



Solicitation Addendum

Solicitation Number: 30-180397
Solicitation Description: Independent Verification and Validation Services
Solicitation Opening Date and Time: September 20, 2018 at 2:00 PM ET
Addendum Number: 5
Addendum Date: September 5, 2018
Purpose of Addendum: Opening Date Extended & Agency Response to Vendor Questions
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1. RETURN ONE PROPERLY EXECUTED COPY OF THIS ADDENDUM #5 WITH PROPOSAL RESPONSE. FAILURE TO SIGN AND RETURN THIS ADDENDUM #5 MAY RESULT IN THE REJECTION OF OFFEROR'S PROPOSAL.
2. THE SOLICITATION OPENING DATE HAS BEEN EXTENDED TO SEPTEMBER 20, 2018 AT 2:00 PM ET.
3. ADDENDUM #6, AS REFENCED IN THIS ADDENDUM #5, WILL BE POSTED ON IPS BY 5:00 PM ET ON SEPTEMBER 5, 2018
4. FOLLOWING ARE QUESTIONS RECEIVED FOR THE SOLICITATION AND THE STATE'S RESPONSE TO THE QUESTIONS.

Q #	DOCUMENT SECTION	VENDOR QUESTION	RESPONSE
1	Attachment A IV&V Services Requirements (Statement of Work) Page 23	The Document mentions that the IV&V Vendor will be conducting Milestone Reviews for each MES module. What necessary modules has the Department identified?	<p>The IV&V contractor will be responsible for ensuring all MECT/MECL requirements are met.</p> <p>The modules currently consist of the following and are subject to change:</p> <ul style="list-style-type: none"> • Financial Management • Encounters Management • Operations Management • Utilization Management (UM) • Provider Management • Data Analytics/Program Integrity • Enterprise Data Warehouse Platform • Medicaid Decision Support System (DSS)/Data Warehouse (DW)

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2	Attachment A IV&V Services Requirements (Statement of Work) Page 23	<p>Do the necessary modules include any of the following? Please indicate what modules will be procured together and when.</p> <ul style="list-style-type: none"> • Eligibility and Enrollment • Financial Management • Encounters Management • Operations Management • Incentive Management • Utilization Management (UM) • Health Plan Management • Provider Management • Data Analytics/Program Integrity • Enterprise Data Warehouse Platform • Medicaid Decision Support System (DSS)/Data Warehouse (DW) • Health Information Exchange (HIE) • Home and Community Based Services (HCBS) Waiver Management • Pharmacy Benefits Manager • State Integration Hub (SIH) 	<p>See response to Question 1.</p> <p>The solicitation and timeline for issuance have not been finalized.</p>
3	Attachment A IV&V Services Requirements (Statement of Work) Page 28	The Document mentions that the IV&V contractor will be conducting management oversight over Project Management and Quality Assurance. Will the PM and QA organizations be state employees or 3rd party contractors?	The Project Management/QA Team will consist of both State PMO and third-party contractor(s).
4	Attachment A IV&V Services Requirements (Statement of Work) Page 30	If the PM and QA are going to be 3rd party contractors, will the Department release a competitive solicitation to acquire or will the contractors be secured through a state contract? When is this anticipated to occur?	Accenture is the State's PM vendor for this project.

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5	Attachment A IV&V Services Requirements (Statement of Work) Page 33	The Document mentions that the IV&V contractor will be conducting a System Integration Test, will a separate SI be hired for the MES project? If so, will that be done through a competitive bidding process?	The IV&V contractor will not be responsible for conducting a System Integration Test. The IV&V contractor will evaluate and verify all implementation efforts to ensure that the Agency has met all applicable MECL, MITA and CMS guidelines. The State is planning to procure a System Integrator vendor through competitive bidding.
6	N/A	Does the Department anticipate hiring any of the following contractors for the MES project? If so, when and how will the Department procure? <ul style="list-style-type: none"> • Project Management Organization • Quality Assurance • Third Party Liability • Systems Integrator 	See responses to Questions 4 and 5.
7	Page 6 part A	The MMIS and R&A incumbent Vendors are listed. Would it be possible for you to confirm the incumbent IV&V Vendor is Maximus per RFP# 30DHHS139409?	MAXIMUS provides IV&V services to the Department, but there is no incumbent IV&V vendor for MES or the Division of Health Benefits.
8	n/a	What is the anticipated budget for this project?	Offerors should assess the scope of work and contractual requirements and provide their cost proposal responses accordingly.
9	Page 23 section 1	Will the IV&V contractor be responsible for developing the module framework? Does the state have any current plans for their MMIS modules?	No. The IV&V contractor will be required to review and advise the Department to ensure the State is in compliance with CMS requirements. See response to Questions 1 and 2.
10	Page 9, Item 3, Vendor Responsibility	Are we to assume that this paragraph refers to the Vendor who will provide the solution, not the IV&V Vendor?	No. Section II.C.3. applies to offerors submitting proposals in response to this RFP. See Addendum #6 for revisions to this section.

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11	Page 23, Introduction, 3 rd Paragraph	You state that all three Milestone Reviews will be performed for <u>each MES module</u> . On page 6, A. Background, item number 3, you indicate that you will be required to develop and/or procure a Medicaid Enterprise System to replace the current system. You could receive wildly varied pricing for the IV&V project depending on how many modules are utilized when the IV&V Vendors calculate their bidding. If all three Milestone Reviews will be performed for each MES module, how many modules do you anticipate will suffice for bidding purposes?	See response to Question 1. The State will organize modules into cohorts or groups for each milestone review. It is anticipated that multiple modules will be presented in parallel for each milestone review rather than individual modules presented serially and separately.
12	Page 20, Item c. 2.	Will the IV&V Vendor be expected to utilize its own tools such as MS-Project or will NC DHHS have specific tools that are to be used?	The IV&V contractor is required to utilize State tools where applicable.
13	Page 39, note after chart	Is the IV&V Vendor to perform a separate Implementation Oversight Review each month in addition to the detailed tasks identified in the chart under the heading Implementation Oversight?	Yes. During each project implementation and rollout.
14	N/A – General Question	Has a project plan/schedule been established and approved for the project yet? If so can the State provide a copy of the plan/schedule?	The project plan and schedule are in development.
15	VI.7.e, page 21	The response organization section of the RFP includes references. Please clarify your specific expectations for references. For example, are you expecting contact information or letters of references. How many references?	See Addendum #6, <i>Section VI. Proposal Content and Organization, 7. RFP Response Organization and Required Documents</i> , for instructions regarding references.
16	Attachment C, p. 40	Could you please provide an editable version of the cost proposal?	Yes. See Addendum #6, <i>First Revised Attachment C: Cost Proposal</i> , for instructions to request an excel file.

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17	VI.7.n, p. 21 and o and II.D.4.j, p. 12	The RFP asks for information about availability of resources and staffing and the location of staff, but not for information about a specific staffing model or project org chart. The training and experience of staff members is included as an evaluation criterion in section II.4.j. Are you expecting a staffing model to be included in with our response to the staffing Questions in VI.7.n and o? If not, where would you like to see this information included?	A staffing model is an acceptable response to Section VI.7.n and o.
18	VI.5, p. 21	VI.5 states: The offers should contain the entire solicitation and be organized in the exact order in which the requirements and/or desirable performance criteria are presented in the RFP. Are you looking for a hard copy of the RFP appended to our printed proposal or is acceptable to include attestation in our proposal that we accept the terms of the RFP including contract language and amendments released.	The entire body of the RFP and signed receipt pages of any addenda issued for this RFP must be provided with Offeror's response. <i>See Addendum #6, Section VI. Proposal Content and Organization, 7. RFP Response Organization and Required Documents,</i>
19	VI.5, p. 21	VI.5 in the RFP states: "Offer Format: The offers should contain the entire solicitation and be organized in the exact order in which the requirements and/or desirable performance criteria are presented in the RFP." Several sections of the RFP outside of the Proposal Content and Organization section contain items that call for a response and are related to the content in this section. Is it permissible to reference multiple sections of the RFP within response items? For example, RFP § III.14 requires that we acknowledge having read and understand the attachments, etc., but there is no specific call for this information in section VI.7. Is it acceptable to include this acknowledgement in the Letter of Transmittal?	<i>See Addendum #6, Section VI. Proposal Content and Organization, 7. RFP Response Organization and Required Documents,</i>

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20	V. 10. Meetings Page 17 of 53	Section V.10 specifies a Monthly meeting between the Vendor staff and Agency staff where at least one of the Vendor’s staff must attend in person. Can NC DHHS clarify the Agency’s expectations for additional on-site presence, and explain if facility space is available for the Vendor’s staff when they are on-site?	See Addendum #6, Revised Attachment D: Information Technology Terms and Conditions, Section 3: Terms and Conditions Applicable to Personnel and Personal Services, Section 3) PERSONNEL a) and Section 4) PERSONAL SERVICES a).
21	Attachment A, Introduction Page 23 of 53	Does the Agency have an estimated number of modules that will result from the planned MES procurements?	See response to Question 1.
22	Attachment A, Section 3 Page 24 of 53	Can NC DHHS further clarify the anticipated IV&V testing role? We note that CMS describes the role of the IV&V Contractor on page 13 of the Medicaid Enterprise Certification Lifecycle (MECL) v2.2 and indicates “The IV&V contractor must not be the contractor performing software testing.”	The IV&V contractor will not be responsible for testing. The IV&V contractor will evaluate and verify all implementation efforts to ensure that the Agency has met all applicable MECL, MITA and CMS guidelines. See Addendum #6 for changes to <i>Attachment A: IV&V Services Requirement (Statement of Work), Section 3. Verification Services, a.</i>
23	IV. Cost Proposal 1. Offer Costs Page 14 of 53	Attachment C does not include a list of costs to be charged to the State, only deliverables cost. Are there costs other than the deliverable costs listed in Attachment C that should be included and described?	No, offeror’s pricing should only reflect the unit costs and hourly rate as included in Attachment C: Cost Proposal. Offerors may propose an alternate pricing approach as provided in Section IV. Cost Proposal. See Addendum #6 for changes to Section IV. Cost Proposal and Attachment C: Cost Proposal.

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24	V. Other Requirements and Special Terms 15. Unanticipated Tasks, Section b.	It is our experience that “work authorizations” require several sets of skills to complete the work each of which has an hourly rate. Attachment C Cost Table 3 asks for a “Fixed Blended Hourly Rate for Ad Hoc Tasks and Reports”. Is the State willing to accept a rate schedule by major labor category? In all likelihood, the average hourly rate on “work authorization” priced from a rate schedule by labor category will be lower than the same “work authorization” priced using a Blended Hourly Rate because, in building the Blended Hourly Rate, all Vendor’s will protect themselves from a “work authorization” that requires more senior staff than the anticipated staffing mix for the base scope of IV&V work.	No. The State will not accept a rate schedule in response to Attachment C: Cost Proposal; a blended rate should be provided as requested. Offerors may propose an alternate pricing approach, including a rate schedule, as provided in Section IV. Cost Proposal. See Addendum #6 for changes to Section IV. Cost Proposal and Attachment C: Cost Proposal.
25	Attachment A 5. Audit Services, Section d.	Nowhere in the four deliverable categories in Attachment C is there mention of “Audit Reports”. Should there be an additional “Audit Report” category added? If not, which existing category should “Audit Reports” be included in?	Audit reports will be performed as part of Management Oversight.
26	Attachment A. 11. CPA Tasks Section a.10 Procurement Documents	In most of the other sections in Management Oversight the action specified is to “Evaluate” or to “Verify” that some activity has taken place properly. However, in Section 10 the action specified is to “Participate” in some procurement activity. Doesn’t this jeopardize the independence of the IV&V Vendor based on CMS guidelines?	Participation in the procurement process is limited to providing guidance to ensure that the State aligns with the MECL and MECT processes.
27	Attachment C Cost Proposal	It is our understanding from these pricing forms and their instructions that we are to provide prices for each line item and that these prices will be the basis for monthly invoices for up to seven years. We also understand that at the beginning of each month we will invoice for the deliverables presented during the previous month. Is our understanding of the invoicing process correct and, if so, please describe the deliverable approval process?	Yes, the description of the invoicing process is correct, subject to any changes the schedule of periodic reviews approved as provided in the RFP. Attachment D, Section 1. 9) governs Acceptance Criteria for performance.

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28	Attachment D Section 10 Payment Terms	This section describes invoices as including timesheet for Vendor personnel. Since this contract will be fixed price per deliverable, we assume that timesheets will not be required. Is this assumption correct?	The assumption is incorrect . Timesheets will be required for all services performed. This includes all deliverables on Attachment C and all Ad Hoc services.
29	Attachment A, Section 3, Verification Services (Page 24 of 53)	Page 24 of the RFP outlines Verification Services to include independent integration testing services for all systems. Please clarify if it is DHHS' intent to have the IV&V Vendor execute independent testing or to verify the testing efforts of other project stakeholders?	See response to Question 22.
30	VI. Proposal Content and Organization, Section 3, Proposal Content, Item O (Page 21 of 53) and Attachment D, Section 3, Personnel, Item B (Page 52 of 53)	RFP page 21 3(o) asks where the Vendor's staff would be located and what facilities and resources would be available to them through the life of the project; however, RFP page 52 b) requires the Vendor to perform duties on the premises of the State during the state's regular work days. Please clarify expectations for staff onsite work location.	See response to Question 20.
31	Attachment C: Cost Proposal (Page 42 of 53)	The Cost Table (RFP page 42) does not contain the MECL/MECT related deliverables, the MES IV&V Progress Reports and Certification Checklists. Please clarify where pricing for these deliverables should be reflected in the Cost Proposal.	Pricing should be incorporated into the IV&V Management Oversight areas.
32	Generic	Is the Agency able to share either the Advance Planning Document or self-assessment (SSA) document?	No. The APD and MITA Assessment are not available.
33	Generic	How many modules are required to be replaced by the agency as part of the MES project.	See response to Question 1.
34	General	Please confirm, if the state will be providing the office space/infrastructure for the Onsite personnel and if so up to how many resources will be accommodated.	See response to Question 20.
35	Generic	Are there any key personnel / other roles expected specifically for IV&V Vendor provide?	The State expects the IV&V offerors to provide their proposed resource plan.

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36	Attachment A - Section 3 Verification Services	Does the state expect the IV&V Vendor to perform the following types of test execution or only review and assess the test artifacts? a. Independent integration testing services of all systems b. Implementation of Automated testing tools c. Development and execution of various test artifacts (test scenarios, test runs, test cases & test scripts)	See response to Question 22.
37	Attachment A - Section 4 Validation Services	Would the state provide clarification Under Point b. # 2. Development of validation strategy and #3 support for the development and execution of test artifacts, whether the IV&V Vendor is expected to perform testing activities/tasks other than reviewing test artifacts?	See response to Question 22.
38	Attachment A - 3. Verification Services: Page 24 Integration Testing Scope	For Independent integration testing services, please let us know the integration components Ex: List of systems within state ownership, interfaces with outside parties, any portals, downstream feeds etc.	See response to Question 22.
39	Attachment A - 3. Verification Services: Page 24 Integration Testing Scope	As the RFP scope is for IV&V, what % of integration testing has to be conducted. The requirement states "a. Independent integration testing services of all systems;" which is generally already performed by the module testing Vendor(s), and only small fraction of those tests to be repeated during this phase. However, if IV&V contractor has to cover complete integration testing then scope details are required. If only critical flows to be tested, please provide details on critical flows for each module to be implemented.	See response to Question 22.

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40	Attachment A 3. Verification Services: Page 24	As implementation of automation tools to be taken care by MES implementation Vendor (DDI)/module Vendors, please confirm if this requirement refers to defining standards and procedures for automation and its tools. As this pertains to IV&V, is there expectation for test automation at this stage or it will be done by SI/module testing Vendor.	See response to Question 22.
41	Attachment A 3. Verification Services: Page 24	Does the state expect the module Vendor(s) to provide access to the IV&V Vendor for reuse and reutilization during the Verification Services? Please detail the existing Automation tools used, if any.	Yes. The State has not selected an automation tool.
42	Attachment A 3. Verification Services: Page 24	Please detail the type of testing services (Integration testing, performance testing, security testing, accessibility testing etc.) to be performed by the offeror for this engagement. And if so, please provide scope details around this requirement Ex: accessibility standards, performance standards, security standards etc. as well as relevant details for no. of transactions, screens, users count etc.	See response to Question 22.
43	Attachment A 4. Verification Services: Page 24	Will the state expect the offeror to provide all resources for Validation Services or will the State provide participants /resources for execution of Validation Services?	The State expects the IV&V to propose all resources needed to meet the requirement of the RFP. Offerors should note where State resources may be required.
44	Attachment A 11. CPA Tasks b. Implementation Oversight 5. System and Acceptance Testing Page 34	We assume the DDI contractor will be responsible for creation of test scripts and review of test results will be offeror's responsibility. Please confirm	Confirmed. See response to Question 22.
45	Attachment A 11. CPA Tasks b. Implementation Oversight 5. System and Acceptance Testing Page 34	We assume, User Acceptance testing will be handled by DDI contractor, please confirm.	Confirmed.

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46	General	Would the state provide the list of current Medicaid modules that are implemented in NC?	The State operates a monolithic system.
47	General	Has the state performed an analysis of what Medicaid modules are impacted and to what degree by the change to managed care? Can the state share this analysis?	See response to Question 1.
48	General	Has the state performed a fit/gap analysis of the impacts of the change to managed care to the Medicaid system modules?	Yes.
49	General	Can the state share the updated Planning Advanced Planning Document (PAPD) for the MES to recognize a multi-phased effort?	No.
50	General	Has the state developed the technical and data architecture, including changes to NCTracks required to support the transition to managed care? Can this be shared with the proposers?	No to both questions.
51	General	Is there an incumbent IV&V Service Provider doing this work for NC DHHS?	See response to Question 7.
52	General	Can the state share the methods for collecting, documenting and sharing processes that are referenced in the RFP?	The State uses SharePoint.
53	General	The RFP mentions processes for the system requirements, auditing, risk management, and change management. Are the processes all documented and maintained by QA?	Yes.
54	General	Is off site access to the project's shared library allowed?	Yes. The IV&V contractor will have access to the State's designated SharePoint site.
55	General	We respectfully request an extension of the proposal due date, since the upcoming Labor Day holiday (Monday, September 3) and extended weekend falls only a few days before the proposal due date (Friday, September 7).	The solicitation opening date has been extended as provided in this Addendum #5. Also, see Addendum #6, <i>Section II. Bidding Information A. Revised Procurement Schedule.</i>

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56	1.a.3. If the application is approved, NC DHHS will be required to develop and/or procure a Medicaid Enterprise System (MES) designed for managed care to replace its Medicaid Management Information System (MMIS) and its Reporting & Analytics (R&A) system, which were designed to support a fee-for-service system.	Does the state intend an entire replacement of their MES – as suggested here – or intend to make modifications to the existing modules?	The State will make modifications to the existing MMIS system to meet the State’s Managed Care launch. The long-term objective is to replace the existing MMIS system. The State expects the IV&V contractor to support the transition and replacement activities.
57	Page 17. “10. At least one of Vendor’s on-site staff must attend each meeting in person; Vendor’s off-site staff may attend via teleconference at Vendor’s expense.”	Other than this mention, what are the state’s expectation regarding onsite support?	See response to Question 20.
58	Page 36. “c. The State may use any, all, or none of the 5,000 person-hours each Contract Year and shall be billed only for the hours used.	Is it correct to assume that these 5,000 hours are in addition to the core hours?	The RFP does not reference core hours; however, the Ad Hoc assessments and related annual pool of person-hours are in addition to other IV&V services required in the RFP.
59	Page 36. “c. The State may use any, all, or none of the 5,000 person-hours each Contract Year and shall be billed only for the hours used.	Does the state expect Vendors to identify staff and provide resumes to address these 5,000 hours?	No, not in response to the RFP. The State will determine how the 5,000 hours will be used during the Contract period and provide a CSR to the Contractor for response. The Contractor will prepare a draft Ad Hoc Management Plan that includes qualified personnel.
60	Page 37. “l. No more than 5,000 person-hours of Ad Hoc work can be authorized by CSR during any one Contract Year. After 5,000 person-hours have been authorized by CSR during a Contract Year, additional Ad Hoc work during the same Contract Year can be authorized only by Contract amendment.”	Is it the state’s expectation that staff to address these CSRs are already identified and onboarded to the IV&V team OR does the state expect the Vendors to offer up appropriate resumes tailored to the CSR at the time that it is released?	The State will determine the scope of work for the Ad Hoc hours, as needed. See response to Question 59.
61	Page 40. Cost Table 1	Is it a correct assumption that the values in “Extended Costs” represents the cost for the deliverable over the course of 1 year of the contract and that this cost would be the same for all possible seven (7) years of the contract?	Yes.

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62	Page 52, “The Vendor shall be solely responsible for acquiring any equipment, furniture, and office space not furnished by the State necessary for the Vendor to comply with the Agreement.”	Three Questions: <ul style="list-style-type: none"> • Has the state allocated space for the IV&V team at the project location? • How many office spaces have been allocated? 	See response to Question 20.
63	Page 15, f. Conflicts of Interest	Are there any current NC Vendors precluded from bidding given the independence requirements?	The State has not yet made this determination.
64	Page 28, 11 The Project will use a combination of waterfall and agile development methodologies.	Waterfall is a less iterative and less flexible methodology than agile. How is NC planning to combine the two methods?	The State expects each offeror to propose its implementation methodology.
65	Page 22, VI. Proposal Content and Organization, 7. RFP Response Organization, f. Financial Information; Page 16, V. Other Requirements and Special Terms, 2. Special Terms and Conditions, 3. Financial Statements	Is the requirement for Vendor to submit Financial Information limited to Financial Statements?	See Section V.3.r for requirements related to financial stability. Offerors should submit sufficient evidence to demonstrate its financial stability.
66	Page 17, RFP Section V. Other Requirements and Special Terms, 2. Special Terms and Conditions, 3. Financial Statements, c.	The RFP states, “The State may, in its sole discretion, accept evidence of financial stability other than Financial Statements for the purpose of evaluating Vendors’ responses to this RFP.” Please clarify what that other evidence of financial stability will be.	Offerors must determine whether to submit evidence of financial stability other than financial statements specified in Section V.3.a and b.
67	Page 23, VI. Proposal Content and Organization, 7. RFP Response Organization, e. References.	Please clarify what the Vendor requirement for References (i.e., number of references, timeframe of references, other)	See response to Question 15
68	Page 7, Section II.B.6. ORGANIZATION: Vendors are directed to carefully review Section VI herein and fully comply with the content and organizational requirements therein. Page 19, section VI, section 3. Proposal Content contains subsections a-o.	Where in the RFP response are we to provide a response to Section VI.3. Proposal Content subsections a-o?	See Addendum #6, <i>Section VI. Proposal Content and Organization, 7. RFP Response Organization and Required Documents.</i>
69	Page 21, Section VI, number 5. OFFER FORMAT indicates: <i>tabs delineating each section.</i> Page 19, section VI, section 7 RFP Response Organization subsection i – l	Sub-sections i-k are ‘reserved’ and l is a ‘statement’, does the state require tabs for each of these sub-sections?	No.

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70	Page 21, Section VI, number 5. OFFER FORMAT The offers should contain the entire solicitation and be organized in the exact order in which the requirements and/or desirable performance criteria are presented in the RFP. The Execution page of this RFP must be placed at the front of the Proposal. Each page should be numbered. The offer should contain a table of contents, which cross-references the RFP requirement and the specific page of the response in the Vendor's offer. All offers should be typewritten on standard 8 ½ x 11 paper (larger paper is permissible for charts, spreadsheets, etc.) and placed within a binder with	Section VI.5 indicates the entire solicitation is to be included in the response. Does the state want a copy of the entire RFP submitted with our response and if so, where should it be located (see VI.7 – Proposal Content)	See response to Question 18.
71	Page 21, Section VI, number 7. RFP RESPONSE ORGANIZATION c. Technical Response. Page 13 Section III Technical Response 1 – 11 are reserved, 12 says look at 14 and 13 indicates there are no specifications and number 14 says to look at Attachment A.	Is the technical response section (c) to include a 'placeholder' for all of section III (1-11, 12, 13 and 14) or just (14)	Addendum #6, <i>Section VI. Proposal Content and Organization, 7. RFP Response Organization and Required Documents</i> for instructions on what to include and how to organize the technical proposal.
72	Page 23 C.2.1 Ad Hoc Assessments A 12	Please provide a definition of "ad hoc"	See Attachment A. 6.b. on page 26.
73	Delivery Instructions (Page 2) and Section VI.5 (Page 21)	Offer Format on Page 21 states that Offers should be contained in a binder with tabs for each section. Delivery Instructions on Page 2 states that one (1) original and seven (7) copies should be submitted. Can you clarify exactly what is to be contained in a binder? Should it contain only the original Offer? Should the additional 7 copies also be in binders and tabbed? If not, where should the 7 copies be placed for submission?	The Offeror must submit one (1) original complete hard copy of the response in a binder, and seven (7) exact copies of the complete response in separate, individual binders.

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74	Page 24, section 3. a	Page 24, section 3.a states “Independent integration testing services of all systems” are included in IV&V scope. Will the State provide a testing environment where the IV&V Vendor can conduct independent testing?	See response to Question 22.
75	Page 25, section 3. d	Page 25, section 3.d states “Implementation of automated testing tools and related standards and procedures” are included in IV&V scope. Does this apply to the testing conducted by the IV&V Vendor or for all testing? Will the infrastructure and software be provided by the State to perform automated testing or is that the responsibility of the IV&V Vendor?	Automated testing tools are expected to be provided by all DDI Vendors. The IV&V contractor is not required to provide testing tools.
76	Section VI. Proposal Content and Organization, 5. Offer Format, Page 21	<p>RFP states: “The offers should contain the entire solicitation and be organized in the exact order in which the requirements and/or desirable performance criteria are presented in the RFP.”</p> <p>Please elaborate on the meaning of the phrase “entire solicitation”.</p> <p>Please specify which “requirements and/or desirable performance criteria” should be considered when organizing the RFP response. Is this a reference to Section VI.3 Proposal Content, VI.7 RFP Response Organization, or Attachment A-IV&V Services Requirement (Statement of Work)?</p>	Entire Solicitation refers to the entire body of the RFP and signed receipt pages of any addenda released in conjunction with the RFP. See Addendum #6, <i>Section VI. Proposal Content and Organization</i> .
77	<p>Attachment A-IV&V Services Requirements (Statement of Work)</p> <p>3. Verification Services a, d, and e. (pages 24-25)</p> <p>4. Validation Services b.3 (page 25)</p> <p>11. CPA Tasks b.5 e and k (page 34)</p>	<p>Please confirm that the IV&V Vendor will only review and assess testing plans, cases, scripts, strategies, tools, methods, processes, results, etc.</p> <p>Is the IV&V Vendor expected to execute independent testing and/or create test strategies, plans, scripts, etc.?</p>	See response to Question 22.

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Q #	DOCUMENT SECTION	VENDOR QUESTION	RESPONSE
78	Attachment C: Cost Proposal (page 42) Attachment A: 12. Ad Hoc Assessments (pages 36-37)	Given that the scope of ad hoc assessments are not known at this time, will the State allow for adjustments in rates and/or additional travel costs (if required) in the provision of ad hoc assessment services?	Offerors must propose a fixed, blended hourly rate for ad hoc services as requested. Offerors may propose an alternate pricing approach, including a rate schedule, as provided in Section IV. Cost Proposal. See Addendum #6 for changes to Section IV. Cost Proposal and Attachment C: Cost Proposal.
79	Section I.C.14. Alternate Offers (page 10)	The RFP allows for alternate offers. Will the State accept alternative delivery models in proposals that vary from the scripted specifications as the only proposed delivery method? For example, if a more cost-effective approach is available does the contractor need to submit a bid for the requested delivery tables on page 38 and 39 along with the modified version or can a contractor just submit the alternate?	Offerors submitting alternate offers must submit two responses, one as specified by the RFP and a second one addressing the alternate offer.
80	Page 9, Section 7	To comply with this requirement, can the State please identify the relevant Vendors that have been employed by the state or are currently employed by the State and who have or are currently providing services involving, or similar to, the scope and nature of this solicitation or the resulting contract.	See response to Question 7.
81	Page 9, Section 7	Can the State please identify (if applicable) which firm is currently performing IV&V services for the DHHS?	See response to Question 7.
82	Attachment A, Section 5	Does the State anticipate one project audit or multiple audits as part of Attachment A Section 5?	Multiple audits.
83	Page 33, Section B	Can the State provide a timeline for the MES modules to be implemented?	The State anticipates an MMIS replacement by June 2022. Analytics and other modules within the MES may extend beyond that timeframe.
84	Page 6, Introduction-Background	Has the Sec 1115 application been approved for the transition of managed care vs fee-for-service? If not is there an estimated date for the approval?	The 1115 waiver is pending approval.

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85	Page 6, Introduction-Background	What services does NC DHHS anticipate will be need “beyond the traditional IV&V model”? How would the IV&V Vendor supply the outputs (i.e., recommendations) to these services?	The State does not anticipate services beyond the traditional IV&V model. It is possible CMS could make a request for services beyond traditional services.
86	Page 6, Introduction-Objectives	Are there specific areas of expertise (i.e., Testing, System Architecture, internal program repositories, Program Management, etc.) that NC DHHS is anticipating will be part of the IV&V team, to complete the services mentioned in Attachment A?	See response to Question 22.
87	Page 6, Introduction-Objectives	Is there an on-site personnel expectation that NC DHHS would like to see from the IV&V Vendor?	See response to Question 20.
88	Page 6, Introduction-Objectives	What role would the IV&V Vendor have within the NC DHHS stakeholders and steering committees (e.g., trusted advisor role)?	None.
89	6 Section I.A.4	Can the State provide its’ Medicaid Enterprise System (MES) roadmap and high-level timeline to help clarify the system implementation strategy (which modules are planned to be procured by when, etc.)?	Not at this time.
90	6 Section I.A.5	Are IV&V services requested for the new Medicaid Enterprise System only or are IV&V services being requested for the State’s current MMIS also?	The new MES only.
91	Page 9, Sec. C.7 Conflict of Interest	Would PCG’s Provider Management services create a real or perceived conflict of interest with providing IV&V services?	The State has not made this determination.
92	Page 23, Attachment A Sec. 1.f	When will DHHS share the list of modules involved in the project work the IV&V team will inspect?	See response to Question 1.
93	Deliverable/Module Due Dates	When will DHHS share the project schedule <u>with due dates</u> for modules and deliverables?	See response to Question 14.
94	Page 33, Attachment A Sec. 11.b.2.d System Integration Test	“Verify that the test organization has an appropriate level of independence from the development organization.” QUESTION: How is this level of independence verified?	The IV&V contractor would need to engage with contracted Vendors to determine organizational structure and make the determination.
95		Does DHHS plan to procure PMO and/or System Integration services? If yes, when?	See responses to Question 4 and Question 5.
96		Will DHHS provide a copy of the latest IAPD addressing MMIS replacement?	No.

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97	Page 20, Section D	Is NC DHHS contracting out PMO services? If so, is the contract awarded? To whom?	See response to Question 4.
98	Page 17, Section 10	Will the NC DHHS provide on-site space for IV&V Vendor staff? If yes, for how many?	See response to Question 20.
99	Pages 40-42	The Quarterly Progress Reports appear to be missing from Attachment C. Please clarify if this is the State’s intention.	The State omitted these Reports intentionally.
100	Pages 23-37, Attachment A	Attachment A appears to be missing “Developer Training and Documentation” as included on Attachment B. Please advise if this was the State’s intention.	See Addendum #6, <i>First Revised Attachment B: Schedule of Periodic Reviews</i>
101	Pages 38-39, Attachment B	Attachment B appears to be missing “Procurement Documents” as included in Attachment A on page 31. Please advise if this was the State’s intention.	This was the State’s intention.
102	Pages 40-42, Attachment C	<ul style="list-style-type: none"> • Attachment C appears to be missing “Procurement Documents” under Management Oversight. • Attachment C appears to be missing “Developer Training and Documentation” under Implementation Oversight. • Attachment C indicates “Training and Documentation” unit costs at 6; However Attachment B indicates 6 for “User Training and Documentation” and 6 for “Developer Training and Documentation” for a total of 12. • Attachment C - Operational Change Tracking – should the multiplier be 6 not 2? • Attachment C - Operations Processes and Activity – should the multiplier be 6 not 4? • Attachment C - Computer & User Operations Satisfaction – should the multiplier be 4 not 1? <p>Please clarify if this was the State’s intent of if the Attachment needs to be updated.</p>	<p>See response to Question 101 for Procurement Documents.</p> <p>See response to Question 100 for Developer Training and Documentation.</p> <p>See Addendum #6, <i>First Revised Attachment C: Cost Proposal</i> for unit cost modifications.</p>

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103	Attachment A Sec Intro Page 23	<p><i>All three Milestone Reviews will be performed for each MES module.</i></p> <p>Can the state identify the anticipated modules, and a general timeline for their development and implementation?</p> <p>What is the total number of anticipated Milestone Reviews?</p>	<p>See response to Question 1 above.</p> <p>The number of milestones will be based on the modules detailed in Question 1.</p>
104	Attachment A Sec 1.a Page 23	<p><i>The IV&V Vendor produces Quarterly Progress Reports that document the strengths and weaknesses of the MES Project and provide recommendations for correcting weaknesses. Progress Reports are prepared in advance of MMIS milestone reviews with CMS.</i></p> <p>Is it the state's understanding that Progress Reports are delivered to CMS/State simultaneously quarterly AND in advance of Milestone Reviews?</p>	Yes.
105	Attachment A Sec 1.e Page 23	<p><i>Vendor fills out the reviewer comment portion of the Medicaid Enterprise Certification Checklists and appends them to progress reports?</i></p> <p>Is it the State's understanding that Certification Checklists, with IV&V comment, are appended to those Progress Reports delivered prior to Milestone Reviews.</p>	Yes.
106	Attachment A Sec 2.c Page 24	<p><i>Vendor reviews the MES Project for: ...Capacity management, including consideration of future Vendor support and release plans for underlying databases, software, and hardware;</i></p> <p>Is the expectation that the IV&V Vendor will address the completeness of the capacity planning and management process in place? Please clarify.</p>	Yes.

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107	Attachment A Sec 3.a Page 24	<p><i>Independent integration testing services of all systems.</i></p> <p>Is it the State's intent that the IV&V Vendor conduct independent testing of all system functions?</p> <p>Please clarify the State's expectations for the IV&V Vendor's role in testing.</p> <p>Is the level of testing to be determined based on risk analysis undertaken by the IV&V Vendor with State input?</p>	See response to Question 22.
108	Attachment A Sec 3.d Page 25	<p><i>Implementation of automated testing tools and related standards and procedures;</i></p> <p>What is the IV&V Vendor responsibility in relation to provision of the test environment? Is a full, separate, independent testing environment required?</p> <p>Please greater details on the State's expectations.</p>	<p>See response to Question 75.</p> <p>The IV&V Vendor may/should propose tools and make recommendations.</p>
109	Attachment A Sec 4.b.4 Page 25	<p><i>Support for the development and implementation of training in the use of the new system, as well as attendant policies, processes, and procedures.</i></p> <p>Can the State provide additional details on the expected role of IV&V in the implementation training, including development of policies, processes, and procedures?</p>	See Addendum #6, Attachment A: IV&V Services Requirement (Statement of Work), Section 4. Validation Services, b.
110	Attachment A Sec:11. b.1.d Page 33	<p><i>Verify and validate unit test results of all program modules and processes, including code review as necessary, before they are integrated and system tested, and ensure results of the unit tests are fully documented.</i></p> <p>Where the DDI unit testing can be validated and verified by inspection of a sample of the units tested would such a methodology be acceptable?</p> <p>Please expand on the extent of the unit test validation and verification required.</p>	Yes. A sampling unit may be taken per module only for test validation and verification.

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111	Attachment A Sec 11.b.5.e Page 34	<p><i>Create and verify test scripts and plans that are complete with step-by-step procedures, required pre-existing events or triggers, and expected results for UAT test artifacts.</i></p> <p>Typical the DDI contractor develops test scripts as part of the full SDLC process - carried forward to UAT. Is the IV&V Vendor expected to create test script and plans for UAT? Pleas clarify the State's expectations.</p>	No. See response to Question 22.
112	Attachment A Sec 11.b.5.j Page 34	<p><i>Validate user acceptance test results from the DDI Contractor with the joint PMO and System Integrator Contractor prior to implementation and on an ongoing basis as changes are made to the system.</i></p> <p>Is the DDI contractor expected to conduct User Acceptance Testing? Please provide additional detail on expected test management.</p>	No. See response to Question 22.
113	Attachment A Sec 11.b.6.a Page 34	<p><i>Define, review, and approve acceptance procedures and acceptance criteria for each product before the product is tested.</i></p> <p>Please provide additional detail on acceptance criteria definition, review and approval. IV&V Vendor "approves" acceptance procedures?</p>	See response to Question 22.
114	Attachment A Sec 11.b.6.b Page 34	<p><i>Document test results in writing.</i></p> <p>Please provide additional detail on the test results to be documented by the IV&V Vendor.</p>	The IV&V contractor will review test results and document the applicable results for acceptance and turnover in writing as a component of their reporting.
115	Attachment A Sec 11.b.7.c Page 35	<p><i>Determine conversion error rates and whether the error rates are manageable.</i></p> <p>Is the IV&V Vendor responsible for the measurement and evaluation of conversion rates, or evaluating error rates to ensure accuracy? Please clarify the State's expectations.</p>	Yes, to both.



Failure to acknowledge receipt of this addendum may result in rejection of the response.

Execute Addendum #5:

Offeror: _____

Authorized Signature: _____

Name and Title (Typed): _____

Date: _____