

# Health Information Alliance, Inc.

## REQUEST FOR QUOTE (RFQ) HIE Patient Portal

**POST DATE**  
**October 2, 2023**

**PROPOSALS DUE BY**  
**November 2, 2023 by 5:00 pm**

**AND MUST BE SUBMITTED TO:**  
**Connie Patient Portal Project**  
**[submissions@conniect.org](mailto:submissions@conniect.org)**

**ANTICIPATED SELECTION DATE**  
**November 16, 2023**

**QUESTIONS: May be submitted by October 15, 2023 @ 5:00 pm in writing via e-mail to**  
**[submissions@conniect.org](mailto:submissions@conniect.org)**



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## I. General Information for Respondents

This Request for Quote (RFQ) is issued by Health Information Alliance (HIA), Inc. dba Connie, the state designated HIE for Connecticut. Connie reserves the right to reject all proposals, to waive or not waive informalities or irregularities in proposals or procurement procedures, and to accept any proposals determined through the review process to represent the best interest of Connie.

This RFQ provides respondents with essential information to enable them to prepare and submit proposals for consideration by the due date.

All proposals shall contain a complete response to this RFQ.

The quoted price shall be inclusive. If the price excludes certain fees or charges, please provide a detailed list of excluded fees with a complete explanation of the nature of those fees.

Respondents must clearly state in the quote if the company proposes to hire sub-contractors. Sub-contractors must be identified and the work they will perform must be specified. In your proposal, please provide the name, address, and Employer Identification Number (EIN) of each sub-contractor.

HIA will not refuse a quote based upon the use of sub-contractors; however, Connie retains the right to refuse the sub-contractors you have selected.

## II. Background

Pursuant to Conn. General Statutes (CGS) Sec. 17b-59d and 17b-59g, the State of Connecticut Office of Health Strategy (OHS) established Health Information Alliance, Inc. (HIA, Inc.) dba Connie, the state-designated HIE for Connecticut. Connie is an independent, not-for-profit, non-governmental entity chartered to build and deliver health information exchange services to the CT health ecosystem. The organizing principle, as affirmed by the CT Health Information Technology Advisory Council, is for Connie to be a “neutral and trusted” health data exchange organization. “Neutral” means no participating organization has an advantage over any other participating organization in Connie’s services. “Trusted” means that oversight of Connie’s business operations is conducted by representatives of the universe of participating organizations.

HIA, Inc. dba Connie, was incorporated in July 2019. The board of directors has met regularly since October 2019.

Connie is designed to oversee and drive services to support the exchange of health data in the State. It is Connie’s vision to be the statewide leader, advocate, and catalyst for the adoption and use of health information technology and health information exchange services that bring tangible, meaningful, and sustainable value to stakeholders across Connecticut.

Connie works with an existing technical infrastructure partner for our technology stack and data integrations to support HIE functionality.

## Objectives and Project Requirements

Connie's Patient Access Principles Policy articulates that Connie will provide patients timely and direct access to their electronic health information within Connie to (a) align with federal and state information blocking and interoperability rules, and (b) to strive to attain the Patient Access goals of the State-wide Health Information Exchange as describe in Connecticut State Statute **Sec. 17b-59d**:

1. Allow real-time, secure access to patient health information and complete medical records across all health care provider settings;
2. Provide patients with secure electronic access to their health information;
3. Allow voluntary participation by patients to access their health information at no cost; and
4. Promote the highest level of interoperability.

The objective of this RFQ is to enable Connie to create a secure online website that gives patients, convenient, 24-hour access to personal health information from anywhere with an internet connection. The patient portal should be engaging, user-friendly, and support patient-centered outcomes. It should also enable a patient to understand the information available about their provider, their health, support a patient's need to have a single source of information about their health record, assist a patient in identifying information discrepancies and directing a patient to where they can address inaccuracies and manage the information they have consented to sharing including the permitted purposes.

To begin to meet these expectations Connie is looking for a partner to implement the initial iteration of the Patient Portal, to be delivered in test for end-to-end demonstration, by August 15, 2024. Using a secure username, password, multi factor authentication, with patient ID verification and validation, patients will be able to view their health information available within Connie's infrastructure. Connie will work towards a complete display of patient clinical data that could include patient demographics, care team, encounters, lab results, medications, noted problems, immunizations, health related social needs recorded, and referrals to CT healthcare consumers through the Connie Patient Portal. Future enhancements will include interactive features, including but not limited to patient consent management.

### **Phase 1 project requirements to be delivered by August 15, 2024: Development**

1. Data connections with Connie's technical infrastructure will initially be limited to CCDAs. Access will be limited to a query and retrieve protocol.
2. Fully integrated with a patient identification (ID) verification process using ID proofing at IAL2 and authentication at AAL2 as described in [NIST 800-63 rev.3](#). Please describe the ID verification process, the extent to which the process supports users that may not have access to standard ID verification documentation (e.g., state issued ID or passport) and/or have limited technology acumen, and the proposed cadence of patient re-verification if any.
3. An engaging, user-friendly interface designed to support patient-centered outcomes. Please describe how the data elements can be transformed to display in patient friendly views, user interface features that support a patient's ability to use the data to be their own

advocate and improve their health outcomes. Please also describe ADA accessibility audits completed, results, and/or accommodations the UI has undergone.

4. Track and export monthly logs on key patient access indicators including but not limited to:
  - a. Number of patients accessing their data, stratified by age, race, geographic location, and if they are a Medicaid member or not.
  - b. Number of access requests denied because of ID verification failure, and the reason verification failed.
  - c. Most accessed components of the user interface.

#### **Phase 2 project requirements: Operations and Maintenance**

Phase 2 requirements reflect the activities needed to push the project into production and maintain operations.

1. Complete change control board approval and push to production
2. Monitor data feeds for maintenance issues, ensuring patients are able to access their data as appropriate.
3. Provide user support services to address ID verification, data access, services error, and other standard user questions. Please describe how anticipated categories of questions are routed to provide efficient, patient friendly support.

NOTE: pending approval, the patient portal anticipating production date is October 1, 2024.

#### **Future project enhancements:**

Please describe the current capability of your organization to implement the following enhancements; or, if not a current capability, the feasibility of implementing within the subsequent two years and the associated dependencies. Although these will not be included in the first two phases of the project (and are not to be included in the budget estimates submitted), a vendor will be selected based on their ability to enhance the patient portal to meet state statute patient access goals in the future.

1. Patient consent to sharing sensitive data through an SSO to existing consent processes.
2. ID verification for parents and guardians to access the data of minors or others under their legal care.
3. Uploading data from patients that can be shared with the patient's provider through secure messaging and/or added to the patient record in the HIE.

### **III. Project Scope and Deliverables**

<b>Proposed Activity</b>	<b>Tasks</b>	<b>Deliverables and Estimated Finish Dates</b>
Contracting	Contract negotiations completed	Contract, security addendum requirements agreement, and BAA signed – December 4, 2023

Establish technical interfaces with Connie's data repositories	Complete security review. Define technical connection scope, approach, frequency. Establish testing and production endpoints Complete testing and validation.	Deployment plan – February 1, 2024 Master test plan – February 1, 2024 Current security certifications – February 1, 2024, updated prior to CMS Certification review (6 months post go live) Test results/Issue list – July 30, 2024
Display records in a user interface	Connie branded user interface displaying CCDA sourced information into discrete, deduplicated visual elements for patients.  ADA Audit review	Public Facing User Guide – August 15, 2024 Completed CMS Voluntary Product Accessibility Template
Portal Live, ready for users	1. Complete change control board approval and push to production 2. Monitor data feeds for maintenance issues, ensuring patients are able to access their data as appropriate. 3. User support services available	User support SOP and patient facing contact information – August 15, 2024  End-to-end demonstration in production – October 1, 2024  Monthly data monitoring and maintenance report – monthly, starting October 15, 2024
Track patient access	Identify appropriate metrics with Connie leadership  Develop a dashboard, updated weekly and with monthly totals, available to Connie.	Patient access metrics dashboard mockup – August 15, 2024  Data collection and display begins – October 15, 2024
Presentations	End-to-End presentation and demonstration to (a) Connie leadership and (pending approval) (b) the Joint Steering Committee of OHS and DSS; CMS for certification; and (pending approval) the Connecticut Health IT Advisory Committee (HITAC).	Final presentations in test to: <ul style="list-style-type: none"> <li>○ Connie Leadership – August 15, 2024</li> <li>○ Joint Steering Committee – August 30, 2024</li> </ul> Final presentation/Demonstration in production: <ul style="list-style-type: none"> <li>○ HITAC – October 20, 2024</li> <li>○ CMS - TBD</li> </ul>

#### IV. Privacy and Security Standards

Connie maintains business associate's agreements (BAAs) with all vendors and participants. In addition to BAAs, we perform a risk-based third party (vendor) assessment. The HIE services provided by Connie and its subcontractors, as a business associate, is subject to the requirements of the Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification, as amended by the Health Information Technology for Economic and Clinical Health (HITECH) Act, Connecticut State regulations, and Health Information Exchanges: Privacy and Security of Protected Health Information. The organization must adhere to industry best security practices in accordance with Health Information Trust Alliance Common Security Framework (HITRUST CSF) or must undergo relevant audits and security certifications such as SOC-2 Type 2 or ISO 27001, respectively.

Additionally, the organization will execute a security addendum requirements agreement, and conduct penetration testing before production deployment. Connie can make the security addendum for vendors selected as finalist for review.

#### V. Proposed Budget

Please provide a detailed budget as part of the response to accomplish the project scope and deliverables as outlined in the RFQ as phase 1 and phase 2, without enhancements.

The proposed all-inclusive budget must include all costs associated with delivery of phase 1 and phase 2 services, including any travel and incidental expenses. All respondents are required to comply with requirements related to subcontractors as stipulated in the General Information for Respondents section. This is a not-to-exceed project budget.

#### VI. Response Submission Process

Responses must be submitted via email to: [submissions@conniect.org](mailto:submissions@conniect.org). Only complete responses submitted by the response deadline will be reviewed.

#### VII. Term of Contract

The term of the contract will commence upon contract execution, anticipated by December 4, 2023, and continue as defined in the associated work order or until terminated in accordance with contract termination provisions.

#### VIII. Review Process Timeline (Subject to Change)

The following timeline will be followed:

Event	Date
RFQ Published	October 2, 2023

RFQ Questions Submission Deadline	October 15, 2023 @ 5:00 pm
Question Responses Published	Anticipated October 22, 2023
RFQ Responses Due	November 2, 2023 @ 5:00 pm
Vender Presentation	Option – TBD As Request by Connie
Respondent Selection	Anticipated November 16, 2023
Project Kick-off	Upon Executed Agreement

## IX. Response Requirements

**NOTE:** Submissions should not exceed 20 pages.

### RFQ Response or Proposal Format:

1. **Response Cover Letter/Introduction** (1-page max)
2. **Respondent's Understanding of the RFQ's Ask** (2-page max)

Please provide a narrative detail that describes your understanding of what HIA, Inc. dba Connie is asking for in this RFQ and the key considerations involved.

3. **Delivery Approach, Proposed Project Plan, and Implementation Timeline** (8-page max)

- Please describe your approach, how you would deliver, and what is included in each of the following: Proposed plan for project activities, timeline, and deliverables.
- Include a proposed data flow diagram
- Include the organizational philosophy and background, organizational makeup, and if prime and subcontractors will be used and for what areas of the project.

4. **Risk-based vendor assessment** (5-page max)

- Please provide a narrative of your privacy and security protocols that include:
  - a. HIPAA/HITECH compliance
  - b. Cybersecurity program
  - c. Penetration testing cadence
  - d. Industry standard audits and/or certifications (e.g. SOC-2 Type 2, ISO27001, HITRUST Certification)
  - e. User identification and authentication in accordance with NIST standards
  - f. User audit and access controls/logging
  - g. Data handling/retention policy
  - h. Incident handling (including tracking, user notification, client reporting)
- Include as attachments copies of attestations or certifications indicated above (attachments do not count toward the page count). If selected,
  - If HITRUST Certified, please be prepared to discuss the corrective action plans (CAPs) identified and status of remediation.
  - If SOC-2 Type 2 audit is completed, please be prepared to discuss exceptions noted, if applicable.

5. **Organizational Qualifications** (2-page max)

- Please provide a narrative overview of:



- a. Breadth and depth of your organization
  - b. Overview of Project Team: Names, titles, project role/responsibility, and credentials for team assigned to the project.
  - c. If you have multiple staff to fill key positions to demonstrate the depth of your organization, please include and identify any secondary staff as backup staff resources.
  - d. Identify if you will be teaming or using subcontractors for any part of the delivery. Describe the sub-contractor organization, the roles and the qualifications for the roles.
- Project Team Resumes/Bios: For each project team member identified, please provide the resumes and/or bios that describe each member's qualifications. Include in Appendix A. (Does not count toward 20-page limit.)
  - References: List of organizations and contacts for whom you performed similar work. Include in Appendix B. (Does not count toward 20-page limit.)

**6. Cost & Assumptions (2-page max)**

Please include a detailed budget and narrative description to aid in understanding each cost amount. Include in the narrative any details regarding costs, such as underlying assumptions and pricing details, which will help us to understand the proposed costs.

**7. Appendices (Does not count toward 20-page limit.)**

Attach the following appendices:

- a. Appendix A: Project Team Resumes/Bios
- b. Appendix B: References
- c. Appendix C: Terms & Conditions - Identify any requested edits to the Terms & Conditions by providing a redline version showing requested edits. Please identify which ones are non-negotiable.
- d. Appendix D: Mandatory Forms
  - Respondent's EEO Report (Equal Opportunity Employment)
  - Vendor Set-up Forms (RFQ Exhibit A1-A2) Note: Optional for RFQ response submission, but required if selected.
  - Required Forms (RFQ Exhibits B1-B5)

## X. Presentation/Interview

As needed, presentations/interviews may be held at Connie's request prior to respondent selection. The presentation must be given by the members of your team that will be assigned to this project. Any respondents selected for a presentation/interview will be contacted directly and provided with the specific details necessary.

## XI. Method of Selection

A selection committee will review the proposals submitted in response to this RFQ. The award of the contract for services will be made, if at all, to the respondent whose evaluation by the selection committee and subsequent approval by Connie executive leadership and, if applicable, Connie's Board of Directors is determined to be in the best interests of HIA, Inc. dba Connie. Those organizations that demonstrate experience with similar large-scale projects, outline a clear and comprehensive response as defined in the RFQ are more likely to be successful. However, the selection of a respondent and the execution of a services agreement, while anticipated, are not guaranteed. Connie reserves the right to reject any or all of the proposals, or parts thereof, and/or to waive any informality or informalities in any of the proposals or the procurement process for this RFQ, if such rejection or waiver is deemed in the best interests of Connie. Neither Connie, nor any of its directors, employees or authorized agents shall be liable for any claims or damages resulting from the evaluation, selection, non-selection or rejection of any proposal submitted in response to this RFQ.

## XII. Equal Employment Opportunity

Each contractor who enters into an agreement with HIA, Inc. dba Connie shall not discriminate in employment or in the provision of equal housing opportunities to any person in any manner prohibited by the applicable provisions of federal and state law and regulation as presently in full force and effect, as may be amended, from time to time, and such prohibition shall be included in such agreement.

In the event of non-compliance by contractor with said federal and state laws and regulations, subject to the provisions thereof, the agreement may be cancelled, terminated or suspended in whole or in part, and such contractor may be declared ineligible for further procurements and agreements with HIA, Inc. dba Connie.

## XIII. General Terms and Conditions

A prospective respondent must be willing to adhere to and accept the terms and conditions of this RFQ, including the following, and must positively state its acceptance and compliance with such terms and conditions in its response to this RFQ.

1. Acceptance or Rejection by Connie – Connie reserves the right to accept and/or reject any or all proposals submitted for consideration. Respondents whose proposals are not accepted will be notified in writing.
2. Ownership of Documents – All proposals submitted in response to this RFQ are the sole property of Connie and subject to the provisions of Section 1-200 et. seq. of the Connecticut General Statutes (re: Freedom of Information).
3. Timing and Sequence – Timing and sequence of events resulting from this RFQ will ultimately be determined by Connie in its sole and absolute discretion.
4. Oral Agreements – Any alleged oral agreement or arrangement made by any respondent with any employee, agent or any member of the Connie Board of Directors, will be void and of no force and effect.

5. Amending or Canceling Requests – Connie reserves the right to amend or cancel this RFQ prior to the proposal due date and time, if it is in the best interest of Connie to do so.
6. Rejection of Non-Responsible Respondents – Connie reserves the right to reject the proposal of any respondent who is in default of any prior contract or for misrepresentation.
7. Connie reserves the right to correct inaccurate awards resulting from its clerical errors.
8. Rejection of Proposals – Proposals are subject to rejection in whole or in part if they limit or modify any of the terms and conditions and/or specifications of this RFQ.
9. Changes to Proposals - No additions or changes to the original proposals will be allowed after submittal.
10. Contract Requirements – A formal agreement will be executed with the company selected.
11. Rights Reserved to Connie – Connie reserves the right to award or reject any and all proposals in whole or in part, to waive technical defects, irregularities and omissions in any of the proposals or the RFQ process if, in Connie's judgment, the best interests of Connie are served.
12. Withdrawal of Proposals – Negligence on the part of the respondent in preparing its proposal confers no right of withdrawal after the time fixed for the submission of proposals. A proposal may be withdrawn by an appropriate document duly executed (in the manner that a proposal must be executed) and delivered to the place where proposals are to be submitted prior to the proposal due date.
13. Assigning, Transferring of Agreement – The successful respondent is prohibited from assigning, transferring, conveying, subletting or otherwise disposing of the awarded agreement or its rights, title or interest therein or its power to execute such agreement to any other person, company, or corporation without the prior written consent and approval of Connie
14. Cost of Preparing Qualification Statements – Connie shall not be responsible for any expenses incurred by any firm or organization in preparing and submitting a proposal. All proposals shall provide a straightforward, concise delineation of the firm's capabilities to satisfy the requirements of this RFQ. Emphasis should be on completeness and clarity of content.
15. Release & Waiver – Each respondent releases and waives any and all claims or actions that it may have against Connie, its employees, directors or authorized agents as a result of, or in connection with, the exercise of any rights of Connie under this RFQ.
16. Indemnification and Insurance – Each respondent acknowledges and agrees that the following provisions will be included in the formal agreement referred to in section 10 above.
  - A. Indemnification
    - i. Consultant shall, at all times, defend, indemnify, protect and save harmless Connie and their respective officers, agents and employees (collectively, the "Indemnitees") from and against any and all liabilities, actions, claims, damages, losses, judgments, workers' compensation payments, costs and expenses (including but not limited to attorneys' fees) arising out of injuries to the person, including death, property damage or other damages sustained by any of the Indemnitees, consultant or any other person, party, or entity, to the extent any such injuries, damage or damages are caused or alleged to have been caused

in whole or in part by the acts, omissions, errors or negligence of consultant or any of its officers, agents, representatives, employees or subcontractors. The expenses covered by the foregoing indemnification shall include those to investigate, defend and settle any claim, judgment or payment of any legal liability. Upon demand of HIA, Inc., consultant shall immediately pay to Connie the amount of any expenses incurred by any of the Indemnitees that is covered by the foregoing indemnification. The obligations of consultant under this indemnification shall survive the termination or expiration of the agreement. The existence of insurance shall in no way limit the scope of this indemnification.

B. Insurance

- i. Consultant shall procure and maintain, at its own cost and expense, throughout the term of the agreement and any extension thereof, the insurance required by the agreement, including any required endorsements thereto and amendments thereof. Consultant shall be solely responsible for any deductibles or retentions required in connection with the above-referenced insurance, and consultant shall indemnify and hold harmless Connie for any cost or liability associated with such deductibles or retentions, including but not limited to any payment thereof.
- ii. Prior to commencing any services, consultant shall submit to Connie a certificate or certificates in an accord form or a form of the same format for each insurance referenced in Subsection (i) above certifying that such insurance is in full force and effect and setting forth the information required by Subsection (iii) below. Additionally, respondent shall furnish to Connie within thirty (30) days before the expiration date of the coverage of each insurance referenced in Subsection (i) above, a certificate or certificates containing the information required by Subsection (iii) below and certifying that such insurance has been renewed and remains in full force and effect.
- iii. All policies for each insurance referenced in subsection (i) above shall:  
(i) include Connie as additional insureds (this requirement shall not apply to workers' compensation insurance, employers' liability insurance or professional liability insurance); (ii) include a standard severability of interest clause; (iii) provide for not less than thirty (30) days prior written notice to Connie by registered or certified mail of any cancellation, restrictive amendment, non-renewal or change in coverage; (iv) contain a waiver of subrogation holding Connie free and harmless from all subrogation rights of the insurer; and (v) provide that such insurance hereunder is the primary insurance and that any other insurance that Connie may have shall be deemed in excess of such primary insurance.
- iv. All policies for each insurance required hereunder shall be issued by insurance companies that are licensed to conduct business in the State of Connecticut and have a current A.M. Best's minimum financial size rating of X and key rating of A-.

- v. All of the insurance requirements set forth in this paragraph B. shall apply to any subcontractors hired by Consultant to perform any of its obligations hereunder. Connie reserves the right to require any additional insurance coverage for any specific work to be performed by any of Consultant or consultant's subcontractors.
  - vi. No provision of this paragraph B. shall be construed or deemed to limit consultant's obligations under the agreement to pay damages or other costs or expenses.
- 17. Affirmative Action – Demonstration of commitment to affirmative action by full compliance with applicable affirmative action policies and regulations including but not limited to HIA Inc.'s board policies and Connecticut General Statutes §§ 4a-60 and 4a-60a.
- 18. Acceptance – All proposals submitted in response to this RFQ shall remain open and subject to acceptance by the Connie for a period of six (6) months after the proposal due date.

#### XIV. Exhibit A

See HIA Inc - Vendor Set-up Forms – Exhibits A1 – A2 (Two separate files)

#### XV. Exhibit B

See HIA Inc – Required Forms – Exhibits B1 – B5 (One separate file)