ADDENDUM TWO QUESTIONS and ANSWERS

Date: September 25, 2019

To: All Respondents

From: Keith Roland

Department of Health and Human Services

RE: Addendum for Request for Information Number 1511, due October 2, 2019

Questions and Answers

Following are the questions submitted and answers provided for the above mentioned Request for Information. The questions and answers are to be considered as part of the Request for Information. It is the Respondent's responsibility to check the DHHS website for all addenda or amendments.

Question Number	RFA Section Reference	RFA Page Number	Question	DHHS Response
1			What proportion of cases are submitted electronically per year?	Approximately 95% of cases from hospital sources and 50% of cases from non-hospital sources are submitted electronically annually.
2			Does NCR have a goal in mind for the proportion of cases that they want submitted electronically per year? If so, what is the target date for achieving this goal?	The Nebraska Cancer Registry (NCR) does have a short-term goal of receiving at least 90% of cases from pathology laboratories electronically by 2020. A long-term goal of our registry is to receive 100% of cases from hospital sources and physicians' offices. The target date will depend on NCR's ongoing project of electronic pathology reporting,

				future implementation of electronic reporting of physicians' offices and small facilities, and collaboration with CDC and potential vendors for technical support.
3			Is Nebraska collecting MU cases, if so, what percentage of electronic cases are involved with MU reporting?	No. The State of Nebraska cancer registry is not MU certified at this time. But we may implement MU data exchange in the future.
4			Who is the current incumbent?	Nebraska Methodist Health System is the current incumbent.
5			Are bidders required to submit a response to the RFI to be eligible to receive and respond to the RFP?	No, bidders do not have to respond to the RFI in order to be eligible to respond to a potential future RFP.
6	F. Anticipated Required Services	12	Staffing requirements outline qualified staff to include Director of Operations, Project Director, Quality Control Supervisor, Certified Tumor Registrars, Trainer and Database Manager. Are each of these positions a 1.0 full time employee (FTE), equating to a minimum of 6.0 FTEs to fulfill the service requirements for this contract? Can the job requirements be shared by individuals or other departments?	The job requirements can be shared by individuals. For example, the Director of Operations needs to be a Certified Tumor Registrar and can also be the Trainer Manager.
7	III C. 2	4	Who is the current service provider / contractor referenced in this section?	Please see response to question #4.

8	III C. 7	6	Are the any plans to provide assistance and/or incentives to reporters not submitting electronically today?	The NCR with the support of CDC will continue providing assistance to the reporters who haven't submitted electronically. In the future, we may become MU certified for cancer registry data submission, which will provide incentives to ambulatory providers and eligible professionals who report cancer data to us electronically.
9	III D. 1g	6	Are there 10,000 cases submitted each year AND processed to DHHS? If not, what is the typical backlog waiting to be processed? Is it a pain point this RFI is intending to address?	More than 10,000 cases are submitted to the NCR and processed to DHHS each year. Electronic cases (NAACCR format) are imported immediately and create no backlog. 65% to 70% of cases are reported electronically. Paper reports are 12-18 months behind, including pathology reports and reports from physicians' offices because only partial information is submitted and must wait for full information before processing. The major delay in paper records is pathology reportsthis change to electronic is currently underway to deal with this issue.
				No, this RFI is not intending to deal with backlog issues.
10	III F. System Maintenance - 3	10	Approximately how many legacy data records need to be migrated and converted?	NCR data from 1987 until the current year needs to be migrated and converted to the latest version based on the North American Association of Central Cancer Registry (NAACCR). The total number of the legacy records before the year of diagnosis at 2018 is approximately 322,000 cases.

sometimes or often?

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