**State** of Nebraska Department of Health and Human Services

## REQUEST FOR INFORMATION

|  |  |
| --- | --- |
| SOLICITATION NUMBER | RELEASE DATE |
| RFI 2998 | June 12, 2020 |
| OPENING DATE AND TIME | PROCUREMENT CONTACT |
| July 6, 2020 2:00 p.m. Central Time | Keith Roland and Holly Glasgow |

This form is part of the specification package and must be signed in ink and returned, along with information documents, by the opening date and time specified.

PLEASE READ CAREFULLY!

|  |
| --- |
| SCOPE OF SERVICE |

The State of Nebraska (State), Department of Health and Human Services (DHHS), is issuing this Request for Information RFI 2998 for the purpose of gathering information for a Contact Tracing Management system.

Written questions are due no later than June 19, 2020, and should be submitted via e-mail to [dhhs.rfpquestions@nebraska.gov](mailto:as.materielpurchasing@nebraska.gov).

Bidder should submit one (1) original of the entire RFI response. RFI responses should be submitted by the RFI due date and time.

Sealed RFI responses should be received by DHHS by the date and time of RFI opening indicated above.

# TABLE OF CONTENTS

[REQUEST FOR INFORMATION i](#_Toc42769132)

[TABLE OF CONTENTS ii](#_Toc42769133)

[I. SCOPE OF THE REQUEST FOR INFORMATION 1](#_Toc42769134)

[A. SCHEDULE OF EVENTS 1](#_Toc42769135)

[II. RFI RESPONSE PROCEDURES 2](#_Toc42769136)

[A. OFFICE AND CONTACT PERSON 2](#_Toc42769137)

[B. GENERAL INFORMATION 2](#_Toc42769138)

[C. COMMUNICATION WITH STATE STAFF 2](#_Toc42769139)

[D. WRITTEN QUESTIONS AND ANSWERS 2](#_Toc42769140)

[E. ORAL INTERVIEWS/PRESENTATIONS AND/OR DEMONSTRATIONS 3](#_Toc42769141)

[F. SUBMISSION OF RESPONSE 3](#_Toc42769142)

[G. PROPRIETARY INFORMATION 4](#_Toc42769143)

[H. REQUEST FOR INFORMATION OPENING 4](#_Toc42769144)

[III. PROJECT DESCRIPTION AND SCOPE OF WORK 5](#_Toc42769145)

[A. PURPOSE AND BACKGROUND 5](#_Toc42769148)

[B. CURRENT ENVIRONMENT 5](#_Toc42769149)

[C. SYSTEM REQUIREMENTS 5](#_Toc42769150)

[D. EXISTING CONTRACTS AND PRICING 5](#_Toc42769151)

[Form A Vendor Contact Sheet 7](#_Toc42769152)

1. SCOPE OF THE REQUEST FOR INFORMATION

DHHS is issuing this Request for Information, RFI 2998 for the purpose of gathering information for a Contact Tracing Management system.

**ALL INFORMATION PERTINENT TO THIS REQUEST FOR INFORMATION CAN BE FOUND ON THE INTERNET AT:** <http://das.nebraska.gov/materiel/purchase_bureau/vendor/agency-rfp.html>

* 1. SCHEDULE OF EVENTS

The State expects to adhere to the tentative procurement schedule shown below. It should be noted, however, that some dates are approximate and subject to change.

|  |  |  |
| --- | --- | --- |
| **ACTIVITY** | | **DATE/TIME** |
| 1 | Release Request for Information | June 12, 2020 |
| 2 | Last day to submit written questions | June 19, 2020 |
| 3 | State responds to written questions through Request for Information “Addendum” and/or “Amendment” to be posted to the internet at:  <http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx> | June 26, 2020 |
| 4 | RFI opening  Location for mailed/hand delivered submissions:  Department of Health and Human Services  Central Procurement Services  301 Centennial Mall S.  Lincoln, NE 68508  Electronic submissions:  <https://nebraskastategov.sharefile.com/r-r8000cf82b6b42bc8> | July 6, 2020  2:00 PM  Central Time |
| 5 | Conduct oral interviews/presentations and/or demonstrations (if required) | To Be Determined |

1. RFI RESPONSE PROCEDURES
   1. OFFICE AND CONTACT PERSON

Responsibilities related to this Request for Information reside with the State Purchasing Bureau. The point of contact for the RFI is as follows:

Name: Keith Roland and Holly Glasgow

Agency: Department of Health and Human Services

Address: 301 Centennial Mall

Lincoln, NE 68508

Telephone: 402-471-0727

E-Mail: [dhhs.rfpquestions@nebraska.gov](mailto:as.materielpurchasing@nebraska.gov)

* 1. GENERAL INFORMATION

A subsequent Request for Proposal (RFP) may not be issued as a result of this RFI. There will not be a contract as a result of this RFI and the State is not liable for any cost incurred by vendors in replying to this RFI. If an RFP is issued, the information provided will assist the State of Nebraska in developing the Request for Proposal. This RFI does not obligate the State to reply to the RFI responses, to issue an RFP, or to include any RFI provisions or responses provided by vendors in any RFP.

* 1. COMMUNICATION WITH STATE STAFF

From the date the Request for Information is issued and until RFI opening (as shown in the Schedule of Events), contact regarding this RFI between potential vendors and individuals employed by the State should be restricted to written communication with the staff designated above as the point of contact for this Request for Information.

The following exceptions to these restrictions are permitted:

* + 1. Written communication with the person(s) designated as the point(s) of contact for this Request for Information;
    2. contacts made pursuant to any pre-existing contracts or obligations; and
    3. State-requested presentations, key personnel interviews, clarification sessions, or discussions.

Violations of these conditions may be considered sufficient cause to reject a vendor’s response to the RFI. No individual member of the State, employee of the State, or member of the Interview Committee is empowered to make binding statements regarding this RFI. The State of Nebraska will issue any clarifications or opinions regarding this RFI in writing.

* 1. WRITTEN QUESTIONS AND ANSWERS

Any explanation desired by a vendor regarding the meaning or interpretation of any Request for Information provision should be submitted in writing to DHHS and clearly marked “RFI Number 2998”; Contact Tracing Management Questions”. It is preferred that questions be sent via e-mail to dhhs.rfpquestions@nebraska.gov

It is recommended that Respondents submit questions sequentially numbered, include the RFI reference and page number using the following format.

|  |  |  |  |
| --- | --- | --- | --- |
| Question Number | RFI Section Reference | RFI Page Number | Question |
|  |  |  |  |

Written answers will be provided through an addendum to be posted on the Internet at <http://dhhs.ne.gov/Pages/Grants-and-Contract-Opportunities.aspx> on or before the date shown in the Schedule of Events.

* 1. ORAL INTERVIEWS/PRESENTATIONS AND/OR DEMONSTRATIONS

The State reserves the right to conduct oral interviews/presentations and/or demonstrations if required at the sole invitation of the State.

Any cost incidental to the oral interviews/presentations and/or demonstrations shall be borne entirely by the vendor and will not be compensated by the State

* 1. SUBMISSION OF RESPONSE

The State is accepting either electronically submitted responses or hard copy, paper responses for this RFP.

For respondents submitting electronic responses:

* + 1. Respondents submitting electronically can upload the response via ShareFile here:
       1. <https://nebraskastategov.sharefile.com/r-r8000cf82b6b42bc8>
       2. ShareFile works with Firefox, Internet Explorer and Chrome. It does not work with Microsoft Edge.

* + 1. ELECTRONIC PROPOSAL FILE NAMES

The respondent should clearly identify the uploaded RFI proposal files. To assist in identification please use the following naming convention:

* + - 1. RFI 2998 ABC Company
      2. If multiple files are submitted for one RFI proposal, add number of files to file names: RFI 2998 ABC Company File 1 of 2.

For respondents submitting paper/hard copy responses:

* + 1. Respondents who are submitting a paper response should submit one proposal marked on the first page: “ORIGINAL”.

United States Postal Services (USPS) delivered proposal responses shall be mailed to:

ATTN: Keith Roland & Holly Glasgow

DHHS - Central Procurement Services

PO BOX 94926

Lincoln, NE 68509

Hand delivered proposal responses or responses delivered by Federal Express (FedEx), United Parcel Service (UPS), etc. shall be delivered to:

ATTN: Keith Roland & Holly Glasgow

DHHS - 3rd Floor Reception Desk

301 Centennial Mall South

Lincoln, NE 68509

To facilitate the response review process, one (1) original of the entire RFI response should be submitted. RFI responses should be submitted by the RFI due date and time.

**A separate sheet must be provided that clearly states which sections have been submitted as proprietary or have copyrighted materials.** RFI responses should reference the request for information number and be sent to the specified address. Please note that the address label should appear as specified on the face of each container. If a recipient phone number is required for delivery purposes, 402-471-0727 should be used. The Request for Information number must be included in all correspondence.

* 1. PROPRIETARY INFORMATION

Data contained in the response and all documentation provided therein, become the property of the State of Nebraska and the data become public information upon opening the response. If the vendor wishes to have any information withheld from the public, such information must fall within the definition of proprietary information contained within Nebraska’s public record statutes. All proprietary information the vendor wishes the state to withhold must be submitted in a sealed package, which is separate from the remainder of the response. The separate package must be clearly marked “PROPRIETARY” on the outside of the package or if submitting the proposal or response electronically, as a separate electronic file that is named “PROPRIETARY”. Vendor may not mark their entire Request for Information as proprietary. Failure of the vendor to follow the instructions for submitting proprietary and copyrighted information may result in the information being viewed by other vendors and the public. Proprietary information is defined as trade secrets, academic and scientific research work which is in progress and unpublished, and other information which if released would give advantage to business competitors and serve no public purpose (see Neb. Rev. Stat. § 84-712.05(3)). In accordance with Attorney General Opinions 92068 and 97033, vendors submitting information as proprietary may be required to prove specific, named competitor(s) who would be advantaged by release of the information and the specific advantage the competitor(s) would receive. Although every effort will be made to withhold information that is properly submitted as proprietary and meets the State’s definition of proprietary information, the State is under no obligation to maintain the confidentiality of proprietary information and accepts no liability for the release of such information. The State will determine, in its sole discretion, if the disclosure of the information designated by the Bidder as proprietary would 1) give advantage to business competitors and 2) serve no public purpose. The Bidder will be notified of the State’s decision. Absent a determination by the State that the information may be withheld pursuant to Neb. Rev. Stat. § 84-712.05, the State will consider all information a public record subject to disclosure.

* 1. REQUEST FOR INFORMATION OPENING

The sealed and electronic responses will be publicly opened and the responding entities announced on the date, time, and location shown in the Schedule of Events.

1. PROJECT DESCRIPTION AND SCOPE OF WORK
   1. PURPOSE AND BACKGROUND

The State of Nebraska is issuing this Request for Information (RFI) to solicit information from vendors who can provide a commercial-off-the-shelf Contact Tracing Management system, which will be used to track and monitor data being submitted to and requested by contact tracers in response to the COVID-19 pandemic.

In carrying out its public health mission, the State of Nebraska is tracing the contacts of individuals who have been diagnosed with COVID-19. Contact tracing involves the monitoring of individuals with COVID-19 to better keep them safe, notifying others of potential exposure, and preventing additional transmission.

The system will provide a user-friendly technology solution that will contain and manage information from multiple sources on citizens who need to be communicated with via phone, email or text regarding contact investigation and/or tracing. The communication efforts will be executed and logged using industry standard call center methods such as scheduled call back times, varying the communication medium, and metrics-driven decisions. The system will allow DHHS and the local health departments access to review call center performance and generate robust reporting on case efforts.

* 1. CURRENT ENVIRONMENT

Contact tracers in the State of Nebraska currently use multiple systems: NEDSS, RedCap, and SharePoint.

* + 1. NEDSS is the electronic reporting source for positive laboratory results, where reportable disease information is centrally stored for analysis purposes, and also for sharing disease data with CDC and local health department partners.
    2. RedCap is used for collecting information on positive case investigations and contact calls. It provides the contact information, who made the contact, and the log of call attempts.
    3. SharePoint is used for case workflow and assignment for both cases and contacts.

The limitations and drawbacks of the current systems are:

* + 1. limited workflow automation,
    2. duplicate data entry,
    3. minor data integrity checks,
    4. no automated call logging or scheduling,
    5. no result reporting engine,
    6. case and contact data being stored in multiple locations,
    7. challenges sharing laboratory data electronically from NEDSS into the other systems, and
    8. metrics on outcomes and contact tracing work production (including timeliness and data integrity) are not easily compiled for reporting purposes.
  1. SYSTEM REQUIREMENTS
     1. The vendor should describe how the System Security Plan of their solution ensures that the solution meets all applicable State and Federal requirements for the data.
     2. DHHS prefers a NIST based Security Plan that meets the guidance provided by CMS for MARS-E systems including a third party assessment of their Security Plan.
  2. EXISTING CONTRACTS AND PRICING
     1. Vendors should indicate if they have:
        1. An existing contract with the Government Services Administration (GSA); or,
        2. An existing contract that was competitively bid by another state or group of states, a group of states and any political subdivision of any other state, or a cooperative purchasing organization on behalf of a group of states.
     2. Vendors should indicate if they are willing to provide their system to the State of Nebraska through one of the following third-party software providers:
        1. SHI International Corp.
        2. Insight Public Sector Inc.
        3. CDW Government Inc.
     3. DHHS is seeking a system from a vendor who has provided this system to another state/organization of approximately the same size and project complexity. Vendor should describe the project and complexity.
     4. Vendors should provide pricing, which should include the following items:
        1. Type of license (seat, user, enterprise, or subscription) and price per license
        2. Any additional fees such as implementation and storage

# Form AVendor Contact Sheet

Request for Information Number 2998

Form A should be completed and submitted with each response to this solicitation document. This is intended to provide the State with information on the vendor’s name and address, and the specific persons who are responsible for preparation of the vendor’s response.

|  |  |
| --- | --- |
| Preparation of Response Contact Information | |
| Vendor Name: |  |
| Vendor Address: |  |
| Contact Person & Title: |  |
| E-mail Address: |  |
| Telephone Number (Office): |  |
| Telephone Number (Cellular): |  |
| Fax Number: |  |

Each vendor shall also designate a specific contact person who will be responsible for responding to the State if any clarifications of the vendor’s response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

|  |  |
| --- | --- |
| Communication with the State Contact Information | |
| Vendor Name: |  |
| Vendor Address: |  |
| Contact Person & Title: |  |
| E-mail Address: |  |
| Telephone Number (Office): |  |
| Telephone Number (Cellular): |  |
| Fax Number: |  |