



CRISP Responses to Written Questions Regarding RFP: Improving Nursing Facility Quality Through Data Integration

Question Topics

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A. RFP Process

1. *When and where will the answers to vendor questions be posted?*
 - **CRISP will publish answers to submitted written questions and those asked during the bidders call on the CRISP website on or before Tuesday, May 24. The answers will also be emailed directly to participants of the bidder’s call.**
2. *In our response, should we provide both a regular response and a "redacted" response for anything we deem confidential?*
 - **No, CRISP is not intending to make the responses public.**
3. *Do you have a desired target timeframe for which you would like this project fully completed? How many years are you willing to commit to contract for support services to maintain this project?*
 - **Funds for this project will be used during this fiscal year 2023 to achieve substantial completeness. CRISP will work with the funders to ensure sustained maintenance and continuation of work beyond fiscal year 2023.**
4. *Will CRISP give a higher ranking/score in evaluation of the vendor’s technical proposal if it proposes ‘other uses’ that align with the objectives of the project? Or, will such “other uses” not be factors in the ranking/score of the technical proposal?*
 - **Yes, vendors may propose additional use cases. The Review Committee will take them into consideration when scoring responses.**
5. *Have you determined a priority for each of the four Use-Cases described in the RFP?*
 - **No, CRISP has not prioritized the use cases, believing all are important. Vendors should propose implementation plans to achieve objectives quickly and efficiently. CRISP understands this project is ambitious. Using their knowledge of SNF health information systems and associated data, vendors should propose a realistic strategy to implement use cases in the near-term and those that may require more time. Further, CRISP recognizes that there may likely need to be a phased approach for integration and implementing the use cases. Please provide a plan for roll out and implementation. (Refer to page 6 of RFP)**
6. *Related to Use Case #4, would you like the successful vendor to include a platform to be used by the Medicaid Office to be able to ascertain changes in SNF admissions, SNF discharges, and SNF level of care of changes in a real-time fashion?*



- CRISP is open to vendor suggestions. A vendor platform for external stakeholders is not required to be successful.
7. *Does the solution need to support any Regulatory or other Reporting Requirements from CMS or State Agencies?*
- No, but CRISP is looking to leverage data for as many use cases as possible.

B. General Background

1. *We are not familiar with all the tools that CRISP has implemented. Some of these may be viable parts of this new solution. Will you be able to share the current state of CRISP solutions with us?*
- CRISP offers many different services enabled by broad technical infrastructure. General information on CRISP services and policies is available on our website. If there are specific technical details that may alter the RFP response, please submit those detailed questions and we will be glad to answer them, within reason.
2. *What is CRISP's relationship with SNFs today? Are there any requirements for SNFs to submit data to CRISP? If so, what are the data elements and frequency of these requirements? In light of House Bill 1022 passed in 2021, has CRISP, in partnership with the Maryland Healthcare Commission, promulgated any regulations for nursing homes to submit data through CRISP? Along the same lines, is there any intention of CRISP and the Maryland Healthcare Commission to make such requirements on the nursing homes? Does House Bill 1022 and/or any other data submission requirements for SNFs have a transitive effect on the successful vendor to acquire data? CRISP relationship with SNF is outlined in RFP (example).*
- CRISP has relationships with SNFs as described on pages 3-4 of the RFP. Currently, there are no formal requirements for SNFs to submit data to CRISP. Regarding HB1022, the Secretary of Health and Maryland Health Care Commission have not yet exercised that authority or promulgated regulations.
3. *Related to Use Case #3: In footnote 1, there is a standard transfer form reference, can this be provided? In footnote 1, there is reference to a variety of technical challenges. Can you provide further explanations and details as to what these challenges were, as well as areas that were successful in this effort?*
- CRISP worked with several hospitals and SNFs to develop a tool for electronic submission of standard data elements to support patient transfers between SNFs and acute hospitals. This tool was based on a form developed by the industry and included data elements such as patient demographics, clinical notes, facility capabilities, and an important document checklist. This electronic tool was not adopted by SNFs because it required manual entry and was only available through CRISP's secure portal outside the typical workflow for SNF staff. Given these challenges and the onset of COVID-19, discussion of this form and electronic tool has been dormant for several years.
4. *Are there any specific challenges within the existing CRISP system which you would want to address during the new SNF Solution Implementation?*
- No, there are no identified specific challenges within the CRISP system.



C. Technical

1. *How many of the 227 SNFs in Maryland does CRISP receive ADT data from today?*
 - **All the SNFs have a participation agreement with CRISP; however, few are submitting data to CRISP via ADTs or CCDs.**
2. *How many of the 227 SNFs in Maryland does CRISP receive CCD data from today?*
 - **All the SNFs have a participation agreement with CRISP; however, few are submitting data to CRISP via ADTs or CCDs.**
3. *Will you provide more details around the data and frequency of data sets that you currently receive from the SNFs throughout the State of Maryland?*
 - **All the SNFs have a participation agreement with CRISP; however, few are submitting data to CRISP via ADTs or CCDs. CRISP is willing to replace current integrations with a more streamlined and logical solution.**
4. *Is it CRISP's intention for the successful vendor to be connected to CRISP to provide ADT and CCD data to CRISP or is the successful vendor expected to provide a platform to be used by both CRISP and various CRISP participants on the care team?*
 - **CRISP will consider direct integration to CRISP or a platform so long as key data elements can support the HIE uses described in the RFP.**
5. *Is it required for the successful vendor to provide CRISP with ADT and CCD data from SNFs only or is the successful vendor expected to provide ADT and CCD data from acute hospitals and other post-acute providers?*
 - **CRISP already has extensive connectivity with hospitals. This RFP is only intending to integrate SNF data.**
6. *Do you currently have an inventory of the EMR vendor, version and release level for each of the 227 SNFs? We'll need to know which EMR systems are hosted in a SaaS model (No option to give us direct database access) and which EMR systems may be available to us directly from the SNF or from the EMR Vendor. We'll need to know the database management system and integration capabilities for each SNF's EMR system.*
 - **No, CRISP does not have a full SNF EHR vendor inventory. CRISP believes the Maryland market is similar to other states, with Point Click Care and Matrix Care being the largest vendors. CRISP realizes the level of effort will vary based on EHR type and is looking for experienced vendors to propose a realistic timeline and cost estimate to connect all SNFs in the state.**
7. *How is data currently stored in CRISP? Is the new solution expected to store data in the existing database or are you open to us providing a new data warehouse for the SNF data acquired? Do you prefer to use your existing relationship with Microsoft Azure, if possible, for this new solution?*
 - **CRISP infrastructure leverages best of breed technologies and applications spread across multiple data centers (primarily Microsoft Azure), systems, databases, and data formats (Flat- file, XML, JSON, relational databases, etc). CRISP is looking for vendors to propose an effective solution.**
8. *Is there any need to build a Data warehouse to facilitate the BI/Reporting needs?*
 - **CRISP is looking for vendors to propose an effective solution.**
9. *Do you have a preference for any specific tools currently used by CRISP for Analytics / Reporting?*



- **CRISP is looking for vendors to propose an effective solution.**
- 10. *Can you please clarify the Data Acquisition statement in the RFP that “CRISP prefers to receive standard data formats such as ADTs and CCDAs and that data resides in CRISP’s environment. Vendor should describe the technical expectations for CRISP under the vendors proposed strategy. CRISP reserves the right to directly integrate with a SNF vendor and provide that data to the awardee.”?*
 - **CRISP intends to leverage some data collected through this RFP to support HIE use cases beyond the SNF-specific use cases. For example, CRISP shares Care Team Relationships with providers through HIE tools and often leverages ADTs to do so. Data needed to fulfill the SNF RFP use cases does not need to be stored within CRISP, and CRISP is open to suggestions for hosting and integrations.**

D. Pricing

1. *Is there a budget allocated for this project in whole and/or for the component parts? Can you share the budget allocation? Is the State of Maryland helping CRISP fund this project?*
 - **CRISP and its State partners have funding for this project as part of a larger CRISP project budget. CRISP will review budgets in submissions for reasonableness.**
2. *Is there a pricing proposal template to be used by all submissions?*
 - **There is no pricing proposal template so that we may consider different vendor pricing approaches. Vendors are encouraged to provide sufficient information for CRISP to understand the cost of the proposal. For example, a vendor may separate personnel expenses from licensing fees, software, or hardware. Further, details should be provided so CRISP can understand the start-up cost as well as ongoing maintenance. Pricing will be considered in terms of reasonableness and value, and evaluated separately from technical approaches. CRISP will ask questions regarding pricing details as needed.**
3. *Knowing you will likely receive several responses; do you have a specific format for the pricing proposal that you'd like us to attempt to follow (if possible)?*
 - **There is no pricing proposal template so that we may consider different vendor pricing approaches. Vendors are encouraged to provide sufficient information for CRISP to understand the cost of the proposal. For example, a vendor may separate personnel expenses from licensing fees, software, or hardware. Further, details should be provided so CRISP can understand the start-up cost as well as ongoing maintenance. Pricing will be considered in terms of reasonableness and value, and evaluated separately from technical approaches. CRISP will ask questions regarding pricing details as needed.**