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| ADDENDUM 1 QUESTIONS and ANSWERS |

Date: <<DATE>>

To: All Bidders

From:  Carrie DeFreece, Procurement Contracts Officer

Department of Health and Human Services

RE: Addendum 1 for Questions and Answers for Request for Proposals Number 114658 O3, EMS and Trauma Information System to be opened December 28, 2023, at 2:00 p.m. Central Time

#### Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Proposal. The questions and answers are to be considered as part of the Request for Proposal. It is the Bidder’s responsibility to check the State Purchasing Bureau website for all addenda or amendments.

This addendum will become part of the proposal and should be acknowledged with the Request for Proposal.

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| **RFP Section Reference** | **RFP Page Number** | **Question** |  | **Answer** |
| I.C. | 2 | The Schedule of Events lists a “Contractor start date” of “February 26, 2024.” Once a vendor is selected / awarded, what are the expectations and desired timelines for the State of NE around onboarding, implementation and go live for both the EMS PCR and trauma registry?  |  | Please refer to Section (V)(E)(1&2): Deliverables and Due Dates for each system with the milestones and due dates outlined in these sections.  |
| EMS Requirements | 30 | What is the annual EMS call volume for CY 2021, 2022 and 2023 YTD?   |  | 2021: 315,2992022: 264,0712023: 225,585 as of December 3, 2023 |
| EMS Requirements | 30 | How many EMS agencies / services use direct entry versus the upload model of ePCRs?  |  | Direct Entry Services: 367Third Party Upload: 53 |
| EMS Requirements | 30 | The RFP provides the number of EMS units, can the state please share the total number of EMS agencies / services be provided?   |  | The current number of EMS 420. In the RFP units is a typo and should be services. It is unknown the true number of EMS units in Nebraska.  |
| EMS Requirements | 40 | Letter D section iii, “Ability to provide a live and nearly live data repository to be used by DHHS for comprehensive reporting directly from the raw data”, is the State of NE also requesting EMS repository services and solutions in addition to the EMS ePCR systems?   |  | The State of Nebraska is requesting that it have full access to the raw data to allow for near real time reporting using tools such as Tableau or other packages. Currently the State of Nebraska has a repository that is updated in near real time to fulfill this need. If bidders have another way of accomplishing this, then the repository would not be needed.  |
| EMS Requirements | 40 | Letter E and hospital data interface section, is the State of NE planning to financially support a hospital data interface solution statewide for each of the 52 trauma centers? Or, is the State of NE requiring the vendor to have this functionality available, and hospitals will directly purchase the hospital data interface solution with the awarded EMS ePCR vendor?   |  | Currently the State of Nebraska is providing a solution for all hospitals to access EMS patient care reports. This would be for all patients not specifically limited to trauma. The plan is for the State of Nebraska to maintain this functionality for the hospitals.  |
| EMS Requirement & EMS Cost Proposal | 36 | Section F, can the state please elaborate on the future vision and desired timelines / parameters for ePCR solutions and community paramedicine and clinical care paramedic? These services are not included in the EMS cost proposal. Note – the optional services with the trauma registry (cardiac, STEMI, stroke) are included in the trauma cost proposal, confirming these costs are not being requested in the EMS costs.  |  | The community paramedicine and critical care paramedic are included in the EMS Cost Proposal. Please refer to Part IV on page 2. |
| Trauma Registry | 36 | How many facilities currently use the direct entry model?   |  | There are currently 47 direct entry facilities within the state.  |
| Trauma Registry | 36 | Section 2, please elaborate on the distinction between the 52 trauma centers and the potential use for up to 80 medical facilities?   |  | Nebraska currently has 52 designated trauma facilities; however, there are a total of 80 facilities in the state. The remaining 28 facilities may seek designation and be required to use the trauma registry at any time.  |
| Trauma Registry | 40 | Section D, 1A - Data Migration, how many records currently exist in the State of NE trauma registry repository / central site? How many records is the State of NE planning to migrate to the new trauma registry system?   |  | The current trauma registry has approximately 107,500 records. Currently, the State of Nebraska is planning to migrate all records. This will be further discussed during the kickoff and subsequent meetings with the selected vendor.  |
| Trauma Registry | 36 | Does the State of NE currently compensate or financially support trauma centers to have trauma registry services – is it all trauma centers, select trauma centers based on designation level, etc.?   |  | The State of Nebraska does not provide compensation or financially support the trauma centers for trauma registry services. The State of Nebraska offers the state trauma registry at no charge for designated centers or for those seeking designation.  |
| Trauma Registry | 36 | Does the State of NE intend to compensate or financially support trauma centers with trauma registry services in the future or associated with this contract period? And would this be for all trauma centers or select trauma centers based on designation level, etc.?  |  | The State of Nebraska currently has no intention to provide compensation or financially support the trauma centers for trauma registry services. The State of Nebraska offers the state trauma registry at no charge for designated centers or for those seeking designation. |
| Trauma Registry | 41 | Can the State of NE please elaborate on section F and the future vision and desired timelines / parameters surrounding data collection with cardiac arrest, STEMI, and stroke?   |  | Currently, the State of Nebraska only has statutory requirements for trauma registry and stroke registries. The stroke registry is currently not part of this bid; however, the State is future proofing this bid with having the future ability to utilize stroke, burn, STEMI, or cardiac arrest functions.  |
| Trauma Registry Cost Proposal | 3 | With respect to the trauma cost proposal Part IV Optional Services, is there an interest to launch both the trauma registry solution along with one or more of the additional functionalities in year one (cardiac, STEMI, stroke)?   |  | The State right now intends to only launch the trauma registry in year one. The additional functionalities may or may not be launched through the life of the contract.  |
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| Section I.A | 1 | Are there any issues within your current RMS that you are looking to overcome? |  | The State of Nebraska currently has no significant issues with the current RMS.  |
| Section I.A | 1 | Are you moving away from your current vendor, and why? |  | The State of Nebraska is required to do competitive bid processes by state law. This bid process will determine, based on competitive bids, if there is a change in vendors.  |
| Section V System B A.1 | 36 | What is the Number of traumas annually? |  | The number of traumas annually is an average of 14,700. |
| Section V System B A.1 | 36 | What is the Number of trauma centers and their trauma levels |  | Level I (Comprehensive) 2 Pediatric Level II (Advanced) 1 Level II (Advanced) 3 Level III (General) 7 Level IV (Basic) 40 Burn Center 0 Total Designated 53NOTE: the RFP reflects 52 at the time of RFP release. There has been an addition of 1 trauma center since RFP release.  |
| Section V System B A.1 | 36 | Do you have a direct entry trauma centers? What is the number and their levels? |  | There are approximately 47 direct entry trauma centers. They are Level III (General) 7 and Level IV (Basic) 40. |
| Section V System B A.1 | 36 | Do you require AIS15 codes for your trauma facilities? |  | Nebraska has not transitioned to AIS15 codes, but the any software solutions should be capable of utilizing AIS15 as Nebraska prepares to transition to AIS15.  |
| Section V System B A.1 | 36 | What is the volume of burns placed in your registry annually? |  | Currently 0 as there are no designated burn centers in Nebraska. The State of Nebraska knows there is one facility seeking burn designation.  |
|  |  | Can companies from Outside USA can apply for this? (like, from India or Canada) |  | All bidders must be authorized to transact business in the State of Nebraska and comply with all Nebraska Secretary of State Registration requirements.  See RFP Section I. E. |
|  |  | Do we need to come over there for meetings? |  | It is not necessary to meet in person.  |
|  |  | Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada) |  | No.  The contractor(s) shall comply with the Nebraska Department of Health and Human Services *Information Technology (IT) Security Policy and Standards, Version: 2.0*.  See especially Section 2.8.11. |
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