

**RFP 325-05-10-016 Medicaid Systems Project
POS - Pharmacy Point-of-Sale System
Final Questions and Answers**

Section: 1.1.1

Topic: Timeframe for Attachment L Clarifications

Question #: 234

Question: This section references Attachment L, which preliminarily maps North Dakota's business are RFP requirements to the MITA business process model. Do you have a timeframe by which any gaps in Attachment L will be clarified?

Answer: The MITA model is evolving, so we expect some new gaps to occur, and we will have to deal with those gaps on an as-required basis.

Please note that Attachment L is specified at the top, i.e., business service level of the MITA model. Thus, for any MITA services indicated as "State's Responsibility" or "N/A for this RFP", unless the requirements for such a service are specifically addressed elsewhere in the RFP, these MITA services will not be supported through the solutions provided by this procurement.

If the vendor's solution includes support for any of these "State's Responsibility" or "N/A for this RFP" services in their proposal, the vendor should so indicate in their proposal.

Should the State determine that any "State's Responsibility" or "N/A for this RFP" service is to be added to the solution for this procurement, the State will issue the appropriate Change Service Request (CSR).

Section: 1.2

Topic: Use of Source Code

Question #: 235

Question: In this section and others, you specify that the award is for a "turnkey" solution. Would the State agree to use our source code internally, but not share it externally with other state medicaid programs or with other vendors?

Answer: Vendors responding to the POS portion of this RFP are required to offer proposals that allow for award of a turnkey solution. The state will own the implemented POS. We cannot guarantee internal use only of the source code as we would jeopardize the federal share of funding for this project.

Topic: Education of Staff for Turnkey System

Question #: 236

Question: In regards to the paragraph discussing "turnkey system": Is the vendor responsible for teaching State staff the actual programming language that is involved in making application programming changes? We envision providing menu-type tools that allow for changes to the system; however making changes to the actual code itself requires a specialized skill.

Answer: The State will provide training to State staff assigned to the project for the standard use of programming languages that include JAVA, .NET, Cobol, and Powerbuilder. The bidder must provide any additional training required for the project for specialized use of these programming languages or for programming languages that are not currently utilized by the State.

As part of a "turnkey" solution to MMIS and POS, the State staff will be involved in making application programming changes, including changes to actual code.

Section: 12.7.1

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Topic: System Warranty Charge

Question #: 273

Question: Rather than submitting a one-time charge for the System Warranty, can we submit an annual charge?

Answer: Please refer to 3.4.1 -- the system warranty is for one year. There will be no ongoing need for warranty after that initial period.

Section: 3.10.2

Topic: 10% Performance Bond

Question #: 239

Question: Is the State of North Dakota willing to substitute a 10% Letter of Credit requirement, rather than the 10% Performance Bond referenced in this section?

Answer: No, the State requires a letter of commitment for a performance bond from a bonding company submitted with the cost proposal. The actual performance bond must be obtained from a bonding company acceptable to the State and must be provided to the State within ten (10) calendar days of the date of the Notice of Intent to Award.

Section: 3.12.2

Topic: CHARGE FOR ROUTINE MAINTENANCE

Question #: 212

Question: Table 3 on page 35 under Trigger/Perf.Std states 'During the course of the contract, the Contractor must provider routine maintenance of the system at no charge to the State and not through use of the system modification change control process.' yet the pricing schedule on page 388 calls for a price for 'System Warranty / Maintenance Activities'.

Is maintenance on the system to be performed at no charge during the course of the contract as stated on page 35?

What is to be priced for 'System Warranty / Maintenance Activities' on the pricing shcedule?

Answer: Maintenance is to be provided at no charge during the course of the contract -- this can also be stated as during "DDI". Warranty is for the period of time after implementation (one year).

Refer to 7.1.1.18 for specific system warranty / maintenance activities.

Section: 3.4.1

Topic: System Warranty Period

Question #: 237

Question: Please define "System Warranty Period". What obligations does the vendor have during this time period?

Answer: The system warranty period is one year after implmentation. Refer to 7.1.1.18 for the obligations for this period.

Section: 3.7.1

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Topic: Payment of Deliverables

Question #: 238

Question: Regarding the statement "The State will make a single payment when each of the DDI deliverables is received", does this mean that the vendor will receive a separate payment for each deliverable? Or, will the vendor receive a payment once all the deliverables have been provided? If the former is true, how will the value of each deliverable be established?

Answer: Payment is per deliverable once they have been approved by the state. Each vendor will propose the values / cost structure for their deliverables. The value of each deliverable will be determined during contracting with the successful bidder. For the definition of when the timeline for the milestones and deliverables will be developed, refer to 8.2.1.2

Section: 4.4.1.1

Topic: Types of Paper Claim

Question #: 240

Question: What type(s) of paper claim is submitted for the pharmacy POS?

Answer: The current pharmacy paper claim is available on our website at www.state.nd.us/eforms -- form #634. The state is open to utilizing a different form in the future as well as potentially eliminating paper forms and having providers utilize the web portal for non-POS claims submission.

Topic: Breakout of Pharmacy Claims

Question #: 248

Question: What is the breakout for the number pharmacy claims, electronic vs. paper?

Answer: For 2004, paid paper claims totaled 8,495 while paid electronic claims totaled 1,168,009.

Section: 5.2.1.6

Topic: MMIS DW Fields

Question #: 241

Question: Is the POS bound to using the MMIS DW or can we develop and use a DW specifically made for the POS and feed the MMIS DW fields needed for its systems and reporting?

Answer: Yes, the POS system must transfer data from POS to the "MMIS DW" (Medicaid DW) in an automated fashion without requiring routine manual intervention. The vendor may include their existing data warehouse integrated with POS as part of the POS solution for ND. The vendor will define the functionality of that POS DW.

Topic: DW POS

Question #: 242

Question: In line with the previous question regarding the use of a POS DW, we would like to create a DW especially designed for the POS. Is this permissible? We think it would be prudent in that our POS system is data driven and closely linked to all other pharmacy functions (ie, Prior Authorizations (PA), which would share the DW.) Using a DW outside the suite of products we would otherwise provide may adversely impact system response times.

Answer: Yes, the vendor may propose use of a data warehouse integrated with POS as part of the POS solution for North Dakota. The vendor will define the functionality of that POS data warehouse. A data warehouse that is integrated with POS must transfer data to the "MMIS DW" (Medicaid DW) in an automated fashion without requiring manual intervention. The State's preference is to have only one data warehouse environment (product) to support.

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Section: 5.2.2.1

Topic: Pharmacy Claims

Question #: 174

Question: Should different vendors be selected to provide MMIS and POS requirements, how will the POS system access data from the MMIS and DSS/DW systems?

Answer: Vendors will have to work collaboratively to develop the appropriate interface (MITA model).

Topic: DUR messaging from alternate source

Question #: 243

Question: Section 5.2.2.2 (ProDUR) states that DHS is open to receiving DUR messaging from another drug file data source besides First Data Bank. Is the same true for general claims processing as described in this section?

Answer: Yes.

Section: 5.2.2.3

Topic: Current system invoice tracing abilities

Question #: 244

Question: We understand the desire to offer Web-based dispute resolution. Does the current system have the ability to trace invoices to claim level detail?

Answer: No, the current system does not have this ability to track disputes to the claim level. Invoices, of course, are generated based on the claim level detail and this information is stored. The future system must have the ability to track disputes to the NDC and claim level detail.

Section: 6.1.1

Topic: Staffing Numbers

Question #: 245

Question: How many staff does the State presently employ to run and support the POS? Can these be broken down by major POS function (ie, Help Desk, Operations, Maintenance, Programming, etc.)? We are aware that the bidder is supposed to define the numbers of staff required to support its system; however, it would be helpful to know how many staff the State expects to allocate to the POS component—substantially more or less than the current levels?

Answer: There is one help desk FTE, one pharmacist FTE, and on-call programmers and business/IT analysts that work on the system. Total time for the on-call staff devoted to POS operations is not tracked and cannot be estimated. We would expect the new system to demand minimal programming time after implementation.

Section: 6.2.1

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Topic: Key Personnel to be Named - Position Sharing

Question #: 132

Question: In Table 11: Key Personnel Qualifications/Requirements it states that the Project Manager and Implementation Manager "May not serve in any other position". While this is very important to the much larger MMIS project, is it also a requirement for the POS project?

Answer: An amendment to the RFP removing the stipulation that POS and DSS Project Managers must not serve in any other position is being prepared and will be published on the Medicaid Systems Project website at <http://www.state.nd.us/humanservices/info/mmis.html>. The requirement that the MMIS vendor's Project Manager must not serve in any other position is being retained.

Topic: KEY STAFF MAY NOT SERVE IN ANY OTHER POSITION

Question #: 205

Question: table 11 on page 87 under Special Requirements states that the Project Manager, Systems Development Manager, and Implementation Manger 'May not serve in any other position'. While this is certainly important for the much larger MMIS System is this also a requirment for the smaller POS project?

Answer: Systems Development Manager must be 100% dedicated to the project, but there is no stated limitation as far as this manager serving in other positions. The other two positions will be answered with the response to question #132.

Section: 6.3.1.1

Topic: Location of programming/coding tasks

Question #: 246

Question: While the majority of certain DDI tasks will take place in a Bismarck, ND "facility secured by the State", much of our programming/coding tasks will occur at our home office. Is this acceptable?

Answer: As part of a "turnkey" solution to the MMIS and POS, the State's desire is for State resources located in Bismarck, North Dakota to be included in the programming/coding tasks. This involvement will aid in successful completion of training as laid out in section 7.1.1.20. The State will listen to recommendations on how best to include State technical and application support staff throughout the DDI tasks.

Topic: DDI Requirement Deviations

Question #: 247

Question: What is the process to deviate from DDI requirements, as implied in the second to last paragraph in this section? For example would WebEx demos & worksessions be permissible?

Answer: In accordance with 6.3.1.1, Vendors should submit proposed off-site work plans as part of their proposed solution. Approval from the state would be required prior to using this option and approval may not be granted if the state feels that portion of DDI must be on site.

Section: 7.1.1

Topic: Alternative to Web Browser/HTML

Question #: 249

Question: Is the Eclipse Rich Client Platform connecting to J2EE webservices an acceptable alternative to a Web Browser/HTML client where/when the richer widget set adds significantly to usability and productivity?

Answer: The bidder may propose a rich client interface as an alternative to a web browser HTML user interface. The State's preference for a rich client interface would be Microsoft VB.Net using Smart Client technology.

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Topic: Linux Qualification

Question #: 250

Question: Does Linux (such as Redhat Enterprise 4) qualify a POSIX/Unix OS for the purpose developing and deploying vendor applications?

Answer: Yes, Redhat ES or Suse Linux ES are both POSIX compliant.

Topic: MMIS Standards for Open Source Software

Question #: 251

Question: What are the State's MMIS and DHS Enterprise standards in regards to the use of Open Source Software and the use of Open Standards and Open File Formats by vendors and in vendor created system /products?

Answer: The State currently utilizes Linux, some Apache Foundation open source projects such as HTTP server and Struts, and XML for several systems. Please refer to the State's Enterprise Architecture Standards as referenced in Section 5.3, on page 76 of the RFP.

Section: 7.1.1.10

Topic: Test Scenarios

Question #: 254

Question: Who is responsible for creation and sign off of test scenarios?

Answer: Each vendor is responsible for planning and conducting unit, integration and system testing on their respective components. The specific sequence and schedule of testing efforts for all vendors will be established, along with the resulting Test Plan (among other deliverables), through a joint planning period of all vendors, ITD and the Program Manager. This planning period will occur at the beginning of the DDI Phase of this Project.

The State must review and approve the results of those tests before the components may be promoted to IV&V. Although the Program Manager will have the final sign-off authority, the IV&V vendor(s) and business team may be asked to review the results before promotion.

Section: 7.1.1.18

Topic: Batch "Abend"

Question #: 255

Question: Can you give examples of batch "abend"?

Answer: A batch process consists of one or more business functions that are typically performed off-line. A batch "abend" would be any abnormal end to a batch process.

Some examples of batch processes may include, but are not limited to:

- checkwrite (the actual printing of checks)
- mass adjustments (example - creating adjustments for a certain provider type for a date range)
- creating/receiving bulk financials for PCP, HMO, Healthy Steps
- 1099's
- monthly reporting
- yearly reporting

Section: 7.1.1.2

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Topic: POS Electronic Document Mgmt System

Question #: 252

Question: Does the POS need to supply a unique electronic document management system, or will there be a shared one between all three (MMIS, POS and DW/DSS) components?

Answer: Each vendor may propose an electronic document management system. The state will select ONE system that will be shared between MMIS, POS, and DW/DSS. The state will license the selected solution.

Section: 7.1.1.9

Topic: MMIS, POS, DW/DSS Coordination

Question #: 253

Question: Is a common "look and feel" required between the MMIS, POS and DW/DSS? If so, how will this be coordinated and how will additional costs to meet these not-yet-defined requirements be reimbursed?

Answer: GUI standards will be established by the state and all vendors at the beginning of the project to ensure consistent "look and feel" (e.g. terminology) across all service applications. This approach will be consistent with the current MITA model. These costs must be part of the proposal as all vendors will be in the same situation and will help establish the standards.

Topic: Hardware Redundancies

Question #: 256

Question: Will the State be responsible for providing necessary hardware redundancies for its desired level of disaster recovery?

Answer: The State will be responsible for acquiring the hardware necessary for the level of redundancy needed for back-up and recovery. The bidder and the state together will be responsible for providing a comprehensive and easily manageable back-up and recovery process that is responsive to the State's needs as outlined in section 7.1.1.8. This will include the necessary hardware specifications.

Section: 7.3.1

Topic: Direct Data Entry Screens

Question #: 257

Question: The first paragraph references Direct Data Entry screens as "options". Can you clarify whether the successful vendor should assume that they are to become project requirements?

Answer: Direct Data Entry is a requirement for the POS. The word "options" in this paragraph refers to the claim submission options which must be available to the ND Medicaid providers.

Section: 7.3.1.1

Topic: Pharmacy Prior Authorization

Question #: 175

Question: In item #1 what are the State's criteria for handling P3 and P4 transactions, and what are the appropriate fields of data required?

Answer: Our current process is somewhat irrelevant as we are asking for a new solution. We will allow the vendors to propose solutions as they see fit, provided NCPDP version 5.1 standards are followed.

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Topic: Pharmacy Prior Authorization

Question #: 177

Question: Item #7:"The POS System must provide a timely mechanism (in NCPDP format, as well as Web inquiry) where an NDC code can be entered and a response will designate a pharmaceutical as: Covered, PA Needed, Not Covered" Is this inquiry patient specific or benefit design specific?

Answer: Benefit design specific.

Section: 7.3.1.1.1

Topic: PA/PDL Development

Question #: 258

Question: Who is responsible for developing PA criteria and developing a PDL? Will the POS be able to dictate or have input to the format of a PDL? Please describe the perceived process of implementing these.

Answer: The state (through the Drug Use Review Board) is responsible for developing PA criteria (and PDL if it is done). The PDL may be by drug class or by specific drugs between classes. As this is not defined currently, we cannot describe the perceived process of implementing a PDL. However, we will likely use models that have been successful in other states.

Section: 7.3.1.1.2

Topic: Fax Based Inputs for PA's

Question #: 259

Question: Are fax-based inputs for PA requests acceptable?

Answer: This is one option, but it cannot be the only option.

Section: 7.3.1.1.3

Topic: Copies of PA Reports

Question #: 260

Question: Can you provide copies of the PA reports referenced in this subsection?

Answer: Reports will include market share shift to preferred products, number of PA requests, approvals, denials, reasons for approvals, denials, etc. We need the POS solutions to allow the functionality to generate a variety of reports with significant drill down capability (e.g. patient level, physician level -- one patient requires all brand name PAs, one physician is responsible for 50% of the Nexium PAs, etc).

Section: 7.3.1.2.1

Topic: "Re-bill" Clarification

Question #: 261

Question: Does the term "re-bill" refer to a reversal and re-submittal of a POS claim?

Answer: Yes.

Section: 7.3.1.2.4

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Topic: 3 Second On-line Response

Question #: 262

Question: Must the 3 second on-line response notification performance standard be met 100% of the time? Exclusive of network or switching problems?

Answer: This is an NCPDP standard. If it isn't met, the switch will respond to the pharmacy with the appropriate NCPDP reject/reason response.

Section: 7.3.1.3.4

Topic: POS Specific DW Reports

Question #: 263

Question: The reports for these requirements imply the use of a POS-specific DW. Is this correct? If so, what reports are to be run off of the MMIS DW/DSS that are (and are not) a responsibility of the POS.

Answer: Please see answer to question # 241. As stated in that answer, the vendor must propose which reports will be run directly from the POS DW.

Section: 7.3.1.4.1

Topic: POS Indicator

Question #: 178

Question: Item #13: Please define the use of the indicator for multiple dispensing fees as it relates to claim adjudication.

Answer: Different indicators would allow for one dispensing fee for brand name drugs, one for generic, one for over-the-counter, one for compounds, etc.

Section: 7.3.2.1.1

Topic: Annual Drug File Expense

Question #: 264

Question: Who is responsible for purchasing the Drug File (eg, MediSpan or FDB) on an annual basis?

Answer: As this is a turnkey solution, ND Medicaid will purchase the drug file on an annual basis after implementation.

Section: 7.3.2.1.2

Topic: Data Warehouse Reference

Question #: 265

Question: Does data warehouse reference the MMIS DW/DSS?

Answer: Yes.

Of course, ProDUR interfaces primarily with the POS claims file and claims history, as ProDUR must be "real time".

Section: 7.3.2.2.1

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Topic: RetroDUR Inputs

Question #: 185

Question: Item #5: What geographic parameters are to be used for analysis?

Answer: These can include county, zip code, etc. Should be able to enter ranges as well as multiple parameters to allow for metro v. rural type inquiries.

Topic: RetroDUR Inputs

Question #: 186

Question: Item #6: Do provider profiles with peer comparisons refer to pharmacy providers, physician providers (prescribers), or both?

Answer: Both.

Topic: RetroDUR Inputs

Question #: 187

Question: Item #8: Will the peer groupings parameters be predefined, or will they be specified by the user at the time of analysis?

Answer: The solution must provide for parameters specified by the user at the time of analysis and also for pre-defined parameters.

Topic: RetroDUR Inputs

Question #: 188

Question: Item #10: Will criteria for referrals to SURS be part of the RetroDUR criteria entered by the users? If not, how are those referral candidates to be identified?

Answer: An amendment is being issued to remove 7.3.2.2.1, #10.

Topic: Retrospective Drug Utilization Review

Question #: 228

Question: Some of the functional requirements are primarily found in a RetroDUR system and may be functions performed by your current RetroDUR vendor? Will that RetroDur contract continue? Does the State want the POS vendor to build queries based upon RetroDUR criteria, essentially performing the technical functions that the current vendor is doing?"

Answer: The primary RetroDUR functions will be completed by the RetroDUR vendor. We anticipate retaining a RetroDUR vendor after implementation of the new system. Based on the requirements in the POS portion of the RFP, the state desires a POS system that allows some of the technical functions (but not all) to be built within the POS system to allow more involved administration of pharmacy services for ND Medicaid.

Section: 7.3.2.2.4

Topic: RetroDUR Outputs

Question #: 189

Question: Are sample reports available for each desired type of report?

Answer: No. The reports required are those commonly found within Pharmacy Claims System solutions, used throughout state Medicaid Programs. These reports are RetroDUR-type reports and are essentially unlimited as the user can create queries as they desire with varying data elements.

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Topic: RetroDUR Outputs

Question #: 190

Question: Will the threshold be a fixed amount, or will it change?

Answer: The solution must allow the user to change the threshold.

Topic: Analytical Reporting Responsibility

Question #: 266

Question: Aren't "analytical" reports the responsibility of State staff, as this is a turnkey system to be handed over?

Answer: Yes, these will be the responsibility of the state staff. The solution must allow for an ad hoc generation of these reports through a user interface (e.g. user asks for top drug classes for period of 1/1/08-3/1/08). The reports will be generated when DHS staff enters the parameters (dates, drugs, drug classes, pharmacies, MD's, etc.). This output is a requirement for ad hoc reporting capabilities.

Section: 7.3.3.1.1

Topic: Drug Rebate Invoices

Question #: 179

Question: Item #7: Can the State provide examples of State-specified reasons for non-generation of drug rebate invoices?

Answer: This is currently limited to invoices less than \$5 for a labeler provided there are no \$0 unit rebate amounts on the invoice.

No other reasons are known at this time, however, we desire this functionality as these processes are fluid and often change. We would like to be able to allow these reasons to be modified by the user. Possible parameters would include specific manufacturers, excluding specific drug NDC's from the rebate invoice, etc.

Topic: CPT/HCPCS Codes

Question #: 180

Question: Item #19: Are the only CPT/HCPCS which are required to be crosswalked those which are in a 1-1 relationship with NDC codes?

Answer: No. There are some CPT/HCPCS codes that have a 1:2 or 1:3 relationship and agreements can be reached with manufacturers to pay a certain rebate amount that is inside the range of rebate amounts for the NDC's. It can be best stated that the crosswalk is required to work for all CPT/HCPCS codes that have a 1:1 relationship with an NDC to the manufacturer level of the NDC (first 5 digits of the NDC). One example is Synagis - the CPT matches to two NDC's, but both NDC's are from the same manufacturer.

Topic: Drug Rebate Reconciliation

Question #: 267

Question: Does the current drug rebate system have the ability to trace invoices to the claim level? If not, would reconciliation for potential disputes to these be waived? How many state staff are involved in the Drug Rebate process currently?

Answer: The tracking requirement will be from the time of implementation forward as our current system does not track rebate payments and disputes back to the claim level detail.

Currently, there is one state staff person working on disputes. The overall process flows through multiple state agencies with multiple staff members (e.g. finance, pharmacy services, information technology).

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Topic: Future Supplemental Rebate Handling

Question #: 268

Question: This requirement implies that supplemental rebates are not currently being utilized by the State. Is this true? If yes, what plans, if any, are there and whose responsibility will it be to facilitate the addition of SR's? Would the responsible party be required to adapt to the POS needs? Would the POS vendor have input to the terms of the supplemental rebates?

Answer: There are currently no supplemental rebates collected by the state. We will start collecting some supplemental rebates in the coming quarte. The POS solution must allow for the process of integrating supplemental rebates into the drug rebate invoicing.

Section: 7.3.3.1.2

Topic: Drug Rebate Inputs

Question #: 181

Question: Can the State provide examples of inputs from other vendors?

Answer: An amendment has been / will be issued to remove 7.3.3.1.2.6 from the inputs.

Section: 7.3.3.1.3

Topic: Drug Rebate Invoicing

Question #: 182

Question: Item #6: Can the State provide examples of other data requests from vendors?

Answer: An amendment has been / will be issued to remove 7.3.3.1.3.6 from the outputs.

Section: 8.1

Topic: Method of Alternate Solutions

Question #: 269

Question: In this section we are given the impression that "Alternative approaches to DDI activities" are acceptable. However, in other sections the RFP states that alternatives would be grounds for proposal rejection. As subject matter experts in Pharmacy Claims Adjudication and Management, we have several ideas that may be more cost effective from an operational standpoint and a drug expenditure standpoint. How do we incorporate these ideas without getting penalized?

Answer: The statement re' "Alternative approaches to DDI activities" refers to specific DDI activities required to develop and deliver a specific project component or process. The preceding discussion in this section deals with variations from a State-directed or desired approach, i.e., methodology, scheduling process/tool, incident process/tool, etc.; and the ability of the vendor to recommend such variations for the State's consideration. One example would be a vendor recommendation for using Artemis as a scheduling tool even though the State's preference might be Microsoft Project 2003.

Alternatives to business functions, such as an outsourced Pharmacy POS, or the use of mainframe-based software are grounds for proposal rejection.

Section: 8.2.1.1

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Topic: Use of own Project Management Systems

Question #: 271

Question: Can we use our own Project Management system separate from the MMIS and/or DW/DSS ones?

Answer: Due to the potential number of vendors on this project, and the need for consistent and accurate information and communication within and across the Project, as well as to various external State and Federal agencies, it is the State's intent to implement a single, umbrella Project Management system for use on this Project. That system may be one of our vendor's system, a COTS product acquired separately, an in-house developed system, or a combination of the three. Such a Project Management system will be available for use by all vendors.

Within the vendor's own development environment, the vendor is free to use any Project Management system they wish so long as it interfaces with the system selected by and in use by this Project. If that interface is manual, the vendor will assume responsibility for porting information, deliverables, etc. from their own system to the Project's Project Management system.

Section: 8.4

Topic: Method of Alternate Solutions

Question #: 270

Question: In this section we are given the impression that "Alternative approaches to DDI activities" are acceptable. However, in other sections the RFP states that alternatives would be grounds for proposal rejection. As subject matter experts in Pharmacy Claims Adjudication and Management, we have several ideas that may be more cost effective from an operational standpoint and a drug expenditure standpoint. How do we incorporate these ideas without getting penalized?

Answer: Please see the answer to question #269.

Since this section of the RFP also addresses "alternative solutions to defined requirements" it is appropriate to note here that if a requirement specified by the State has been shown elsewhere to be more labor-intensive, or result in delays in providing a response to a vendor or recipient, we are asking the vendor to point this out, and provide an alternative that addresses the timeliness or labor-saving nature of the alternate.

In short, we expect our vendors to bid based on what we've requested, but if there are specific efficiencies that we did not see or request, the vendor is expected to be pro-active and note those in their proposal(s).

Please note that in some cases the State may not be able to act on the recommendations due to legislative restrictions.

Section: 8.4.6.2

Topic: Automated System Testing Tool Clarification

Question #: 272

Question: Throughout the RFP there are several references to an automated system testing tool. Can this be defined? Is it an internally created tool or a proprietary tool?

Answer: Table 18: Technical Requirements, Preferred Solutions, and Current Level of Support (Part 4) on page 100 references automated testing tools for load testing and functional testing. Information Technology Department licenses Mercury Interactive Load Runner (50 concurrent users) and Segue Software SilkTest, TestManager, and IssueManger (5 concurrent users). As stated in responses to other related questions, bidders will need to provide specifications of any software that is part of the bidder's solution. These specifications will need to include the recommended number of licenses.