

Question #	Source Document	Paragraph	Question	Answer
Questions from Project Talx				
1			Is this aimed at Small Business or open to all businesses?	This is open to all businesses
2			What do you consider to be constraints that will be faced?	Potential constraints including integrating with current MHS systems, ease of use within our security constraints, and collaboration with current smaller scale efforts
3			Can you please review the timeline again?	see slide deck
4			Does DHA have a solution in place for securely passing patients PII?	Yes but this will not be a requirement for phase 1
5			Are all the resources already identified or does industry need to find and submit data sources?	Industry will need to submit data sources/content but DHA will want the ability to also add our own content/info
6			what type of tracking capability is needed - user access levels, sign on capability, and tracking?	For phase one, expected tracking of # of signons, usage, etc. In later phased would like the ability to determine if users consumed "assigned" information
7			Does the training content in question exist already, and the intent here is to generate a web-based platform for delivery?	Content does not currently exist.
8			Is part of the solution here tools for authoring and inserting content? And what is the intent to vet that content to ensure it is valid/beneficial?	Yes, the ability to author content will be needed. We have a process in place to vet through SMEs within the MHS
9			Where are you at within the roll-out of the Genesis EHR Implementation?	Per HI Representative: Deployment finished by end of Calendar Year 2023
10			Are you expecting a solution that can integrate into the Genesis EHR?	Per HI Representative: Proposed VEC integration per the governments direction utilizing existing MHS GENESIS capabilities which possible occur in later phases but is not the expectation for the VEC pilot.
11			Can your EHR handle an Infobutton integration?	Not a requirement for phase one however in later phases, the system will need to have a content service accessible by the EHR systems.
12			Can you accept Restful API integration of content into the EHR?	see above
13			Is there a desire for any kind of automated training support? For example, observing what the patient is reading, and recommending other relevant material?	Yes, eventually in later phases but not the expectation for phase 1.
14			Clarifying the question on training material: are performers intended to generate content, find/consolidate content online, or enable Government generation?	Yes to all.
15			how many vendors are expected to make the downselect? is there a max?	Depends on the responses. The downselect will be based on best potential solutions and not on the number of demosntrations.
16			You desire an elegant solution. Is this contract aimed at Small Business or open to all businesses?	Open to all
17			Is there a cost bogey for this effort?	The Government will fund this according to the phases.
18			What level of prototype are you seeking? since this is a phased approach, vendors might not have fully operational platforms in place until selected	2D forward facing with some vendor generated content as well as the ability for Gov't generate content

Questions received NSTXL Email

19			Are you expecting a solution that can integrate into the Genesis EHR?	Per HI Representative: Proposed VEC integration per the governments direction utilizing existing MHS GENESIS capabilities which possible occur in later phases but is not the expectation for the VEC pilot.
20			Can you share your procurement process and timeline?	(Procurement timeline is in slide deck) Companies will respond to RFS which will be evaluated and companies will be selected to demonstrate their tool. From this downselect one or 2 companies will be selected to provide a prototype.
21			When will you make a decision on the RFS?	See timeline
22			Where are you with the Genesis EHR Implementation?	Per HI Representative: Deployment finished by end of Calendar Year 2023
23			What is the timeline for Genesis Implementation?	Per HI Representative: Deployment finished by end of Calendar Year 2023
24			-Does DHA have a preferred content creation tool in place currently?	No. DHA does not have preferred content creation tool. However, please see above answer
25			-What is the estimated timeframe for releasing final RFS?	Estimated week of 19 April
26			-On average, how many of your 9.2M beneficiaries do you anticipate will access this system on an annual basis?	During the prototype phase 1, we will need sufficient quantity to adequately exercise the prototype. FOC is TBD.
27			Question 5: Can your EHR handle an Infobutton integration?	SAME AS ABOVE
28			Question 6: Can you accept Restful API integration of content into the EHR?	SAME AS ABOVE
29			Is there a published format for the NETWORK/TALX events, such as a PowerPoint template or a Quad Chart?	There is no template, each Network/Talx event is driven by the customer and their requirements for each project.
30			Does this system need to meet DoD Impact Level 4/FedRAMP Moderate requirements to protect PII and sensitive information?	This is not a requirement for phase one however in later phases.
31			Will the system leverage Tricare Online's eligibility verification to grant access to the DHA VEC site?	Potentially but it will not be for phase 1
32			How many pseudo patients will be participating in the prototype phase?	Recommend no more 200 pseudo patients which will be needed while prototyping. For the pilot at 5 locations, we anticipate 2,500 users.
33			What is the expected timeline of full rollout after pilot is deployed?	After initial pilot to the five markets, anticipate expansion to additional markets over a three year period during the prototyping phase.
34			Will you need access to create video content in the prototype phase?	Yes, as it is important for DHA during the pilot to test video content creation since this is a functionality that needs organic capability.
35	TReX-DHA-VEC-DRAFT-RFS-2-April-2021	6. Solutions Paper Responses	The RFS states "No more than 3 foldouts are allowed with a page size of 11"x17" and will be counted towards the 20-page limit." Do foldouts count as one page or two?	Each side of the document is considered a page. Using the front and back of a fold out is considered two pages.
36	TReX-DHA-VEC-RFS-22Apr2021	6. Solutions Paper Responses	The RFS states "No more than 3 foldouts are allowed with a page size of 11"x17" and will be counted towards the 20-page limit." Do foldouts count as one page or two?	Repeat of above
37	TReX-DHA-VEC-RFS-22Apr2021	8.2	Does the Government expect the prototype to pass any Information Assurance reviews or go through the ATO/RMF process within the Phase 1 Period of Performance?	Not for phase 1, however recommend that vendors keep DoD Cybersecurity in the forefront of any solution as phase 2 and 3 will start/complete the RMF process.
38	Attachment 01 VEC Capability Statement of Need_Distro C	4.1.17, 4.12.4.1, 4.14	Does the Government expect that the prototype solution will connect to production DOD systems within the Phase 1 Period of Performance?	No, the prototype does not need to connect to production DoD systems in Phase 1

39	Attachment 01 VEC Capability Statement of Need_Distro C	4.4.2	Does the Government expect that the prototype will make use of the DOD CAC/DS Logon for patient or user logon within the Phase 1 Period of Performance?	No, CAC/DS Logon is not required for Phase 1
40	Attachment 01 VEC Capability Statement of Need_Distro C	4.4.4.1	Does the Government expect the prototype to pass any Information Assurance reviews or go through the ATO/RMF process within the Phase 1 Period of Performance?	Not for phase 1, however recommend that vendors keep DoD Cybersecurity in the forefront of any solution as phase 2 and 3 will start/complete the RMF process. See #37
41	TReX-DHA-VEC-RFS-22Apr2021	6 Solution Paper Responses 6.5 Cost and Pricing Breakdown	Comment: Section 6 states a combined Technical and Price Volume. Comment: Section 6.5 states The price volume has no page number limitation. Question: Is the price volume a separate document or can it be an attachment to the Solution Paper Response?	The price volume can be either a separate document or an attachment to the solution paper response.
42	TReX-DHA-VEC-RFS-22Apr2021	8.3 Pricing Solution 6.6 Basis of Estimate 6.7 Integrated Master Schedule	Comment: Section 8.3 states "Vendor shall submit a fixed price amount price for it's solution" Comment: Section 6.6 and 6.7 state "6.6 Basis of Estimate, 6.7 Integrated Master Schedule, An IMS shall be provided, using Microsoft Project. The IMS should be resource loaded with each task including a predecessor (if applicable), and correlate to the Basis of Estimates (BOE)." Question: The government request for a Fixed Priced solution with milestone payments is in conflict with the request for Basis of Estimate and Resource Loaded Integrated Master Schedule in Microsoft Project. Is it correct to conclude that the Fixed price offer with milestone payments is the pricing requirement and that the Basis of Estimate and Resource Loaded Integrated Master Schedule in Microsoft Project are not required?	Yes, an IMS with milestone payments for the solution submission is sufficient.
43	TReX-DHA-VEC-RFS-22Apr2021	6.6 Basis of Estimate	Comment: Section 6.6 Title Basis of Estimate. Question: No further information is provided for Section 6.6. Is it correct to conclude that Basis of Estimate is not required? If not will the government provide an update so offerors may properly understand the request in support of our response?	No, a BOE is not required for solution submission.
44	TReX-DHA-VEC-RFS-22Apr2021	7.3 Solution Responses	Given the clarification required for offerors pricing requirements, will the Government provide an extension to the due date?	Unlikely
45	RFS	Section 6.2.1 D and Section 6	Is there an example of avatars to be used in order to get an example of the government intent?	This is not needed for phase 1
46	RFS	Section 6.5, 8.4	Does the government have an estimated budget "not to exceed" that can be made available to offerors?	No
47	RFS	Section 6	Concerning no more than 3 fold outs at 11x17, please confirm that each 11x17 page, if used, will only count toward 1 page.	For ACC-O/NSXTL to answer. Recommend yes, only counts as one page.
48	RFS	Section 6.1	With regard to Cover Page 6.1 - Please clarify that the sub-sections 6.1.1 through 6.1.5 are expected to be covered in the Cover Page narrative.	The cover page identifies specific requirements. Anything additional should not be included in the cover page. The requirements in 6.1.1 through 6.1.5 are separate requirements and should be satisfied separately. Please note, there is no page limit for <u>responses to these requirements</u> .
49	RFS	Section 6.1.5	Please clarify whether or not the government is specifically requesting Past Performance (PP) references or just experiences listed in the cover page?	The Government is not requesting Past Performance, the requirement is to provide Past Experience. This requirement is NOT part of the cover page.

50	RFS	Section 6.1.5	If PP is expected in the past three years how many are required?	The Government is not requesting Past Performance, the requirement is to provide Past Experience. This requirement is NOT part of the cover page.
51	RFS	Section 6.7	What level of WBS level is required by the government for the IMS?	A WBS down to Level 3 is sufficient.
52	RFS	General	For each submission, what is the amount of time expected between each phase, the length of time expected for a downselect decision, and the run time of the prototype ?	It is roughly a month from when the RFS window closes until vendor demonstrations are selected. Vendor demonstrations will occur a few weeks after notification. Downselect to final vendor(s) will occur a few weeks after the demonstrations. Run time for the prototype is estimated to run three years.
53	RFS	6.2.2 Phase 2	Can the government please clarify is the intent to provide education to the providers? i.e. How-to for the System or education content	Phase 1 should focus on Patient education only. Other parallel efforts will determine if there will be a need for provider education or just integration with existing platforms.
54	RFS	Section 6.2.1	The evaluation criteria includes "optimal user interaction with the virtual environment." Will the government please define Optimal User interaction for this reference?	Optimal User Interaction refers to accessible, available, and usable. Accessible refers to ease of getting to the website and accessing the content. Available refers to being available for users with minimum downtime. Usable refers to that it should be intuitive and user friendly navigation.
55	RFS	Section 6, 6.2.2	Can the government please clarify payments can start on Day 1 of implementation and accessing the system?	Payment is dependent on clearly definable detailed milestones to include a milestone for implementation and accessing the system.
56	RFS	General	Does the government anticipate additional down selects after the first prototype phase 1 or do they anticipate a single award?	We anticipate a single award. However, we reserve the right to award to multiple vendors based on the maturity of the solutions presented.
57	RFS	6.2.2 Phase 3	In Phase 3 the following is mentioned, "The system shall provide feedback to the provider." What type of feedback is expected?	For phase one, expected tracking of # of signons, usage, etc. In later phases would like the ability to determine if users consumed "assigned" information
58	RFS	Section 6	Can you please clarify how the IMS should be submitted in PDF form to demonstrate the schedule is fully loaded?	The fully loaded IMS shall be provided in both PDF and MS Project.
59	RFS	Section 8.4	Section 8.4 ROM states "activities as listed in Section 9", does the government mean Section 10?	Yes.
60	RFS	Section 11	Please clarify whether attachments should be listed as appendices and/or attachments?	Please list all attachments as an appendices.