data to be incorporated into the solution?</p>
CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p>
Question 27	<p>General Question</p> <p>Does CalMHSA have a preference for cloud vendor (eg: Azure, AWS, GCP, etc.)</p>
CalMHSA Answer	No preference, but please specify if your solution can only operate or is optimized on a specific cloud solution or if it is agnostic.
Question 28	<p>Question from Section 5.3</p> <p>Can CalMHSA elaborate on who would consume the trigger or notification? Is EHR integration presumed in this requirement?</p>

CalMHSA Answer	Notifications will be received by downstream receivers, including but not limited to integrated EHR systems.
Question 29	Question from Section 5.4 Does CalMHSA envision leveraging the information to actively manage member care? If so, can it share the number of members that would be actively managed via the solution?
CalMHSA Answer	The CalMHSA interoperability solution is envisioned to contribute to the wholistic continuum of care and work in collaboration with other tools such as Practice Management and EHR systems. The number of members is variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 30	Section 5.7 Does CALMHSA envision this system will be able to ingest syndromic surveillance data, or be leveraged as a syndromic surveillance system? If the latter, can CALMHSA elaborate on the required functionality and reports?
CalMHSA Answer	Yes. Please provide your respective solutions reporting capabilities to be able to support syndromic surveillance workflows.
Question 31	Section 5.1 Is the solution expected to solely provide the 9115-F APIs (patient access, payer-to-payer, etc.) or would the vendor also be responsible for building the attendant workflows for members, payers, etc.
CalMHSA Answer	Either provide or be able to integrate with third party API per CMS approved guidelines. Please indicate if attendant workflows are available with your solution and your approach.
Question 32	Section 9 Of the systems listed in this requirement, can CalMHSA please provide: - a list of source systems - the total number of feeds for each source system - the frequency at which data will be provided
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 100 source systems = XXX - 101 to 200= XXX - 201 and up = XXX NOTE: Provided number range is for example purposes only. Please provide range applicable to your respective solution. Please anticipate cadence of transactions to include real-time, daily, weekly, monthly, and other agreed upon timetables.

Question 33	Section 5.1 Do you have an API management tool, if so which tool is it, and are you planning to leverage it for your public interoperability API's?
CalMHSA Answer	No. CalMHSA currently does not have an API management tool. If this is required for your solution, please indicate as such, and propose a means.
Question 34	Section 8 Can CalMHSA elaborate on the use case for data access? Will access be limited to CalMHSA staff or be made available to constituent counties? Who will have administrator rights to determine role-based access controls? How many users are anticipated?
CalMHSA Answer	Data access should be approached broadly. While some CalMHSA staff will act as overall Administrators, this is not exclusive. Please provide information on your solutions approach to role-based access and indicate if there are any limitations as a part of your proposal. User counts will be variable.
Question 35	Section 23 Can CalMHSA elaborate on what "direct entry" means in this requirement?
CalMHSA Answer	Ability to enter data directly into the platform via user interface (i.e. public facing portal). Please indicate any limitations (if any) such as but not limited to whether direct entry can be done, but only by Administrators, etc.
Question 36	Section 2 In the response excel template shared by you , We have noticed that Question no.2 has 8 subpart, but the RFP doument doesn't have these sub parts. Is it a numbering error or few of the questions got skipped in the RFP document.
CalMHSA Answer	This is a typo. CalMHSA will post an updated response template along with these responses.
Question 37	General Question How often do you want the data refreshed?
CalMHSA Answer	TBD. Please indicate if your solution is limited to a specific cadence for refreshes, upgrades, or system maintenance.
Question 38	Statement of Work 5 Please clarify whether the solution is expected to provide deliverables 5.1 - 5.10 as solution functionality, or to support these use cases to be performed by other persons/systems. For example, for deliverable 5.8, potential cost analysis and cost trending, is the expectation that the vendor would provide these analytics services as part of the solution offering, or that the data necessary for cost analysis is provided in an easily usable/shareable format for CalMHSA users to do the analysis?
CalMHSA Answer	Items 5.1 through 5.10 are intended to be addressed as solution functionality. Please indicate if your solution can perform the functionality directly, or if it acts as a data aggregation tool to facilitate the goal.
Question 39	Response Template Section 2 In the response template – section 2 – there are spaces for subsections 2.1 – 2.8. Where in the RFP document does it mention these subsections?
CalMHSA Answer	This is a typo. CalMHSA will post an updated response template along with these responses.

Question 40	Section 3, Item 4 - Budgetary Information Regarding Section 3, Item 4: Is there a specific template or format for presenting budgetary information so that CalMHSA can directly compare competing offers? Also - can CalMHSA provide the expected volume of identities to be addressed utilizing the proposed MPI solution?
CalMHSA Answer	No template is provided at this time. Volume of identities is variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 41	Section 4 - Annual Report Section 4 Minimum Requirements – May we provide a link to our annual report due to the size of our document?
CalMHSA Answer	Yes, this is allowable.
Question 42	General Question To propose a budget for the Project Scope of work, how many unique identities will be managed in the MPI? Vendor defines identities as equal to a person, an identity can have multiple linked source records under it. If the unique identities are not known, please provide an estimate so that all Vendors are proposing a solution based on the same information. Please also provide an estimate on year over year growth to the unique identity count.
CalMHSA Answer	Volume of identities is variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 1 million transactions/month = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 43	Response Template Will CalMHSA consider a vendor non-responsive if we cannot respond “Yes” to several of the requirements in the response template?
CalMHSA Answer	No. Please respond to all questions with a yes/no and provide a narrative response supporting your answer.
Question 44	General Question To propose a budget for the Project Scope of work, how long of a contract term for the MPI license should Vendors propose? One year only? Multiyear? One year with optional annual renewals?
CalMHSA Answer	Please provide quotes based on all stated terms (i.e. one year, multi-year, one year with optional annual renewals, etc.).

Question 45	General Question Does CalMHSA have a MPI today, if yes, who is the current Vendor?
CalMHSA Answer	No, we do not.
Question 46	General Question Does CalMHSA plan on doing any manual data stewardship of the MPI? Manual data stewardship would be any staff members reviewing tasks (potential matches) and other ad-hoc actions (such as manually linking a record) in the MPI. If yes, approximately how many users would there be?
CalMHSA Answer	We evaluate proposals based on whether or not your solution requires manual stewardship or can be automated. If your eMPI requires manual stewardship, please indicate as such.
Question 47	General Question Will the vendor’s response to the RFP become public (via FIOA or any other release) or shared outside of the review committee? If yes, can vendors submit a redacted version of the response removing any proprietary information.
CalMHSA Answer	CalMHSA is subject to the Ralph M. Brown Act and the California Public Records Act. All proposals received for this RFP are ultimately subject to public review; however, during the competitive bid process, all proposals will be kept confidential. Please refer to the section of the RFP entitled “Notice Regarding Public Records Act Request,” which can be found on page 12, for additional information regarding this topic. Vendors may submit a redacted version of the response at their discretion. However, please be advised that CalMHSA’s evaluation criteria includes information contained in the vendors’ responses. As such, vendors take full responsibility for the potential impact redacted information may have on CalMHSA’s evaluation of the vendor proposal.
Question 48	Technical Question Page 6, Item 13: Will all traffic from data sources (that require MPI interactions) flow to the MPI flow through the interoperability platform? In other words, are there in scope data sources that will connect to the MPI directly? If yes, what formats are required for these direct connections?
CalMHSA Answer	It’s possible. Most interactions with the eMPI will flow through the interoperability platform, but in the event a use case presents itself as needing to connect directly to the eMPI, please indicate if your solution can accommodate this workflow. Data formats could vary.
Question 49	Technical Question Page 7, Item 20: Please describe the use case related “episodic identifiers.” What is the expected behavior of the MPI for episodic identifiers once they have been end dated? Does the MPI need to auto assign the end dates, or will they be transmitted to the MPI for the source system? Does the MPI need to take any special action on/with episodic identifiers that have been end-dated?

	Please indicate if your system can handle episodic episodes, whether via manual stewardship or automation, and the process for such. As this may vary from system to system, we will evaluate responses based on available functionality.
Question 50	Technical Question Page 7, Item 23: Please describe what “information” within the MPI requires “direct entry” and please describe use case for manually changes of data elements within the MPI.
CalMHSA Answer	Ability to enter data directly into the platform via user interface (i.e. public facing portal). Please indicate any limitations (if any) such as but not limited to direct entry can be done, but only by Administrators, etc. Manual changes can be as simple as changing a street address abbreviation to the full name (i.e. St. vs. Street), or potentially modifying identifiers. This is not to imply that CalMHSA intends to make manual changes to any eMPI elements, but rather to determine if the proposed solution can make changes. And if so, what is the process for such.
Question 51	General Question What is the total number of patients CalMHSA expects to have in the system Years 1, 2, 3, etc.?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 1 million members = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution. Please anticipate cadence of transactions to include real-time, daily, weekly, monthly, and other agreed upon timetables.
Question 52	General Question What is the total number of data sources & destinations CalMHSA expects to have in the system Years 1, 2, 3, etc.?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 100 data sources = XXX - 101 to 200 data sources = XXX - 201 to 300 data sources = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 53	Technical Question In the Interoperability_eMPI RFP Template, sections 2.1-2.8 are listed. In the CalMHSA PDF, there were no subpoints listed under question 2. Could we please have access to questions 2.1-2.8?
CalMHSA Answer	This is a typo. CalMHSA will post an updated response template along with these responses.

Question 54	Section 3 Requested Information #3 Please advise if CalMHSA has a preferred Implementation Timeline to complete the Design, Develop, and Implementation (DDI) that the vendors should be striving to meet.
CalMHSA Answer	This will be variable. Please provide an optimal implementation plan for your solution for evaluation, as well as an implementation focused on speed to delivery.
Question 55	Section 3 Requested Information #4 Please provide the funding limit that would be associated with the scope of work or tentative contract?
CalMHSA Answer	Funding discussions are underway but are currently not publicly available at this time.
Question 56	Section 3 Requested Information Will CalMHSA provide the evaluation criteria for this proposal? For instances does Experience, Solution or Cost have specific weights or points associated to evaluate each vendor's proposal?
CalMHSA Answer	Vendors will be evaluated based on criteria including, but not limited to: General Information provided, Data Security, System Capabilities/Functionality, Cost, Implementation timeline, Support and Professional Service offerings, and References.
Question 57	Section 3 Requested Information #4 In order to provide CalMHSA with an accurate cost proposal that accounts for the duration of the contract, please provide the tentative contract term.
CalMHSA Answer	Please provide quotes based on all multiple term options (i.e. one year, multi-year, one year with optional annual renewals, etc.).
Question 58	Section 3 Requested Information #4 Does CalMHSA have a preferred Cost Template for the prospective proposers to populate?
CalMHSA Answer	No. Please use your own form/template.
Question 59	Section 3 Requested Information #6 RFP Section 3 Requested Information sub requirement #6 provides instructions on utilizing the Excel spreadsheet to populate the narrative responses. The requirement at the end of the first paragraph advises to explain in detail: a. Applicant's experience providing applicable services, including relevant examples; b. How Applicant will meet said requirement, and: c. Any specific deficiencies that would prohibit Respondent from meeting the requirements identified. Please confirm that this level of detail must remain within 150 words as listed within the Excel document's instructions within field D1.
CalMHSA Answer	Each response within the response template is limited to no more than 150 words.
Question 60	Section 5 Can you please describe the different target user groups and potential application types that will consume the data?
CalMHSA Answer	Potential target user groups include not are not limited to: Inpatient/Outpatient entities, patients, social service organization, schools, justice system, state and federal entities, etc.

Question 61	Section 5 - 5.2 Please describe your current authentication standard(s) and existing process for Single Sign On (SSO)?
CalMHSA Answer	We do not have an external facing SSO process. We are asking vendors to provide information on their ability to accommodate SSO. If your solution is unable to accommodate SSO, please indicate as such in your response.
Question 62	Section 5 - 5.10 For CMS Interoperability and Patient Access, please provide your current in-scope member count and count of active vs inactive?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 1 million members = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 63	Section 5 - 5.10 For CMS Interoperability and Patient Access, please provide your expected historical claim annual/monthly volume to be considered in the Cost Proposal?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 1 million claims = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 64	Section 5 - 5.10 For CMS Interoperability and Patient Access most clients have required historical claims dating back 6 years, aligning with the CMS Interoperability rule, however not all clients have the data available. Will CalMHSA advise how far back in years will the historical upload be, to assist with an accurate Cost Proposal?
CalMHSA Answer	CalMHSA intends to align requirements for data available with current mandates such as CMS Interoperability and Patient Access.
Question 65	Section 5 - 5.10 For CMS Interoperability and Patient Access, how many different data sources/vendors will provide inputs?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 100 data sources = XXX - 101 to 200 data sources = XXX - 201 to 300 data sources = XXX

	NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 66	eMPI Requirements Regarding the eMPI functionality, approximately how many different sources of information are expected? How many at initial implementation and anticipated additions over time?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 100 data sources = XXX - 101 to 200 data sources = XXX - 201 to 300 data sources = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 67	Section 3 Requested Information The scope of work has several significant projects that are commonly implemented in phases, is CalMHSA amenable to proceeding with a phased in implementation? If so, would CalMHSA advise what functionality should be prioritized during the implementation?
CalMHSA Answer	Please indicate if your solution requires a phased approach, or if a “big bang” can be implemented.
Question 68	Section 5 - 5.10 Regarding the Patient Access API’s - will the vendor have to extract data from a repository/multiple repositories or will CalMHSA provide needed data in an extract to the vendor?
CalMHSA Answer	It is possible multiple repositories will act as data sources. Please indicate if your solution can accommodate this (and how), or if this is a limitation.
Question 69	Section 5 - 5.3 Please clarify if CalMHSA already retains the below list of data within its data sources internally or if they will be sourced from HIE, EMR or EHR systems? - Admits/Discharges/Transfers (ADTs) - Observation patient - Jail incarceration and release notifications - Advanced Care Planning (ACP) documents - Telehelath visits - Deceased data - Hospice - Mental Health events
CalMHSA Answer	Please anticipate this data being retrieved/available from various data sources.
Question 70	Section 8 Submission Instructions and Requirements Would CalMHSA consider an extension if the responses to questions are not available on February 3, 2023, per the Proposal Timeline?
CalMHSA Answer	Responses to questions will be ready by 2/3.
Question 71	General - Overview Please provide a description or diagram of existing technology infrastructure relevant to the interoperability project.
CalMHSA Answer	CalMHSA currently does not have an existing interoperability platform. We will be implementing a system net new.

Question 72	Project Scope of Work 5 Some of the functionalities described may require a clinical data repository. Is a clinical data repository in scope for this RFP?
CalMHSA Answer	Please indicate if your solution includes a clinical data repository, or if CalMHSA is required to provide one to which your solution will connect.
Question 73	Project Scope of Work - Enterprise Master Patient Index Requirements Please provide a list or count of how many patient identity sources are expected to be part of the initial implementation. How many will provide all patient identities to the CalMHSA eMPI, and how many would only provide a subset of identities based on rules or triggers?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 1 million members = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution. Please anticipate cadence of transactions to include real-time, daily, weekly, monthly, and other agreed upon timetables.
Question 74	Project Scope of Work - Enterprise Master Patient Index Requirements What is the estimated anticipated unique patient volume and approximate annual growth rate?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 1 million members = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution. Please anticipate cadence of transactions to include real-time, daily, weekly, monthly, and other agreed upon timetables.
Question 75	Project Scope of Work - 9.1, 9.2, 9.3 Please provide a breakdown of integrations (organization/organization type and interface type) to be included for the initial implementation and pricing: 9.1. Clinical including Hospitals, Outpatient Entities, Laboratories, Behavioral Health, Pharmacies, and other healthcare organizations 9.2. Administrative including payer, billing, and practice management 9.3. Non-healthcare organizations including Education, Social Services, Community-based organizations, Justice System, etc.
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: <ul style="list-style-type: none"> - Under 100 data sources = XXX - 101 to 200 data sources = XXX

	- 201 to 300 data sources = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 76	Project Scope of Work Does CalMHSA have a preferred cloud hosting vendor?
CalMHSA Answer	No preference but please specify if your solution can only operate or is optimized on a specific cloud solution or if it is agnostic.
Question 77	Data Sources/Project Planning Who/what/where are the data sources, and do you have a priority list of targets identified that you can share? Are there any specific EHR solutions that we'll need to integrate with?
CalMHSA Answer	County Behavioral Health organizations and partners. Please indicate if you have any limitations with connecting to specific EHR's.
Question 78	Project Planning Is this a Phased approach? Expectations in Year 1, Year 2, Year 3, etc...?
CalMHSA Answer	Please respond if a phased approach is required to achieve all/some of the requirements listed in this RFP relative to your solution. Please provide an optimal implementation plan for your solution for evaluation, as well as an implementation focused on speed to delivery.
Question 79	Data Elements What data elements are you hoping to gather, and what is the minimum data set?
CalMHSA Answer	The baseline data set is the USCDI v2 and up.
Question 80	Sizing/Scale Can you provide estimates surrounding initial and ongoing data storage requirements?
CalMHSA Answer	Variable. Should storage capacity be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 500 GB = XXX/GB - 501 to 1TB = XXX/GB - Over 1 TB = XXX/GB NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 81	Sizing/Scale What is the total number of current patients and estimated new patients/clients per year?
CalMHSA Answer	Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example: - Under 1 million members/claims = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.
Question 82	1/31/2023 Questions for: RFP_F-0000000003-HP - Interoperability and eMPI Software. eMPI Questions **assume all eMPI records historical patient + new service patients** 1. What is the

	<p>total projected number of CalMHSA historical patient records needed to persist in the eMPI fro reference/comparison? (Historical reference information) 2. Is the current resident population serviced in the California approx. 2million? If not what is the estimate #? *The 2mill number was referenced on the CalMHSA website. Reference Client Questions: Requested Three (3) signed letters of support, including references from organizations with whom the Respondent has contractual or other business relationships who can substantiate the Respondent's capacity to provide such services as described in the Project Scope of Work, as described in Section 2, above. 1. In place of an (3) three actual signed letters of support from reference clients can the respondent submit (3) three direct contacts information from the client/project site? a. Client Name b. Address c. Client Contact Name & title d. Email e. Direct contact Phone # Other Questions: 1. Is CalMHSA looking for full-service IT management of the interop and eMPI technical support, maint, development? 2. Will full service include support of DICOM image transfer?</p>
<p>CalMHSA Answer</p>	<p>1. Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million members/claims = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p> <p>2. Per California EQRO report for the fiscal year of 2019, total Medi-Cal beneficiaries amounted to 12,914,806, with 627,928 served by County Behavioral Health. <u>Please note:</u> the numbers of total beneficiaries and beneficiaries served does not directly correlate to the anticipated person records to be managed by the anticipated interoperability and eMPI solution.</p> <p>Reference Client Responses:</p> <ul style="list-style-type: none"> - Regarding Letters of Support: No, please submit three letters of support as specified on the RFP document. <p>1. We are evaluating options. Please indicate if your organization provides full IT management of the solution, or if it is a platform to be adopted.</p> <p>2. It's a possibility. Please indicate if your solution can support DICOM integration.</p>
<p>Question 83</p>	<p>Sizing/Scale Please provide details surrounding population, number of patient encounters, outpatients appointments, etc.?</p>
<p>CalMHSA Answer</p>	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p>
<p>Question 84</p>	<p>Project Planning Are you pursuing a SaaS or a self-hosted model?</p>

CalMHSA Answer	We are open to both.
Question 85	<p>Sizing/Scale</p> <p>What is the estimated number of users? Can you provide a breakdown of clinical/care coordinator users vs administrative/other users?</p>
CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 500 users= XXX - 500 to 1000 = XXX - 1001 and above = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p>
Question 86	<p>Spreadsheet Template</p> <p>The spreadsheet response template has areas for section items 2.1 - 2.8, these sections are not part of the PDF RFP document with the requirements, can you please clarify if 2.1 - 2.8 are missing or if we should ignore the response cells in the Excel file?</p>
CalMHSA Answer	This is an error on our part. We will post an updated response template along with these responses.
Question 87	<p>Provider directory data</p> <p>Does CalMHSA have a source of clean curated provider directory data that can be used to source the Provider Directory API? What format can that be provided in?</p>
CalMHSA Answer	Not at this time.
Question 88	<p>Clinical data sources</p> <p>Can CalMHSA provide initial Phase 1 project scoping guidance on the number and type of clinical data sources to be integrated, such as number of facilities to be connected, number and type of data contributing systems, expected number and type of unique interfaces (HL7 2.x ADT feed, on-demand C-CDA v2.1 document exchange, flat files, etc.)?</p>
CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 100 data sources = XXX - 101 to 500 = XXX - 501 and above = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p> <p>Please anticipate all interfaces as possibilities.</p>
Question 89	<p>Claims and enrollment data</p> <p>Can CalMHSA provide initial Phase 1 project scoping guidance on the number and type of administrative claims and enrollment data sources to be integrated, such as number of payers to be connected, number and type of data contributing systems, expected number and type of unique interfaces (X12 835, X12 837, flat files, etc.)?</p>

CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 100 data sources = XXX - 101 to 500 = XXX - 501 and above = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p> <p>Please anticipate all interfaces as possibilities.</p>
Question 90	<p>Non-healthcare data</p> <p>Is there any non-healthcare organization data that is in the scope of the initial Phase 1 project? If so, please provide details on those data sources?</p>
CalMHSA Answer	<p>Possibly. Please respond under the assumption that this is possible and address how your solution could accommodate a non-healthcare organization's data.</p>
Question 91	<p>CMS-9115-F requirements</p> <p>Regarding CMS-9115-F requirements, can bidders assume that CalMHSA will provide credentials to authenticate against for patients/members who want to access the API data through a third-party app?</p>
CalMHSA Answer	<p>No. If your solution requires CalMHSA to provide credentials, please indicate as such. Please refer to the CMS Interoperability and Patient Access website for more information on the patient access API.</p>
Question 92	<p>Section 5.3</p> <p>In section 5.3, jail incarceration and release notifications are listed as a type of trigger. What is the data source for this information and what format is it delivered in?</p>
CalMHSA Answer	<p>Unavailable at this time. Please indicate if your solution has limitations with connecting with specific data sources and processing specific formats.</p>
Question 93	<p>Reqs 5.4 - 5.8</p> <p>For requirements 5.4 through 5.8, are those capabilities that you are looking for in the solution or external applications that would use the data?</p>
CalMHSA Answer	<p>Items 5.1 through 5.10 are intended to be addressed as solution functionality. Please indicate if your solution can perform the functionality directly, or if it acts as a data aggregation tool to facilitate the goal.</p>
Question 94	<p>Member total</p> <p>What is the total number of members in the eMPI?</p>
CalMHSA Answer	<p>Variable. Should volume be a criterion for architecting and quoting your solution, please provide a range. For example:</p> <ul style="list-style-type: none"> - Under 1 million = XXX - 1 million to 2 million = XXX - 2 million to 3 million = XXX <p>NOTE: Provided transaction range is for example purposes only. Please provide range applicable to your respective solution.</p>

Question 95	Attached Spreadsheet I do not see the attached spreadsheet. Where do I find this? INTEROPERABILITY REQUIREMENTS (Pursuant to Section 3.6., below, please use the attached Excel spreadsheet response template to respond to items 1 – 23 of this section, including all subparts. For each item, please respond “Yes” or “No” in the specified column to indicate Applicant’s ability to comply with each requirement. Please further respond to each item by providing a narrative response in the specified column explaining in detail how Applicant will meet said requirement.)
CalMHSA Answer	The spreadsheet can be found attached to the RFP posting as an attachment.
Question 96	Section 2 - 2.1-2.8 Please clarify if the Response Template (MS Excel) Final file should have response requirement rows for 2.1 through 2.8? If so, these requirements are missing from the CalMHSA- Interoperability and eMPI Software RFP Final pdf file.
CalMHSA Answer	This is a typo. CalMHSA will post an updated response template along with these responses.
Question 97	Attached Spreadsheet I found the spreadsheet on the website.. You do not need to respond to my last question. Thanks!
CalMHSA Answer	The spreadsheet can be found attached to the RFP posting as an attachment.
Question 98	Project Scope of Work - 9.1, 9.2, 9.3 Can you provide more information related to the data types?
CalMHSA Answer	Beyond healthcare data types (i.e. HL7, CCD/A, USCDI, etc.) please indicate if your solution can accommodate (and how) non-healthcare conforming data types from organizations such as, but not limited to, Education, Social Services, etc. These data types may include flat file exchange, or some other form of data format.
Question 99	Project Scope of Work - 9.1, 9.2, 9.3 Will integration with non-healthcare organizations be weighed on this response?
CalMHSA Answer	Yes. This would fall under the category of Capabilities and Functionality.