



RFP 24-75743 – Vaccination, Immunization, Scheduling, Inventory, Testing and Claims (VISIT) System: Technical Proposal

Respondent:

TrackMy Solutions, Inc.

Instructions:

Request for Proposal (RFP) 24-75743 is a solicitation by the State of Indiana in which organizations are invited to compete for contract amongst other respondents in a formal evaluation process. Please be aware that the evaluation of your organization's proposal will be completed by a team of State of Indiana team members and your organization's score will be reflective of that evaluation. Please review the requirements outlined in Attachment L – Scope of Work carefully. For all areas in which subcontractors will be performing a portion of the work, clearly describe their roles and responsibilities, related qualifications and experience, and how you will maintain oversight of the subcontractors' activities.

Respondents must organize their proposal in the exact order of questions provided in this document followed by their answers. While text boxes have been provided below, the Respondent may respond in the format of their choosing provided their response maintains the order proposed in this template. **A completed Technical Proposal is a requirement for proposal submission. Technical Proposals should not exceed 100 pages, excluding attachments. Failure to complete and submit this form may impact your proposal's responsiveness.**

1. Minimum Requirements (RFP Section 1.4)

For each minimum requirement listed in section 1.4 of Attachment L, please clearly explain how you meet the requirement.

We can confirm that we meet and exceed all minimum requirements listed in RFP Section 1.4.

Over the last five years, TrackMy Solutions, Inc. (TrackMy) has been widely leveraged and adopted across healthcare providers of all shapes and sizes, this includes state and local governments, top-10 largest health systems, higher education institutions and public/private employers. Moreover, TrackMy meets the outlined minimum requirements of this RFP by offering its TrackMy Verivax solution, a commercial-off-the-shelf solution (COTS) offered to all 40+ organizations it serves today. This COTS offering is cloud-hosted via Amazon Web Services, HIPAA compliant and SOC 2 Type 2 certified. Examples of organizations in the last five (5) years currently using TrackMy's proposed COTS solution for vaccination, immunization, scheduling, inventory, testing, and claims processing solutions include:

- County of Bucks, Pennsylvania (State and Local Government - Health Dept.)
- MCO Marin (Regional Medical Center That Serves State and Local Government Entities)
- Healthcare IT Leaders (Healthcare IT provider for State and Local Government Entities, a Healthcare provider)
- Advocate Health (National Health System)

References provided here-in, in response to this RFP.

2. Executive Summary

Provide a brief executive summary of your proposed approach to deliver the scope of work. Be certain to include a description of any subcontractors with whom you are partnering to fulfill the scope of the Contract and what roles these subcontractors will have during the life of the Contract.

June 22, 2023

Ref: Executive Summary, TrackMy Solutions Inc.

Indiana Department of Administration

Attn: Syed Mohammad, Procurement Division

402 W. Washington St., Room W468 Indianapolis, Indiana 46204

Dear Syed,

On behalf of the TrackMy Solutions Inc's (TrackMy) team, thank you for the opportunity to submit our proposal in response to Indiana Department of Administration's (IDOA) request for proposals for a Vaccination, Immunization, Scheduling, Inventory, Testing, and Claims (VISIT) System (RFP#: 24-75743).

TrackMy Solutions, Inc. (TrackMy) is an experienced, tech-first organization that offers a commercially-off-the-shelf (COTS), cloud-delivered platform, that captures, streamlines, and automates registration, scheduling, vaccination and testing programs, billing claims processing, all at scale. Over the course of the last few years, TrackMy has been the chosen platform for state and local government programs across Pennsylvania, Virginia, and others - in addition, the go-to technology provider across fortune 500's, universities, healthcare systems, and diverse/large employers. TrackMy's technology and program were battle-tested during the pandemic, in which we were able to have a part in providing care to over 400,000+ citizens across the nation (and have now grown to over 1.1M+ users and growing).

To bring forth a key goal of this RFP around addressing health matters and allowing individuals and families to be able to track and schedule required immunizations (as noted in Section 1.2 – Scope of Work) - TrackMy offers the industry-only 'appropriate standard of care' (a differentiator) as it relates to immunization administration, in which we have proprietary technology that allows a public user to first gain access to their current immunization history across State lines, and through TrackMy AI, identify immunization gaps - allowing a provider to improve care, and ensuring duplicate unnecessary immunizations do not happen, thus increasing public health matters and limiting vaccine waste.

TrackMy can meet, exceed, and localize all the stated requirements provided in the Scope of Work—Attachment L, and offers competitive pricing. The following proposal will detail not only TrackMy's platform capabilities but also our expertise and ability to provide and manage the Vaccination, Immunization, Scheduling, Inventory, Testing and Claims System that serves IDOA and the state of Indiana at large, including clinical providers and public users alike. Our partners have helped us review the approach to current MuleSoft usage for integration/interfaces, and we are pleased to share that we support all current processes in place.

We are very excited to share that we have chosen to partner with a few key Indiana MBE, WBE, and IVBE certified businesses as subcontractors to augment our industry-expertise and think Indiana-first! They are as follows, and additional details of their valuable scope contribution are detailed within the formal response. Our subcontractors include (with their value-added areas included), PMPHASE (WBE-certified, project management), Vergence Group (MBE-certified, Database Admin; Database Migration, IT Testing), aFit (WBE-certified, project management, IT training), and Corvano (IVBE-certified, Integration Lead).

TrackMy is in the process of becoming registered to do business with the Office of the Indiana Secretary of State (we work with CT Corp to process all our foreign registrations), and will meet the requirement of being in good standing status prior to contractual discussions with the State (per section 2.3.8 of the Main RFP document). To date, we are registered to do business across several states, and our partners are registered today in Indiana.

I am, Jeremy Elias, Founder, President and CEO of TrackMy Solutions Inc., and as such am authorized to make representations and binding contracts on its behalf, including this RFP response to IDOA. I can confirm our forthcoming proposal meets all general conditions, including the request for company financial information (per section 2.3.4).

Sincerely,

Jeremy Elias - Founder, President and CEO – Principal Contact for this proposal
TrackMy Solutions Inc.

Addr. - 8700 Monrovia Suite 310, Lenexa, KS 66215

Ph - (816) 536-4088

Email - Jeremy.elias@trackmysolutions.us

3. Background and Experience

Describe your company and proposed project staff's background and experience. Include the following information, at a minimum:

1. A list of organizations for which you have delivered system solution(s) and services similar in size and scope.
 - a. Include the client's name, project description and goals, the solution used (clearly stating if it is the solution you are proposing for VISIT), the functionality included (e.g., vaccine management, billing/claims, inventorying), who hosted the solution, your project role, duration of the role, whether the solution has been implemented, and project results.
 - b. Describe any problems and failures that you encountered in delivering your services, how these were resolved, and what were the lessons learned.
2. Your M&O experience for similar systems, especially with respect to your proposed solution. Include the following information, at a minimum: infrastructure management, application monitoring, incident management, access management, helpdesk, business continuity, and disaster recovery.
3. Your role and experience with OCM activities for similar projects, especially with respect to your proposed solution.
4. Any formal corrective actions that your company has experienced under previous contracts.

TrackMy® Solutions Inc. (TrackMy) is a U.S. based technology provider born out of the necessity to make medical record data readily accessible and actionable in order to improve patients' overall health. Tracking vaccines, testing, drugs as well as medical devices at the patient-level, for improved health and accurate compliance is their core competency and mission.

A growing Small Business Enterprise* headquartered in metropolitan Kansas City, Missouri, TrackMy Solutions draws their leadership team from large healthcare IT organizations, consultancies and

workforce solutions firms, including Cerner, Epic, University of Pittsburgh Medical Center (UPMC), and DST – SSC Technologies.

TrackMy Solutions uses API platforms to create better patient-facing applications, connecting data and making it securely accessible, allowing providers and patients alike to track a variety of healthcare data elements. Increased engagement of individuals and communities enables more informed decision-making, empowering patients to become more involved in their health.

The company designs, develops, interfaces, implements and supports market-leading integrated solutions for electronic patient registration, inventory management, vaccine temperature and integrity tracking, patient scheduling and reminders, vaccine administration, adverse event reporting, validated vaccination record reporting, and digital vaccine passport delivery to users/patients.

TrackMy Solutions is focused on delivering on their vision of “Streamlining Health Data Access.” As a measure of the quality and impact of their work, the company was named one of the “2021 Top Healthcare Solution Providers” by CIO Magazine, and awarded as a “2020 Top 10 EMR Solution Provider” by Healthcare Tech Outlook.

TrackMy By the Numbers:

- Over 1.1M+ Users on the TrackMy Platform today
- Over 3M+ Vaccines administered, tracked, and reported today
- Over 225K Appointments Scheduled today
- >96% of Clients Recommend working with TrackMy

** U.S. SBA designation is based on Size Standards for NAICS code 511210 – Software Publishers.*

Below are a list of a few reference/sample organizations in which TrackMy has delivered system solutions and services similar in size and scope:

- **Client Name** - County of Bucks, Pennsylvania (State and Local Government - Health Dept.)
- **Project Description and Goals** - COVID-19 Vaccination Support Services was the organizations project description Goals were to vaccinate over 190k individuals across the fourth largest county in the state of Pennsylvania
- **Solutions Used:** TrackMy Verivax was the solution used, same as the one being proposed for VISIT
- **The Functionality Included:** TrackMy provided the registration, scheduling, vaccination administration technology system, complete with required regulatory reporting to the state IIS, insurance billing/claims, inventory tracking and call center work.
- **Who Hosted the Solution:** TrackMy’s software is securely cloud hosted by Amazon Web Services.
- **Your Project Role:** Implementation of software, delivery of software, end user support for software, project management of software, call center support, for software advisory services for mass vaccination events.
- **Duration of the role:** The solution was implemented in February 2021, and used successfully through April 2022
- **Whether the solution has been implemented:** Yes the solution and services was successfully implemented and used February 2021, and used successfully through April 2022
- **Project Results:** TrackMy and the organization were able to register, schedule, and care for over 195,000 residents in the county at our 5 clinic sites.

- Describe any problems and failures that you encountered in delivering your services, how these were resolved, and what were the lessons learned:

Given the state of emergency, state and local governments continue to change who was eligible to receive the series of COVID 19 vaccines. This forced TrackMy to continue to scale and deliver timely code changes for eligibility criteria (i.e. age). To remedy, TrackMy closely worked with state and local officials to determine ongoing changes and impacts to which TrackMy proactively provided code changes on a weekly rolling basis.

- Client Name: Advocate Health (National Health System)

- Project Description and Goals: Streamline and offer improved experience for flu and covid vaccinations. Goals included vaccinating and tracking over 120k individuals vaccinated across 5 states, 28 locations, 3 time zones while staying on-budget and on-time.

- Solutions Used: TrackMy Verivax was the solution used, same as the one being proposed for VISIT

- The Functionality Included: TrackMy provided the web access, mobile friendly access, registration, online scheduling, vaccination administration technology system, complete with required regulatory reporting to the state IIS, inventory tracking, end user support and call center work. The solution was implemented in August 2022, currently being used, and contracted to be used until 2027

- Who Hosted the Solution: TrackMy's software is securely cloud hosted by Amazon Web Services.

- Your Project Role: Implementation of software, delivery of software, end user support for software, project management of software, call center support for software, advisory services CMS and NHSN reporting compliance.

- Duration of the role: The solution was implemented in August 2022, currently being used, and contracted to be used until 2027

- Whether the solution has been implemented: Yes the solution was implemented in August 2022, currently being used, and contracted to be used until 2027

- Project Results: TrackMy and the organization were able to achieve a 8:1 Return on Investment via FTE minimization, lab draws, and regulatory compliance. Removed Manual Vaccine Documentation Process. Increased Number of Flu Vaccines. Easier ability to generate daily reporting at micro and macro Level. Delivered on-Time & on-Budget flu and covid event for 2022.

- Describe any problems and failures that you encountered in delivering your services, how these were resolved, and what were the lessons learned: None to this date.

- Client Name: MCO Marin (Regional Medical Center That Serves State and Local Government Entities)

- Project Description and Goals: Eliminate manual process for registration, scheduling, provider vaccine documentation and reporting vaccines to state immunization registry. Goals were to provide a streamlined solution for patients to register to receive flu and tb skin tests in the most consumer-friendly manner. Additionally delivered to provider administering vaccines and tb tests, the easiest and quickest workflow to ensure large volumes of patients could be handled.

- Solutions Used: TrackMy Verivax was the solution proposed, same as the one being proposed for VISIT

- The Functionality Included: TrackMy provided the web access, mobile friendly access, registration, online scheduling, vaccination administration technology system, TB test tracking, complete with required regulatory reporting to the state IIS, inventory tracking, end user support and call center work. The solution was implemented in July 2022, currently being used, and contracted to be used until 2027

- Who Hosted the Solution: TrackMy's software is securely cloud hosted by Amazon Web Services.

- **Your Project Role:** Implementation of software, delivery of software, end user support for software, project management of software, call center support for software, advisory services for public health reporting.
- **Duration of the role:** The solution was implemented in August 2022, currently being used, and contracted to be used until 2027
- **Whether the solution has been implemented:** Yes the solution was implemented in August 2022, currently being used, and contracted to be used until 2027
- **Project Results:** TrackMy delivered a state of the art solution for the organization. As a result they were able to deliver multiple public health vaccine and tb testing events throughout their respective county.
- **Describe any problems and failures that you encountered in delivering your services, how these were resolved, and what were the lessons learned:** None to this date.

- **Client Name:** Healthcare IT Leaders (Consulting Firm for State and Local Government Entities, a Healthcare provider)
- **Project Description and Goals:** TrackMy is/has providing vaccine verification and compliance tracking, test result administration and tracking, Robust Regulatory Reporting, Online Scheduling for Vaccine and testing (Flu, Covid, etc), Provider Vaccine Administration Documentation, Provider test result administration documentation, State test/Vaccine Administration Reporting & Inventory Mgmt., lab test integration, test label printing, Digital Waiver/Consent Forms, Surveillance tracking. The solution was implemented in January 2021, and is continuing to be used successfully to date, with TrackMy delivering additional functionality per our request ongoing.
- **Solutions Used:** TrackMy Verivax is the solution being used, same as the one being proposed for VISIT
- **The Functionality Included:** TrackMy provided the web access, mobile friendly access, registration, online scheduling, vaccination administration technology system, TB test tracking, complete with required regulatory reporting to the state IIS, inventory tracking, end user support and call center work.
- **Who Hosted the Solution:** TrackMy's software is securely cloud hosted by Amazon Web Services.
- **Your Project Role:** Implementation of software, delivery of software, end user support for software, project management of software, call center support for software, advisory services for public health reporting.
- **Duration of the role:** The solution was implemented in January 2021 and is currently being used.
- **Whether the solution has been implemented:** The solution was successfully implemented in January 2021.
- **Project Results:** TrackMy was leveraged as the technology across several testing and vaccine verification clinics across higher education institutions. As a result, employee and students were able to return to facilities more quickly and safely during covid-19 pandemic.
- **Describe any problems and failures that you encountered in delivering your services, how these were resolved, and what were the lessons learned:** None to this date.

- **Your M&O experience for similar systems, especially with respect to your proposed solution. Include the following information, at a minimum: infrastructure management, application monitoring, incident management, access management, helpdesk, business continuity, and disaster recovery:** The following information can be reviewed within TrackMy's Security Questionnaire report located at the following link [here](#), and in Appendix Folder on Flash Drive, document titled - TrackMy Solutions Security Questionnaire - updated 6-21-2023, along with detailed information for each requested item in the Proposed Solution section below.

- Your role and experience with OCM activities for similar projects, especially with respect to your proposed solution: TrackMy has over 100 years of OCM experience with similar projects across healthcare both public and private sector. Our Organizational change management focuses on the people-side of the implementation. In our experience, user acceptance and system utilization are best achieved through not only training that addresses system functionality, but also applies users' existing knowledge and skills to the new system, and illustrates the value of positive organizational change (e.g., faster data capture, streamlining tasks, etc.). As applicable, the process includes procedure review, redefinition, modification and reintroduction, along with targeted materials and training to assist and encourage staff in adhering to new processes.

- Any formal corrective actions that your company has experienced under previous contracts: TrackMy has and does not foresee any formal corrective actions under any previous contract(s).

4. Proposed Solution

1. Describe the solution you plan to use to meet the VISIT requirements as described in Attachment L, sections 3, 4, and Attachment N, including but not limited to the specific elements highlighted below:
 - a. Whether you are proposing to use a commercial-off-the-shelf solution, or a transfer solution from another client, with specific details about the proposed solution.
 - b. If you are proposing a solution with system components from different sources, vendors, or projects, please describe how your solution will integrate the component pieces and the type and functionality of each.
 - c. A roadmap for the proposed solution.
2. Hosting
 - a. Your contractor-hosted model. Explain the hosting solution and the location.
 - b. Location of the proposed data centers and who will own the data centers (will you be subcontracting, if so, to who).
 - c. Any remote operations for the data centers you propose to employ.
 - d. Details of proposed redundancy.
 - e. If the servers that are proposed in this response are shared among multiple customers, or if the servers proposed are for a sole customer.
 - f. Your proposed load balancing for your customers, within each datacenter as well as between primary and secondary data centers (if applicable).
 - g. Details about public and private subnets in the proposed infrastructure design.
 - h. Explain how the State (e.g., the IDOH Data and Analytics team) can have direct access to their raw VISIT data to connect to and extract data through an API or other interface for reporting and other needs.
3. Provide a high-level architectural diagram(s) and associated details of hardware/infrastructure required for your proposed solution, including backup and disaster recovery.
4. Describe your proposed method to meet, as well as any experience you have had with, the security requirements as detailed in section 4.2 of Attachment L. Include, but do not limit to:
 - a. Security (pertaining to personnel and technical) that will be used to ensure the State's data and patient health information is not accessed or shared in an unauthorized manner.
 - b. Who will have access to State data.
 - c. Encryption standards that will be employed.

- d. How the Contractor will perform and ensure that the VISIT system passes application security and vulnerability tests
 - e. Confirm that any data provided by or for the State remains State property and may not be marketed or sold by the respondent without express written State consent.
5. Explain any capacity limitations for your proposed solution (e.g., a maximum number of vaccine appointments).
6. Explain how your proposed solution conforms to the State's Assistive Technology Standard and architectural standards, and/or a proposed timeline and plan to migrate to a form that does meet State standards in an agreeable timeline.
7. Clearinghouses
 - a. Explain what clearinghouses your solution can integrate with and what has your solution successfully integrated with.
 - b. If your organization provides clearinghouse services either through your own organization or through a partner, please provide details on these services and be clear which organization provides the service. Include how many clients you/your partner currently serve as a clearinghouse, the average volumes processed through the clearinghouse per client, and how long have you/your partner has/have provided clearinghouse services. Provide costs for the clearinghouse services in Table 4 of the Other tab in Attachment D - Cost Proposal. The State may choose to include in the contract the clearinghouse services for VISIT's billing.
8. Complete Attachment N to demonstrate the fit/gap of your proposed solution. If there are requirements that your solution cannot meet prior to go-live, explain the alternative solution and provide an estimated timeline for the requirement to be rolled out. Confirm you shall modify or configure your solution to meet all functional and technical requirements prior to the Statewide Implementation, or the Pilot Implementation, if you are proposing a Pilot.
9. Explain how your solution will integrate with interface partners (e.g., API) and if you have experience integrating your solution with the non-IDOH specific interface partners and platforms (e.g., Mulesoft) listed in Attachment L Section 4.3.
10. IOT Data Exchange and IOT Security recommends that secure data transfer efforts should be focused on utilizing MuleSoft / GoAnywhere (option dependent upon complexity of file transfer) or OneDrive for IDOH to facilitate secure file transfer needs. Elaborate on how your company's solution will accommodate the utilization of the identified technologies. If the proposed solution does not support these technologies, explain in detail why and outline the proposed alternative.
11. Describe any non-mandatory functionality, among or beyond those listed in Sections 3 and 4 of Attachment L and Attachment N, which your solution can provide at no additional cost to the State, and which may be beneficial to helping IDOH achieve its programmatic goals.
12. In addition to the patient facing functionality (e.g., self-scheduling), registration, vaccine administration, and provider administration features, what other functionality will be available on mobile devices?
13. Additional Terms and Conditions related to Cloud-based systems the State expects to execute with the successful Respondent(s) are provided in Attachments B1, B2, and B3. Depending on your proposed System, you could be required to agree to one or more of the following sets of Additional Terms and Conditions:
 - Attachment B1 – IOT Additional Terms and Conditions - Infrastructure as a Service Engagements (IaaS)
 - Attachment B2 – IOT Additional Terms and Conditions - Platform as a Service Engagements (PaaS)

- Attachment B3 – IOT Additional Terms and Conditions - Software as a Service Engagements (SaaS)

Please indicate in your response which of these sets of Additional Terms and Conditions you believe applies to your proposed System. Review these Additional Terms and Conditions and indicate acceptance and / or any redlined edits, via Track Changes. It is the State's strong desire to not deviate from the Additional Terms and Conditions that are provided in these attachments and as such the State reserves the right to reject all requested changes. Any or all portions of this RFP and any or all portions of your response may be incorporated as part of the final contract.

14. Review and respond to the questions included in Attachment M, Cloud Questionnaire.

15. Review the State's Information Security Framework and either confirm that your company conforms to the policy or provide explanation to the areas for which your company does not conform. A link to the instructions for accessing the Information Security Framework can be found here: <https://www.in.gov/information-security-framework/>.

Proposed Solution: The solution we are proposing use of, to meet the VISIT requirements as indicated in the Scope of Work (Sections 3 and 4), is TrackMy's commercially-off-the-shelf platform solution - TrackMy VeriVax (TrackMy). We pride ourselves on continued enhancement of our technology platform through valued organic feedback from partners, clients, and users - and can easily localize a UI experience to meet future needs as we seek constant-optimization.

TrackMy is an end-to-end vaccine management solution for the tracking, data capture and reporting of immunizations through secure Cloud technology. The solution provides a fully interoperable technology stack that supports scheduling, point of administration data capture, inventory management, VAERS, dosage reminders, third-party Billing integration, State Immunization Registry integration, and even the creation of a unique eVaccine Card (Passport/Healthpass).

TrackMy supports patient scheduling and follow-up reporting; patient check-in for vaccination; barcode scanning for faster administration and more accurate data capture (in certain workflows); data sharing with EHR/EMRs, State Immunization Registries like CHIRP and other information systems using HL7, API or web-hooks; digital Patient eVaccine Card and more; management and monitoring of inventory and dosages; and secure connections for third-party Billing.

TrackMy is a secure, end-to-end Vaccine Management solution built on the Amazon Web Services (AWS) Cloud. The technology stack is built within secure, compliant and scalable infrastructure systems, proven capable of handling millions of simultaneous transactions. All services in the stack, including the Unique Identifier and Inventory Management Service, Patient Registration and Check-in, Appointment Scheduling and Capacity Scheduling, Reminders and Record Data Repositories and Billing Systems are Cloud-based, interconnected and integrated.

The following details are how we meet the discrete requirements, plus additional benefits of TrackMy (and responses to all questions above):

TrackMy Overview per Section 3 Scope Requirements

Public Facing Application Requirements -

TrackMy has the capability to facilitate patient registration in multiple ways, including manual self-registration, Single-sign on integration registration, family registration, help-desk registration, walk-in/clinic registration, segmentation for private-event registration via localized URLs, templated upload registrations in bulk. A simple patient registration includes capture of the following discrete fields (additional required fields may be discussed and added to) - First name, last name, DOB, Address, Phone number, race, ethnicity, and Insurance information. Capturing these details at registration allows a provider to communicate with the patient through email, text, phone, or mail (as they can access this

information via a provider login, and patient search). The capture of insurance information allows for processing insurance claims and billing (notated further within).

TrackMy is a public use tool, we stand-up unique web application URLs for every one of our clients. We allow a public user to create a patient user (and/or organizational user accounts) account via the prior registration options, that allows a user to access their appointments, test results and immunization history, among additional items like accepted consents, health history forms, immunization education, help topics etc. Through building an integration with Access Indiana, we can allow a user to seamlessly navigate back and forth between, or single-sign on from Access Indiana (if available). We can allow a user to register as an actual patient, or a guest account as necessary - and can localize the workflows for each user type as appropriate. Once a user has registered, they have the option to select desired services through accessing online scheduling within TrackMy via a "Schedule/Go-To Appointment" button. This process flow allows us to localize a set of eligibility questions (ie - capture insurance information, health questionnaire) to ensure that the service selected is an appropriate service offered and available for the user. Rules can be executed to halt a user in the process flow, depending on answers to questionnaires etc. Through TrackMy Online Scheduling, we have the capability to align services offered to a location, and as a user is navigating through eligibility/questionnaires serve up the locations that only offer those particular services. TrackMy will work with IDOA to understand challenges around the 'search for service location'/search criteria, and custom-develop an improved search bar/function to allow for a better UI experience for users searching for available services. Once a service type is selected, a user will see available appointment slots for that service, at a selected location. For public (non-patient account) users, a direct login to scheduling only can be established in which all available service type appointment slots per location can be displayed. Once appointments are scheduled, the user will receive an appointment confirmation email, and allow them a link to the appointment to be able to cancel or reschedule the appointment.

Scheduling Solution

TrackMy delivers a fully-integrated scheduling solution, via our partner VSee. The user never leaves a TrackMy UI to schedule appointments, and all data generated in VSee is stored in the US following our same security guidelines and processes. This flexibility allows us to parse out back-end scheduling instances per clients, and allows for additional setup and preferences at the client level, all accessed through a SSO connection to VSee.

TrackMy allows help-desk registration, walk-in registration, and private-event registration. For help-desk, a help-desk user account can be established (through a provisioning process) allowing the user access to search for available services and locations, then manually register a patient for selected services during a phone call. A walk-in registration, is the same as a manual self-registration - if a patient presents that has not yet registered, they can either self-register via a kiosk, smartphone, or laptop available onsite - or a clinic user can aid the patient through the process as well.

For private-event/special event registrations, we have some options on how to best deploy registration and it starts with understanding the need to have a segmented client/event dataset. We can deploy a custom URL web-application for a private event, and allow for self-registration or bulk-registration through that means to the custom URL, or look to allow for existing web-app/URL site registration and add a tag during registration via an Event drop-down selection.

Provider Facing Application Requirements

TrackMy today allows for a clinical user role to be created, and that controls what functionality and workflows a clinical user has access to. We establish the baseline criteria/certification for a clinical user with our client, and authorize clinical access per that criteria.

We offer a simple, streamlined check-in process - in which a clinical user (or front-desk user) can ask the patient for their name, DOB, etc - search for the person in TrackMy and then (if applicable), trigger a series of questions, such as confirming insurance information is captured correctly, confirming demographics, asking for any allergies related to prior immunizations, and any other health related questions that are desired to be built. Once this information is confirmed, and updates can be readily made - a user is checked in, and typically instructed to wait in the designated waiting room etc.

A Clinical User in TrackMy has access to our vaccine administration module, in which a clinician can search for the patient, select the immunization they are administering from a controlled drop-down lot number list (list is controlled and managed through TrackMy Inventory/Drug Lots functionality), select vaccine site, confirm manufacturer, and click save. Once saved, the vaccine is 'administered' and the administration data flows to the patient's TrackMy portal account, and to the appropriate State Immunization Information System (IIS). Today, TrackMy leverages a partner - IronBridge to complete the data submission to the State via an HL7 interface, with this project - we will work with our partners Corvano (that work with the State of Indiana today on other interface projects) to establish data submission through a MuleSoft API gateway.

In addition, a clinical user has access to TrackMy Test Results functionality. This allows a clinical user to immediately document any rapid type tests (ie - COVID Rapid Antigen, TB Skin Test), and document appropriate test administration data. Also, for client-dependent needs, TrackMy establishes an HL7 interface with Laboratory Information Systems (LIS) - this allows a clinical user to start a test in TrackMy and send the test to the lab for processing (an orders out/results in HL7 interface). For this project, we will complete the LIS integration through work with Corvano leveraging the MuleSoft API gateway as requested. Once a test result is received back into TrackMy, we can alert the individual patient user via email that they have a result to review in their portal (ensuring not to expose any PHI via email).

Also, a clinical user can assist patients with scheduling future appointments through TrackMy via a patient mirroring process we have deployed today.

To end a patient visit, a clinical user can check the patient out through educating the patient around the TrackMy portal, what data exists within, and how a user can access it. If a print-out post visit summary is required, we can deploy a process that will allow a clinical user to print a copy of a post visit summary and hand to the patient, or send them a link to one via email/text (if number is in their profile).

Clinic Management

Through TrackMy Scheduling (TrackMy partners with VSee for on online scheduling today, users access the TrackMy integrated scheduling instance of VSee via Single Sign-on, and never leave a seamless UI experience), an administrator user can build out any number of clinic locations required, in which services are offered. They can update settings specific to that clinic location, such as clinic name, address, operating hours, number of appointments available in particular slots, etc. The administrator role can add users, such as clinical users, analyst users, front-desk users, etc. We have the capability to tie all functionality within TrackMy to a particular role, or limit as well. Appointment cancellations can be done on a single appointment basis or a bulk cancellation (ie - due to inclement weather). Upon cancellations, email communication is automatically triggered to the patient users - offering education and how to reschedule their appointment etc. If a patient misses an appointment, a report can be generated (of flagged missed appointments) and patients can be notified at the close of business.

Billing

Today, TrackMy partners with Health Recon Connect (HRC) and their billing clearinghouse platform. Insurance information (as prior mentioned, and eligibility questions) are captured in TrackMy, and we send patient demographic, and insurance information downstream to HRC via secure SFTP processing, and they submit all claims. We have a robust data ops process built, that looks for 'inaccurate' information, empty information etc, and we can communicate via email/support with a patient user to correct/update any inaccurate/missing information we find, prior to processing a claim - in order to increase our accuracy it will get reimbursed. In order to submit claims, and have a high likelihood of reimbursement, part of our billing implementation project is to establish provider credentialing as early as possible - and ensure a billing provider is credentialed with federal payers (CMS, Medicare/Medicaid) and the top 3-5 private payers in the region and/or in which our clients have insurance through. In addition, banking accounts are established and proper received reimbursement processes are set up. For our partner billing service, a percent of successful paid claims is established and deducted through the received reimbursement process (note - we processed over 300,000 successful COVID vaccine and testing claims in partnership with HRC at County of Bucks, and other clients across 2021 to date). If a claim is rejected or denied, all data is reviewed, and if an inaccurate piece of data is found, it can be corrected by the patient user and a claim resubmitted.

Payment notifications will be received on successfully processed claims, and any billing reconciliation can take place by Billing Agents etc.

Billing administration users will be granted access to both TrackMy (to view patient demographics, services completed, vaccine/testing administration data etc) and the HRC Billing Platform. Within the HRC Billing Platform a Billing administrator user can -

- Review Claim Detail - today, in TrackMy upon successful vaccine administration for example, a claim is auto-triggered to be sent to the billing clearinghouse for processing (as data goes through our DataOps process to ensure cleanliness etc) - if the State would like to put a stop-gap process in place to review claims prior to sending to the HRC Billing Platform for processing, TrackMy can add this as an enhancement/localization option. All Claim detail can be reviewed within the HRC Billing Platform
- Prepare to Transmit: If the State chooses to request a stop-gap process be added prior to auto-claim processing, then a process for a Claims Agent to review the claim data and indicate that it is ready to be transmitted may be added

- Review Rejection: As part of our standard operating process the HRC team (as part of our service offering) reviews all rejections, works to clean up any missing data elements and reprocesses claims

- Review Denied Claim: As part of our standard operating process the HRC team (as part of our service offering) reviews all denials, works to clean up any missing data elements and reprocesses claims

- Receive Payment Notification: All payment notifications can be reviewed within the HRC Billing Platform

- Post Payment: Payment posting is part of our standard operating process, payments are matched against claims and posted to specified setup accounts.

The HRC Billing Platform meets all requirements specified in this RFP, including ability to send 837 files, ability to receive payment notifications (835), ability to accept electronic remittance advice (ERA), follow ANSI-X12 protocol, and adhere to future Federal guidelines to submit claims.

Although the State does not plan to accept direct-payments from patient users, TrackMy does have the capability (if of assistance in the future) - through a payment integration with Stripe - to receive payments from users directly via credit card.

General Application Requirements

As previously mentioned, TrackMy offers role-based security across our application. Roles define the available functions of a user. Administrator users are able to configure a number of components that create a definition of who has access to which aspects of the platform. An individual user can have

multiple roles assigned to them. TrackMy can confirm that all requested roles from the State can be setup in the system, including public user, clinical user, help desk agent, vaccine administrator, testing administrator, clinic administrator, claims agent, claims administrator, full system administrator, reporting analyst/administrator.

TrackMy has built in audit capabilities to track front-end and back-end access actions, in line with our SOC2/Type2 Compliance requirements.

TrackMy is a mobile-friendly web-application, and based on experience in delivering technology to healthcare institutions, state and local government and individual users - a web-application is more scalable, more user-friendly, feels more secure to users, and avoids extra steps with downloading an application. This noted, if the State wants to deploy a mobile-application via Google Play/Apple AppStore TrackMy can add this to the project as an enhancement. We have deployed applications via Google Play/Apple AppStore in the past for other instances of TrackMy technology.

TrackMy has a robust process for receiving and storing any scanned/uploaded type documents. We can push uploaded documents into review queues (ie - consent forms, medical evaluations) and allow user access to all stored forms. Billing documents can be stored as well, and access be made available through the administrator roles.

TrackMy has functionality to support any questionnaire type workflows, including eligibility management, health questionnaires etc. All questions are configurable and maintained by a system administrator through a central admin page for rapid deployment.

Configuration management, and rapid deployment are key success factors within the TrackMy platform. Our solution was built with scale in mind, and allows administrator users to configure the platform best for their needs, and when changes are needed to simple things like questionnaires, exemption forms, they can be made by the administrator user and deployed quickly. During implementation, the TrackMy platform can be set up quickly through well-configured modules.

Interface Management

TrackMy designs for secure interoperability as much as accessibility. TrackMy supports HL7/FHIR integration with a range of State-level Immunizations Information Systems (IIS), for example including direct connections with the Commonwealth of Pennsylvania's PA SIIS, the State of Nevada's IIS, and the Commonwealth of Virginia's VIIS, and indirect pharmaceutical partner connections with dozens more. The TrackMy platform overall also supports HL7 as well as .CSV connections for Electronic Lab Reporting, including in Georgia, California, Virginia to name some examples - and will have no issue implementing the interface requirements noted in this RFP.

Further, TrackMy has partnered with Corvano to work on this project, and streamline interface management. We plan to primarily deploy a MuleSoft API Gateway that will allow us to interface with the required interfaces listed in section 4.3. Today, TrackMy has a set of APIs (FHIR format) to exchange data with upstream and downstream partners. For any interfaces outside of MuleSoft's capability, TrackMy fully supports HL7, FHIR API, SFTP, SSO integration protocols.

Inventory Management

TrackMy offers inventory management today through our Drug Lot functionality - for vaccine administration. Individual Lot numbers (and additional identifying vaccine information) of vaccines are added to the Drug Lot page, and associated to certain locations. This then allows the lot number to be visible in the Lot Drop-down box within Vaccine administration workflows. Inventory per location is a great feature, as we can control what vaccine is going where and improve tracking processes. TrackMy will work with IDOH to add HIV/STD inventory tracking, and determine the appropriate level of tracking required.

Reporting Management

TrackMy offers a robust set of reports, and can add additional reports on request - or build custom reports as an enhancement. All data elements documented within TrackMy are a reportable data element, and have a means to be pulled into a report as-required. All reporting is accessible through our reporting module and examples include standard reports such as:

- Immunizations - doses administered, inventory
- Testing - tests administered, test results, print test labels
- Scheduling - number of appointments scheduled, appointments canceled
- Billing - (all reporting done through the HRC Billing Platform) - rejections, denials, claims paid

If requested, TrackMy can set up a tableau instance (as an enhancement) to allow for dashboard level reporting - ie - outbreak zones, outbreak management, vaccine rates across the State, maps etc.

TrackMy can allow certified, authorized IDOH users back-end access to a SQL server instance for ad hoc reporting. We would discuss this, and set up read-only table access (vs insert/delete/update) if appropriate.

TrackMy has several alerting and notification capabilities, including appointment reminders, results received, welcome emails, text confirmations (if a user opts in for text messaging) etc. Additional notification options may be discussed as enhancements.

TrackMy allows users to upload and/or attach files to patient records. We can handle a range of files (PDF, Word, and JPEG, etc.) and do not limit the number of documents that can be uploaded. We offer version control on files, and timestamp when files are uploaded for tracking/viewing (for search of timing etc - for additional metadata/direct search TrackMy will work with the State to determine appropriate setup). Patient-level files include forms, consents, vaccine education, questionnaires. System-level files can be established on a needed basis.

TrackMy Overview per Section 4 Scope Requirements

General Technical Requirements

TrackMy is a commercial-off-the-shelf solution, and needs limited customization to meet outlined system requirements - it can be configured to deliver a streamlined experience for the State. TrackMy is hosted in the AWS secure-cloud, and within appropriate regional data zones (all within the US). TrackMy can set up a direct connection to the State on-premise IDOH systems (LIMS, CHIRP and LDF for data exchange) and allow direct access to raw system data to connect to and extract data through an API or other interface for reporting and other needs. The TrackMy platform has been built with future-proofing in mind, while we cannot guesstimate what will happen in the future, our platform is built with the utmost scale in mind - so that if quick enhancements need to be deployed to production (like within the height of COVID, and constant-changing eligibility requirements) on a weekly basis (or daily as-needed in emergent situations). The system can support varying users of all types, and has been built with leading UI/UX principles in mind, with the overarching goal of simplicity and ease of use. The system today offers eSignature, and can capture eSignature for consents, declinations, attestation forms etc. We deploy standard operating procedures to support users.

Security Requirements Standards

The TrackMy platform complies with all applicable privacy and security requirements, and with security always top of mind we have progressed to achieve ongoing SOC2, Type 2 compliance (letter of our recent certification can be found [here](#), and in Appendix Folder on Flash Drive, document titled - Confirmation of Opinion. TrackMy Soc2 Type2 certification letter). We plan to continue to gain additional certifications that include HiTrust in the future. The TrackMy platform is HIPAA compliant, and we are happy to

execute a BAA with the State. TrackMy follows the NIST Security framework, and with this project will plan to pursue a FedRAMP Moderate certification. In addition, TrackMy has signed an MNDAs and requested the Indiana Information Security Framework created to review and ensure we exceed the framework requirements and plan for any localization items needed. TrackMy accepts all Confidentiality clause requirements as required. As part of ongoing SOC2, Type 2 compliance we will perform application security and vulnerability tests, along with maintaining appropriate auditing controls. There are current built in security controls, examples include automatic timeout and logoff of users based on inactivity, minimum password requirements. We understand the importance of security, as such deploy multiple strategies to ensure PHI is protected. Information transported through the portal remains secure regardless of how a user is connected (ie through ethernet, web-browser, wirelessly). We encrypt (256-bit) all data in transit and at rest. User registration, authorization will be managed in TrackMy, yet roles will be credentialed and agreed upon by the State. To view additional InfoSec type information, link here to our [Security Questionnaire](#), and in Appendix Folder on Flash Drive, document titled - TrackMy Solutions Security Questionnaire - updated 6-21-2023)

Partitioning in Multi-Tenant System

TrackMy prides itself on our role-based security, and only showing the minimum amount of data for a role to achieve the desired outcome. Workflows, data, reporting are all partitioned off through role-based security. TrackMy and the State will agree on all roles and permissions, and when new administrator users get registered they will go through a sign-off/credentialing approval process.

Data Integrity

TrackMy prides itself on Data Integrity, and we work tirelessly to ensure proper data is captured and cleansed (error-free) as we process required transactions. Our platform is hosted on AWS, in which we have built processes to ensure 100% of data is available, with no loss of data. We have automatic backups, disaster recovery processes etc - all to ensure compliance, and meet/exceed our SOC2, Type2 compliance. All data is stored and captured in a secure platform (AWS), which provides automated, geographically dispersed disaster recovery within the United States. Our servers are hosted in a secure datacenter and are replicated daily to a secondary datacenter in the U.S. (for backup purposes). We have existing data recovery processes should failures happen. TrackMy has audit controls in place to capture and produce data event logs to display key events across the system.

Multi-Platform Capabilities

The TrackMy platform is accessible through computer internet browsers (we test on the top 3 used across the nation) and on mobile and tablet devices running Android or iOS. The system is mobile-friendly, as most of our users access the platform via their mobile phones.

The TrackMy platform today is a scalable mobile web application. TrackMy will build a resident mobile application per State request, to be able to access the application via the Google Play or Apple App Store - we have experience in building and releasing mobile applications, yet due to user feedback and client feedback around ease of use of web applications, we have focused our efforts there.

Multi-Tier Functionality and User Roles

TrackMy offers Role-based security, and allows features and functionality to be unique per user role. We support the various user types as noted in Section 3.3, and can add additional localized ones per request as we have a configure privilege process per user type. We support user sign-on authentication through single-sign-on, using SAML - and will build this to connect with Access Indiana. All roles, and users in those roles will be reviewed and approved by the State.

TrackMy has reviewed Attachment N - Functional Requirements Matrix in detail, and indicated which scope items are existing, customization required, planned or N/A. For any customization required and planned items, we have included the Level of Effort and would like to further discuss these with the State - to ensure we deploy custom items in the most scalable and efficient manner.

TrackMy's product/development roadmap can be viewed at the following link [here](#), and in *Appendix Folder on Flash Drive, document titled - TrackMy_Roadmap_6.25.23*, we manage our roadmap within Monday.com and feed updates through to Jira.

Hosting

TrackMy technology resides on Amazon Web Services (AWS) cloud infrastructure and leverages the full breadth of AWS programs to create the most secure, world-class, cloud-architected solution, meant to fully enable public health organizations, health systems, private employers, schools and other organizations. Using AWS Cloud-based servers for its architecture, TrackMy Solutions infrastructure components interacting with customer data are hosted within the customer's region in compliance with geolocation requirements (i.e., in the United States). Production systems are similarly geo-replicated. In addition, for high availability, application servers are hosted behind AWS Elastic Load Balancers (ELB) with automatic failover in the event that server capacity, scalability or system issues occur. All server instances are designed to failover user sessions automatically. TrackMy's Network Architecture can be seen at this link [here](#), and in *Appendix Folder on Flash Drive, document titled - TrackMy Solutions Network Architecture*.

TrackMy works closely with a dedicated AWS Account Manager, aligned under the AWS government technology (*GovTech) organization (**Companies who are innovating to improve the lives of state and local citizens and accelerating the development of scalable and secure technology solutions with Amazon Web Services (AWS). With dedicated business and technical resources to support growth, AWS supports GovTechs to start, expand, and optimize their business.*). TrackMy has also been engaged with AWS GovTech Start, an accelerator program designed to help eligible U.S. companies build the next generation of technology solutions for state and local government agencies using the AWS Cloud. The accelerator enables AWS GovTechStart participants to scale faster with tailored benefits like access to technical training and support and a national community of GovTech experts. Alongside the GovTech support, TrackMy is engaged with AWS' subject matter teams meeting regularly with the AWS Health and Human Services Team for both business and technical development. The TrackMy team has been engaged with an AWS Partner (Effectual), in an effort to become an official AWS partner. As a part of this process, TrackMy has achieved a well-architected system around pillars of security, reliability, costs, and performance.

The system uses role-based security. Users are assigned a role, which determines views and access to systems and to specific data types within the system. End user accounts are established depending upon the role the user is accessing the system. Patient/participant accounts are managed within the system. Admin accounts must request access from a qualified site administrator. TrackMy will work with IDOA stakeholders to determine appropriate permissions and admin preferences required for the project. Based on role and security level, individuals would have access to extract data through an API or other interface for reporting and other needs. Additionally TrackMy does have a standard set of reporting tools if the State would need those to meet needs. Furthermore, TrackMy does provide customer report writing services, if the State finds it easier and more efficient to outsource any reporting needs. TrackMy servers are managed together in a central AWS instance. Client servers can, at times, be split off for performance optimization and client requirements.

A high-level architectural and data-flow diagram can be viewed at this link [here](#), and in Appendix Folder on Flash Drive, document titled - TrackMyVaxIndiana - TrackMy Dataflow Infrastructure.

Disaster recovery processes include -

- Disaster Recovery tests are performed from backup data restores annually.
- Automated deployment scripts are used for every code deployment, update and patching. These aspects of the disaster recovery plan are tested on a weekly basis.
- Recovery Time Objective (RTO) is 4 hours

Business Continuity processes include -

- Failover will occur automatically when a server is discovered to have issues and no longer able to host client connections. Using AWS Elastic Beanstalk, in cases of a failover, a new server will automatically be spun up and relaunch all applications from the failing server.
- Data recovery/rebuild will occur automatically from our primary RDS to a secondary RDS instance in the event of a primary database corruption or failure.
- TrackMy Solutions has the following cybersecurity insurance policy in place: TrackMy Enterprise Cybersecurity Policy sponsored by The Hartford Insurance Group.

To confirm (per question 4 in this section), all data provided by or for the State remains State property and may not be marketed or sold by TrackMy without express written State consent.

There are no capacity limitations for our proposed solution (per question 5 in this section)

Accessibility - TrackMy complies with State's Assistive Technology Standard by following the current WCAG version, and is ADA compliant - see report [here](#), and in Appendix Folder on Flash Drive, document titled - AccessiBe ADA Compliance Audit-11-9-2022. TrackMy has included all costs and expenses associated with compliance with accessibility requirements. TrackMy does not require any exceptions with compliance.

Billing Clearinghouses - as prior shared above, TrackMy partners with Health Recon Connect (HRC) to offer full end-to-end billing processes, from insurance capture through to receiving payments for claims and posting cash. The cost of services (8% per paid claim) is indicated in the cost proposal sheet, and encompasses all technology and services. TrackMy and HRC have partnered on processing over 400K+ successful claims. HRC as a business has 250+ clients, and is a national-leader in billing claims processing, processing \$1B+ in revenue dollars per year. Founded in 2016, and has over 1800 employees worldwide.

Non-mandatory functionality

As shared in the Executive Summary, a key differentiator in choosing TrackMy vs others is that we have the capability to deliver the 'appropriate standard of care' for immunization administration. Too many people are receiving immunizations blindly, without appropriately checking their immunization history first. At no additional cost to the State, with TrackMy, an individual user can query for their immunization history from the Immunization Information System (IIS) in the state in which immunizations were received (we have connections today in 45 of 50 States and growing). Through accessing an individual's vaccine history from the IIS, healthcare providers and individuals can determine which immunizations are due, which ones have been administered, and which ones are still needed. For provider and individuals, TrackMy AI ("AI") assists to determine immunization gaps, verifications, and new administration recommendations. AI can identify gaps in a user's immunization history. By

analyzing a user's immunization history and comparing it to current immunization recommendations, AI algorithms identify which immunizations are missing and recommend the appropriate course of action (ie – schedule an online appointment with the public health clinic to receive a missing immunization). This approach allows individuals and healthcare providers to make more informed decisions about which immunizations to administer/receive and when, helping to improve immunization rates and reduce the risk of immunization-preventable diseases - along with reducing duplicate unnecessary immunizations and increasing public health.

All TrackMy functionality is accessible through secure login via mobile devices (patient, provider, public use logons).

Additional Terms and Conditions related to Cloud-based systems

TrackMy has reviewed *Attachment B3 – IOT Additional Terms and Conditions - Software as a Service Engagements (SaaS)* and feels it applies best to our offering and proposal. We confirm acceptance of these terms and conditions.

TrackMy has signed an MNDAs and requested the Indiana Information Security Framework created to review and ensure we exceed the framework requirements and plan for any localization items needed.

5. Design, Development, and Implementation (Attachment L, Section 5)

Explain how you propose to execute Section 5 of Attachment L in its entirety, including but not limited to the specific elements highlighted below:

1. Your proposed Project Schedule to meet the timelines in Section 1.2 of Attachment L (Statewide Training and Data Upload Begins by April 1, 2024; Statewide Implementation completed by July 1, 2024).
2. Your general Systems Development Life Cycle (SDLC) approach for the DDI activities. The State is open to an agile or hybrid agile SDLC process to implement VISIT as well as to implement any fixes and enhancements.
3. The coding strategies/standards you will employ, including the process that will be used to ensure the most recent version of the application/code will be placed in escrow and made available to the State if needed.
4. How you will validate the requirements
5. How you will factor user interface (UI) and user experience (UX) considerations into the DDI work.
6. Your approach to executing the Data Conversion and Migration activities. Explain if you are proposing a phased approach or a one-time exercise, and what data you believe needs to be converted and migrated for a service continuity at go-live. Responses should include, but not be limited to, experience with data migration, an overall data migration plan, and testing plans for migrated data. Include details of any proposed automation that will be employed as part of the data migration and/or conversion activities.
7. Testing
 - i. Your approach to executing the Testing activities. Include how much automated testing will be conducted, and the proposed tools for automated testing.
 - ii. Provide a detailed approach on how you would confirm all data was migrated and how you would assure the accuracy of the records and data elements within those records.
 - iii. Describe if you have experience working with a client testing team or a third-party testing team contracted by the partner, and in what capacity.

- iv. Provide draft security testing, performance testing, and data migration testing plans
8. Your approach to the provider and LHD data upload (starting no later than April 1, 2024). Include details of whether the sites will enter the data into the system, transmit the data to the Respondent for upload, or some other means. Explain if you have successfully used your proposed approach with another client and the scale of that effort. Provide the timing for the activities related to data upload. The State prefers the data upload activity to begin sooner in order to maximize the amount of time to upload the data into the system.
9. The State is not requiring a Pilot Implementation. However, if you are including a Pilot Implementation as part of your proposed approach, please include a project schedule that adheres to the timelines in Section 1 of the Scope of Work. Please include details as to the methodology, number of sites, whether you have used a pilot with similar implementations, and the value the Pilot will offer the State.
10. Describe for each DDI activity what State resources are expected, for what tasks, and over what period of time.
11. Describe the risks you see in this timeline and how you plan to mitigate these risks.

Project Schedule

The implementation of TrackMy will follow a thorough Project Plan to fully replace the existing platform and deploy modernization with new functionality and accessibility. From the onset, successful kick-off and planning are vital in executing the product build, interoperability, and migration phases of the project. Each of these phases will be evaluated with clear goals and objectives that are regularly measured as the project progresses.

Key TrackMy Team members will lay the groundwork in collaboration with overall project personnel to ensure that all parties have the proper and agreed upon goals for the implementation. And product phases will be met with robust internal and external testing to keep the implementation on track and within budget. With clear lines of communication and defined roles and responsibilities, the Team will deliver a complete implementation and a world-class solution for Indiana Department of Administration (IDOA).

Proposed Initial Project Schedule, following our implementation methodology and approach can be viewed [here](#), and in Appendix Folder on Flash Drive, document titled -Project Schedule - IDOA VISIT RFP - TrackMy.

The initial Project Schedule reflects the following broad key project activities/phases:

- Kick-Off and Project Focus Groups
- Current Design and Data Structure
- Future Design and Customization
- Project Build
- Integration, Interoperability, and Accessibility Build
- Data Migration
- Project Build II
- Project Regression Testing
- Integration, Interoperability and Accessibility Testing
- Site Deployment – Statewide Training and Data Upload Begins
- Site Deployment – Go-Live
- M&O - Stabilization

To note on State recommended resource requirements per DDI activity/phase, see here -

-Kick-Off and Project Focus Groups

State resources - Executive Sponsor, Medical Director, CIO, Director of IT, IDOH Leadership - 2 hours for project kick-off, leadership discussion and KPI metric setting

-Current Design and Data Structure

State resources - Medical Director, CIO, Director of IT - 8-10 hours for current state discussion, high-level goal setting, data structure for migration

-Future Design and Customization

State resources - Medical Director, CIO, Director of IT - 6-8 hours for approval of future state workflows

-Project Build

State resources - N/A

-Integration, Interoperability, and Accessibility Build

State resources - N/A

-Data Migration

State resources - Director of IT - 2-4 hours, ensure alignment to expectations

-Project Build II

State resources - N/A

-Project Regression Testing

State resources - N/A

-Integration, Interoperability and Accessibility Testing

State resources - N/A

-Site Deployment – Soft Launch

State resources - Executive Sponsor, Medical Director, CIO, Director of IT, IDOH Leadership - 2 hours for project launch, KPI review, leadership discussion

-Site Deployment – Go-Live

State resources - Medical Director, CIO, Director of IT - 2-4 hours, ensure successful launch and post go-live support

The initial Project Milestones will be further refined with project scoping yet to start are:

-Defined System Implementation Plan

-Completion of Functional/System Design Document

-Completion of Data Conversion

-Completion of UAT Testing

-Delivery of End-User Training

-Delivery of Train-the-Trainer Training

-Successful Go-Live of Pilot

-Agreement on Formal System Acceptance

-Delivery of Disaster Recovery Plan

Project Risks - The largest risk we see today with this project, is around the customization required items. There are not many of these, as we plan to deploy a COTS solution to meet the IDOA requirements - yet if further customization and enhancements are required, the sole risk is to the project schedule timeline.

Implementation Approach -

To best ensure the IDOA engagement requirements are met, schedule and budget adhered to, the Team will implement the TrackMy platform solution according to a proven Implementation Methodology (IM), built on technical project management Best Practices.

Through the Implementation Methodology, engagements are led using applicable project artifacts and tools, e.g., Gantt charts detailing Deliverables, Milestones, expectations, etc. according to Project Work Plans, defined Project Schedule, Work Breakdown Structure (WBS) and Project Book.

WBS arises from Gantt charts, developed and maintained in Monday.com, and progress in completing tasks is continually tracked and reported using project documents. This includes reporting to the State, as well as the Project Management Office (PMO) for internal engagement oversight.

Overall, the Team expects to lead requirements gathering to ensure understanding of the IDOA's needs, as well as design, configure and develop (full SDLC) the solution, lead data conversion/migration, provide testing, training, implement the Pilot, leverage Lessons Learned in site roll-outs, and provide M&O support.

Project Kick-Off Activities -

Project initiation begins with an internal kick-off after Contract execution to formally introduce the engagement to the project team as well as senior management and members of the Customer Service and sales teams. As part of this organizational meeting, initial key Deliverables and expectations are reviewed along with the project structure and resource requirements to ensure a clean hand-off between sales and implementation.

As part of the Team's internal process, a list of key Team personnel will be produced, final résumés prepared as applicable. Owing to our focus on the healthcare and public health sector, the Team employs personnel security policies and procedures, including background screening as well as annual HIPAA training and will provide related attestation/documentation as requested after Contract execution.

Following such internal processes, typically an onsite (in Indiana) kick-off with project stakeholders and key Team members is planned and scheduled (with concurrence, owing to ongoing public health considerations, this can be a remote kick-off). Kick-off, including applicable project documentation, is to be presented with mutual agreement no more than thirty (30) calendar after the IDOA project begins.

Project Documentation and Reporting

Throughout the IDOA engagement, project activities are monitored, tracked and reported. This includes applicable project artifacts and documentation, e.g., Project Work Plans and Schedules updated as needed or at least monthly, project Status Reports submitted at least weekly, issue lists, and other such templates and tools. Such written reporting does not preclude in-person (face-to-face/email/conference call) Status Review meetings, proposed to take place at least every other week or as otherwise agreed. To organize and manage project documentation, we employ client-specific materials, e.g., Project Book or Project Information Library (PIL), including for example Project Work Plans and Schedules, copies of Status Reports, project orientation materials, configuration and design documents and templates, etc. as applicable. Material for this dedicated end-to-end project management is kept in a secure repository with access control to best ensure only authorized project personnel may view/manage the information.

Software Development Life Cycle (SDLC)

TrackMy development will follow an established SDLC process to turn the State's IDOA vision into reality, moving functionality from the ideation phase into requirements, design, development, quality control and on to Production deployment and support. This process is employed as part of the Standard Operating Procedure for all R&D projects, including development of enhanced functionality. Break/Fix items are outlined as well, but will follow a more expedited procedure and be evaluated based on size, scale and severity of issue.

Software Development Life Cycle figure can be viewed at - [here](#), and in Appendix Folder on Flash Drive, document titled -TrackMy Software Development Life Cycle.

Business Requirements Definition

Business Requirements define the “WHAT” is needed within the solution (e.g., a feature/ function enhancement), who is impacted by such development, and what the expected outcome of the enhancement will be. These requirements are written and described by the Business Owner requesting the change.

Using a Business Requirements template (available in the Project Book or PIL), detail definition may include the following as applicable:

- Where within the solution the change is being requested. If the enhancement will not be within a current framework, then design must also specify the addition of new screen(s).
 - What current functionality needs to be enhanced, if available and the expected outcome of the enhancements.
 - Business-related edits, checks or Rules that the solution will need to perform as part of the new enhancement.
 - Messaging, Alerts or notices required by the solution as part of the new enhancement.
 - What the purpose for the enhancement is and the intended audience (user base) of the enhancement.
- For the design request to gain approval and move forward, all Business-related Requirements must be completed before Technical Requirements can be established, and succeeding timeframes and deadlines presented. The subsequent Technical Requirements answer “HOW” the Business Requirements are to be fulfilled as defined.

Technical Requirements Definition

The Technical Team is responsible for determining if the Business Requirements document has sufficient information to proceed to a Technical Requirements document. With approval of the Business Requirements, the Technical Owner produces Technical Requirements. This document provides more detail into the technical components of each of the Business Requirements.

As applicable, this may include such items as:

- Codebase Requirements
- High-Level Technical Design Notes
- Potential Scheduling Process
- Testing Scenarios
- Database Changes Needed
- Migration Plans
- Data Conversion Plans

The Technical Requirements document is reviewed with the Business Owner, Technical Owner, and the solution developers to best ensure there is a clear understanding of the Business Requirements and Technical Requirements/solutions. Once approved by the Team, the Technical Owner will write a Development Ticket (Jira issue tracking and reporting) and set the priority of the requirements working with the Business Owner.

Development Resource Responsibilities

Developers are responsible for reading through the Business and Technical Requirement documents to best ensure a full understanding of what is required and the expected outcome of the enhancement.

Developers additionally evaluate the request and determine changes, if any, required to the environment to meet the needs of the business without over burdening the solution, the database, or the overall environment.

Should a Developer feel the solution to meet the Business Requirement will add undue stress to the system, then a discussion is needed, wherein the Developer, the Technical Owner and the Business Owner will determine if another solution or a change in the requirements is necessary to meet the needs.

Overall, Developers will:

- Evaluate code to determine the proper location of the changes necessary.
- Check out modules from the Master branch within our GitHub Repository.
- Write the necessary code within existing modules, or within new modules, to meet the requirements.
- Perform any and all Unit-level Testing required to satisfy the requirements as they are written within the Business and Technical Requirements documents.
- Write up any Technical Notes about changes made to the code base for the Technical Owner to incorporate in the overall Technical System documents.
- Deploy the code, schedules and tables to the Development environment for Quality Control (QC) testing by the Technical Owner and/or Business Owner.

Once the code is deployed to the Development Environment, the Developer will inform the Technical Owner and Business Owner of the migration and that QC testing is ready to begin.

If data conversion or data setup must occur before testing, then the Developer is to also complete that task prior to notifying the Technical and Business Owners.

Technical Resource Responsibilities

The Technical Owner is responsible for managing the workload of Developers and ensuring that documentation and testing is complete, and that the Business Requirements have been met to the satisfaction of the Business Owner. The Technical Owner is also responsible for prioritization of requests from the Business Owner and scheduling of deployments and migrations between the environments.

The Technical Owner manages the entire process from ideation through deployment and implementation of enhancements to ensure that the necessary steps have been taken and accounted for throughout the entire SDLC.

Once Development Environment testing has been completed and passed without outstanding issues, then the Technical Owner will update System-level documentation related to the enhancement while the Developer will deploy the code and related materials to the Production environment for implementation. This best ensures that technical documentation accurately depicts how the codebase is performing.

Business Resource Responsibilities

The Business Owner is responsible for outlining the needs of the business and what additional features or enhancements are required to win new business or provide additional support for clients. The Business Owner is also responsible for careful and thorough testing of enhancements to ensure requirements have been met and no unintended consequences of the changes have been created by the Developer making the enhancement.

Quality Assurance-Quality Control Testing

Software Quality Assurance effectively provides a project plan for testing, governing code and IP development-related updates, fixes, enhancements, and new code release. The main purpose is to describe the different phases of testing, schedules in which they will be completed and who will be conducting the tests. Such a plan is living, coordinating with other plans, and not intended to be comprehensive of all policies and procedures, which may be addressed by other plans. Overall, the Team is committed to holding itself and its solutions to the highest standard possible. This is frequently in addition to existing, and often too narrow, industry standards. The guidelines to be followed represent a “short list” of basic standards adhered to at a minimum. As standards evolve, and at the sole discretion of either a Federal regulatory body or our CIO/CTO, new standards may be evaluated and adopted.

Subject to change, the “short list” of minimum standards includes:

- Happy Flow Checklists.
- Automated Testing Scripts (where needed).
- “Third-Party Design Review” (in-house/external).
- Internal Review (per “phase”).
- Other Internal Checklists (used to validate Appropriateness of Test)
- Lean Six Sigma/PMP Review

Multi-Phased Testing Approach

Initial testing is performed by the Developer writing the code at the lowest logically-isolated level possible (i.e., items that don’t rely on any other systems). This Developer is best suited to perform such testing and can conduct the testing most efficiently. In the event that Developer is not available in a reasonable time frame, independent from the onus of writing the code, a third-party (internal or external) may perform this testing.

This is followed by Functional, Integration, Performance and other testing as applicable. With readiness, for User Acceptance Testing, we recruit sample testers representative of the real user base for the code in development to test. With our guidance, UAT testers walk through scenario scripts (unique scripts may need to be developed for Break/Fix or client-specific situational nuances). Once “Happy Flow” passes walk through, the Team also checks for policy compliance using applicable tests.

Typically, the Team will follow-up with actual TrackMy end-users for what is termed Post-Live Verification Testing no sooner than thirty (30) days post-solution Go Live for final adoption acceptance. Technical issues at this time are considered enhancements-Break/Fix and may thereby abide by new Scope and issue resolution (i.e., where a new round of development and testing is needed).

Plan. Do. Check. Act. This is the Quality Assurance-Quality Control mantra that governs all TrackMy solutions products and IP activities. The approach is intended to be a summary of how the applicable plans come together, i.e., how the QA/QC program works overall across our solutions. Should you have any additional questions, feel free to reach out to key personnel for more information.

Metrics and Performance Assessment

The Team assesses performance regularly to understand baseline and trending across defined quality objectives. As with standards, we are committed to high quality objectives. The guidelines to be followed represent a “short list” of basic objectives adhered to at a minimum.

As objectives evolve, and at the discretion of either a Federal regulatory body or our CIO/CTO, new objectives may be evaluated and adopted, including from Lessons Learned.

- 95%+ system uptime as measured by MTBF (Mean-Time Between Failures). The AWS-hosted Cloud platform, and having IDOA being supported by the Team, provides the IDOA with increased transparency into system status and higher uptime.
- # of Defects less than 5% (as a proportion of all activity).
- No less than annual code quality audit(s). This may include, but is not limited to: Halstead complexity measures, coding standard audits, alignment to code review BPs, and refactored legacy code (if needed).

Data Migration and Historical Uploads -

TrackMy's data conversion process is a multi-phase approach designed to utilize current system expertise to drive the best mapping approach. The data conversion team would meet with data architects, system experts from the front end and back end to get a baseline standard of data layouts and definitions as well as any historical references of relevancy as it relates to the data. The team would then request a first-cut of data for review and baseline understanding. This process would iterate a number of times based on the first review and understanding of the data. Each iteration would perform data validation (including possible data cleansing), reporting of results and review with the entire team for rules consistency and modifications (where necessary). The data conversion process will work in conjunction with all code modifications needed and when possible new data structures will be used during the mock data conversion process. Once the primary data mapping process is complete, the team will move toward data conversion timing and practice. The timing is important to determine when a system cut-over would be required and how much time will be available to convert the data from the existing platform onto the new solution. This conversion process will be tested a number of times to ensure proper data migration and full understanding of timing requirements.

6. Organizational Change Management (OCM) and Training (Attachment L, Section 6)

Explain how you propose to execute Section 6 of Attachment L in its entirety, including but not limited to the specific elements highlighted below:

1. Your proposed OCM methodology and approach and how it will fulfill the State's requirements while minimizing the disruption to the organization.
2. Your proposed communication strategy for this project
3. Your proposed training approach to ensure all end users (including Pilot end users if applicable) are trained on time to meet the State's training requirements.
4. Your proposed training delivery method and proposed model for instructor-led training (if relevant), as well as plans to update training with software updates.

Organizational change management focuses on the people-side of the implementation. In our experience, user acceptance and system utilization are best achieved through not only training that addresses system functionality, but also applies users' existing knowledge and skills to the new system, and illustrates the value of positive organizational change (e.g., faster data capture, streamlining tasks, etc.). As applicable, the process includes procedure review, redefinition, modification and reintroduction, along with targeted materials and training to assist and encourage staff in adhering to new processes.

With a steadfast commitment to facilitating effective organizational change management to improve customers' operational productivity and effectiveness, facilitate program interoperability, achieve compliance with standards and secure sustainable revenues, our methodology is guided by Business and Information Technology/Information Resource Management (IT/IRM) Transformation. Such a strategy offers clients a number of consequential benefits:

- Reengineering of business processes where operational needs drive IT

- Improved delivery of essential programs and services
- Increased data accessibility, security and reliability
- Compliant interoperability for reduced duplicative effort
- Cost savings with more streamlined and standardized processes
- Greater transparency and accountability to the citizenry
- Improved clinical, operational and financial outcomes

7. Disaster Recovery and Business Continuity (Attachment L, Section 7)

Describe your proposed approach to meeting the State's disaster recovery and business continuity requirements. Clearly affirm your responsibilities, procedures, and capacities relative to Business Continuity and Disaster Recovery, as defined in Attachment L Section 7. Include:

1. Periodic disaster recovery testing, including frequency
2. The location of the disaster recovery site as compared to the primary site.
3. The high-level disaster recovery activities to be used to restore the application, including timelines and ownership of those activities.
4. The maximum application downtime the State can expect once disaster recovery is initiated.

Business continuity and disaster recovery planning - Continuity of Operations (COOP) planning ensures TrackMy Solutions is able to continue or immediately resume performing the organization's critical business functions, which are the functions that support the organization's mission, comply with legal requirements, and support life-safety, under all circumstances. This includes natural, technological, and man-made incidents, as well as incidents that result in loss of access to parts of or an entire facility or loss of service due to equipment or systems failure. The benefit of COOP planning includes the ability to anticipate response actions following a myriad of incidents, improve the businesses performance of its critical business functions, and ensure timely recovery.

DR tests are performed at least annually and are performed from system data backups. Automated deployment scripts are used for code deployments and are tested/utilized weekly. Application servers are designed with High Availability in mind with failover and redundancy. Our current RTO is 4 hours. Data backups are performed daily and acceptable data loss is within the last backup period (less than 24 hours).

Third-party certification - TrackMy Solutions is HIPAA compliant. We have completed our annual SOC 2 Type 2 audit in November 2022. TrackMy selects security controls working with the Vanta security suite to adhere to HIPAA and SOC standards. Controls are reviewed at development to ensure fitness for purpose based on business requirements for each solution. We also incorporate feedback from external security audits and testing to ensure protection of data. Vulnerability and penetration testing is completed annually.

8. Maintenance and Operations (M&O) (Attachment L, Section 8)

1. Explain how you propose to execute Attachment L Section 8 in its entirety and describe all proposed tools to support M&O activities. Include a description of your company's proposed release management strategy and processes, as well expectations around frequency of new versions/patches; provide a release schedule if you are proposing regular releases.
2. Explain your capacity to provide surge support.

The Team offers M&O support services in accordance with Service Level Agreements (SLA), tailored to each client and mutually-agreed. SLAs typically define the support program and establish a baseline of service standards, commitments and escalation expectations – whether Go-Live support (e.g., hypercare), Help Desk, or multi-Tier (Tier 1, Tier 2 and Tier 3) support. Tier 1 support includes the Help Desk as well as Customer Portal. This front-line provides the first point of contact for support, and is responsible for logging issues, as well as providing base-level assistance. Standard Help Desk hours are expected to be at least on business days from 8:00 AM to 5:00 PM EST, excluding Integrative holidays. Extended hours and emergency support options are also available, per SLA. Most often Customer Support communications (calls, e-mails, online tickets) are answered on the same business day. As we value all customers equally, we do not tier support. Rather requests are triaged as received and responded to according to priority/severity. These combine to represent the level of impact on your operations and practice. The priority-severity-impact relationship is proportional. As one factor is heightened, so are the others, and we respond accordingly. A sample matrix can be viewed [here](#), and in Appendix Folder on Flash Drive, document titled -Service Request Priority Matrix.

Customer Support logs requests and tracks issues through resolution. Many issues are resolved by immediate explanation or following consultation with a Team SME. For accountability, each reported issue or request is assigned to a Team member who is responsible for ensuring that the ticket moves through our structured resolution process and is addressed appropriately in a timely manner according to response expectations in the priority/severity matrix.

Tier 2 includes support escalation as well as system monitoring by TrackMy technology Cloud engineers with expertise in AWS, server OS and databases. The Team maintains N-1 for the solution OS and database versions. This includes at least monthly patch deployment on established deployment schedules, as well as “one-off” patches that are critical/urgent and implemented as needed (e.g., OS vendor security updates).

TrackMy application releases are also supported, including new features, improvements and bug fixes. These are deployed using Continuous Integration/Continuous Deployment (CI/CD) integration with the goal of providing faster release cycles, and generally scheduled for off-hours to ensure little or no downtime.

Tier 3 provides additional escalation support to SMEs, as might be the case with technical or integration support related to the system. This may include, but not be limited to, issues related to healthcare interoperability with EMR/EHR, HIE and other such data exchange, supported by the Team’s subject matter expertise in Georgia’s unique requirements, and existing VHN GRITS bi/uni-directional data sharing.

TrackMy can deploy a support team to work 24x7 as-needed for surge support. We have secondary support staff through our own personnel and contractors to quickly ramp-up staff on 24-48 hours notice.

9. Staffing (Attachment L, Section 9)

1. Describe your overall staffing plan to fulfill the roles and responsibilities outlined in Attachment L Section 9.1. For each position, indicate the number of individuals in those roles and the FTEs (dedication of those individuals to the Contract’s scope of work).
2. Include an organizational chart for the proposed project team, including the role of any subcontractors. Please make clear which are your staff and which are subcontractor staff.

3. Confirm that all proposed staff, regardless of position, will be working from within the US. Confirm that all proposed staff can meet the on-site expectations of their position, as described in Attachment L Section 9.6.
4. Provide resumes for all Vital Positions including clear indication that the individual proposed meets the requirements in Section 9.2 of Attachment L.
5. Subcontractors:
 - a. Describe the role of any subcontractors you will utilize for this Contract, including how/if their role changes during the life of the Contract.
 - b. Indicate your prior experience with each subcontractor.
 - c. Describe their experience and expertise as it relates to supporting the Contract scope.

The Team has selected the following personnel for the IDOA project, each individual offering extensive knowledge and experience in their area(s) of expertise: leading complex, large-scale engagements to on-time, on-budget delivery; requirements gathering and business/functional analyses; healthcare and public health information technology; technical architecture including AWS Cloud; full life cycle design and development (Agile/Scrum SDLC); healthcare industry security and compliance; solution implementation, configuration and testing; secure and compliant data integration (e.g., HL7/FHIR); data migration/conversion; training; and M&O support.

The following roles and responsibilities have been identified, based on the current Scope of Work in Attachment L - to manage and lead this project, indicating within the below the FTE expectations of our project team (for the implementation/first 11 months of the project) and the prime/subcontractor filling the role (if changes need to be made, based on final scope agreed upon with State, TrackMy reserves the right to update this matrix/project team):

Role - FTE - Prime/Subcontractor filling role -

Executive Lead (Vital Position) - 0.18 - TrackMy

Project Manager (Vital Position) - 1.00 - PM Phase

Account Manager (Vital Position) - 0.04 - TrackMy

M&O Manager (Vital Position) - 0.04 - TrackMy

Lead Architect (Vital Position) - 1.00 - TrackMy

Implementation Lead (Vital Position) - 1.00 - aFit/PM Phase

Database Administrator (Vital Position) - 1.00 - Vergence Group

Data Migration Lead (Vital Position) - 0.63 - Vergence Group

OCM Lead (Vital Position) - 0.63 - aFit

Training Lead (Vital Position) - 0.25 - aFit

Testing Lead (Vital Position) - 0.46 - Vergence Group

Release Manager (Vital Position) - 0.04 - TrackMy

IT Help Desk - Support Analyst - 0.04 - TrackMy

Integration Lead - 1.00 - Corvano

Project Manager - Integrations/Billing - 0.50 - aFit

A project organizational chart may be viewed at the following link [here](#), and in Appendix Folder on Flash Drive, document titled -Project Organizational Chart – IDOA Visit - TrackMy.

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We confirm that all proposed staff, regardless of position, will be working from within the US. We also confirm that all proposed staff can meet the on-site expectations of their position, as described in Attachment L Section 9.6.

At this time, we can provide resumes for the following vital positions (links within the following list), and as we get closer to contract negotiations and execution we will finalize the additional vital personnel and provide resumes upon request (will add resumes to flash drive as well):

- Executive Lead (Vital Position) - TrackMy, [Jeremy Elias Resume](#), and in Appendix Folder on Flash Drive, document titled -Jeremy Elias Resume - TrackMy - Executive Leader.
- Project Manager (Vital Position) - PM Phase, [India Brown Resume](#), and in Appendix Folder on Flash Drive, document titled -India Brown - Resume.
- Account Manager (Vital Position) - TrackMy, [Alex Fagen Resume](#), and in Appendix Folder on Flash Drive, document titled -Alex Fagen Resume - TrackMy - Account Mgr.
- M&O Manager (Vital Position) - TrackMy, [Kyle Peterman Resume](#), and in Appendix Folder on Flash Drive, document titled -Kyle Peterman Resume - TrackMy - M&O Manager.
- Lead Architect (Vital Position) - TrackMy, [Don Cummins Resume](#), and in Appendix Folder on Flash Drive, document titled -Don Cummins Resume - TrackMy - Lead Architect.
- Implementation Lead (Vital Position) - aFit, Personnel TBD
- Database Administrator (Vital Position) - Vergence Group, Personnel TBD
- Data Migration Lead (Vital Position) - Vergence Group, Personnel TBD
- OCM Lead (Vital Position) - aFit, Personnel TBD
- Training Lead (Vital Position) - aFit, Personnel TBD
- Testing Lead (Vital Position) - Vergence Group, Personnel TB
- Release Manager (Vital Position) - TrackMy, [Paul Link Resume](#), and in the Appendix Folder on Flash Drive, document titled - Paul Link Resume - TrackMy - Release Mgr
- IT Help Desk - Support Analyst - TrackMy, [Maalik McBurrows Resume](#), and in the Appendix Folder on Flash Drive, document titled - Maalik McBurrows Resume - TrackMy - IT Support.
- Integration Lead - Corvano, [Steve Shrader Resume](#), and in the Appendix Folder on Flash Drive, document titled - Corvano Resume.Shrader.
- Project Manager - Integrations/Billing - aFit, [Robert Prestwood Resume](#), and in the Appendix Folder on Flash Drive, document titled - Robert Prestwood Resume - aFit - Project Mgr.

Subcontractors for this project include the following, and their roles in the project and expertise -

- PM Phase - India Brown - Project Management. India was recommended to TrackMy as an excellent project management resource due to her prior experience within Healthcare IT and leading complex IT projects.
- aFit - Project Management, OCM Lead, Training Lead - aFit was recommended to TrackMy as a leading Indiana WBE subcontractor certified to provide information technology consultation, information technology service delivery, management advisory services, education and training services for nearly 10 years.
- Vergence Group - Database administration, data migration, testing lead - Vergence was recommended to TrackMy as a leading MBE company, delivering strengths in process innovation, business consulting and technology to solve problems.
- Corvano, LLC - Integration Lead - Corvano was introduced to TrackMy through our relationship with aFit as a leading veteran-owned business with extensive experience providing guidance and direction for business processes through technology enablement.

10. Enhancements (Attachment L, Section 10)

1. Confirmation of your agreement with the requirements of the Attachment L Section 10
2. Explain your understanding, experience with, and approach to the enhancement activities described in Attachment L Section 10.

TrackMy confirms and agrees to the requirements of Attachment L Section 10, and agrees with the price for enhancement requests as noted on the cost proposal.

TrackMy maintains a change request (CR) process for all our existing clients, and when a CR comes up - we discuss the key details with the client, understand the requirements, and propose a level of effort (typically in hours/days) to complete the CR. We then agree on this, and the CR is put into the SDLC process to deploy to production when ready.

11. Project Management (Attachment L, Section 11)

Explain how you propose to execute Attachment L Section 11 in its entirety, including but not limited to the specific elements highlighted below:

1. Confirmation of your agreement with the requirements of the Attachment L Section 11.
2. The Respondent's Deliverable Management approach, which must comply with the requirements of Attachment L Section 11.4.
3. Your company's escalation process for any issues that may arise.

Project Management Methodology

Project Management Office

The Team will follow proven project management methodologies built on best practices and consistent with PMBOK. From the onset, the Program Management Office (PMO) acts as the overall governing body responsible for Contract compliance. The PMO is the source for project management standards, practices and governance for the Team, and drives overall engagement success with best-in-class customer service.

Through central communication and collaboration, the PMO provides a standard avenue for project and product delivery, means to measure success, methods for building relationships, and overall assessment. Using repeatable and structured methods both provides the most efficient and effective engagement management, and creates opportunities for continuous process improvement.

Project success for the TrackMy Vaccines solution implementation is directly dependent on the combined achievements of the PMO, the engagement team and the State's own dedicated personnel. As part of engagement oversight, the PMO will facilitate open communication between this office, the TrackMy Vaccines project implementation team and appropriate State staff as determined by the State to best achieve on time, on budget Deliverables and rapid, measurable results.

Engagement Approach

With a steadfast commitment to facilitating effective organizational change management to improve customers' operational productivity and effectiveness, facilitate program interoperability, achieve compliance with standards and secure sustainable revenues, our methodology is guided by Business and Information Technology/Information Resource Management (IT/IRM) Transformation. Such a strategy offers clients a number of consequential benefits:

- Reengineering of business processes where operational needs drive IT
- Improved delivery of essential programs and services

- Increased data accessibility, security and reliability
- Compliant interoperability for reduced duplicative effort
- Cost savings with more streamlined and standardized processes
- Greater transparency and accountability to the citizenry
- Improved clinical, operational and financial outcomes

To these ends, the Project Manager, joined by knowledgeable and experienced domain experts, will guide the full life cycle engagement process, end-to-end, from project kick-off to IDOA requirements validation and on to solution design, installation/configuration, development, data conversion, testing, training, Pilot, deployment, Go-Live cutover to Production, and maintenance and support.

Project Planning

The engagement implementation approach provides realistic scheduling, defined requirements and priorities, active communications, QA planning and risk mitigation, detailed documentation, Gantt charts/projects plans, task lists, content Deliverables and milestones, to best ensure the State's project objectives are accomplished and schedule adhered to. This includes overall plans for key engagement activities, as applicable. The approach is living, subject to change per requirements.

Scope Management

The Team may produce analysis findings, including identifying opportunities for process improvement, if any. Feature/function gaps between product functionality and the State's requirements will be documented as needed and used to refine the Scope. Such documentation may include detailed design and estimates for discovered gaps, if any. Associated work requires approvals and is incorporated into the Scope. The Scope, as agreed, is defined and accounted for in the final project plans/schedule.

Schedule Management

Based on the project plans/schedule and resulting Work Breakdown Structure, each member of the engagement team has a role-based list of tasks, timelines and expected due dates. The Project Manager monitors and tracks the project process (tasks, milestones, Deliverables, expectations, completion status, cost, as applicable), updating the project plans and work schedules, and reporting project progress/status to the State and to the PMO Engagement Manager for internal oversight.

Project tasks are undertaken as scheduled by Team resources, who will work together with the State as needed to complete pre-defined activities, taking care that each assigned task is finished as much as possible prior to moving on to the next. Team members report to the Project Manager, detailing progress toward completion of Deliverables and issues encountered, if any.

A task not completed per the initial schedule is escalated to ensure completion prior to the beginning of subsequent activities.

For onsite activities, the Project Manager will provide a schedule, developed in cooperation with the engagement team and the State. This includes specified dates, resources and tasks relevant to each onsite visit. Should the need for modifications arise, the schedule can be changed and all dates after the first modified date would of course change accordingly with the updated schedule reported to the State and the Team. Dates are based on durations defined within the project plans or Gantt.

Project Change Management

Requests for change are evaluated to determine if the functionality requested can already be achieved through existing means. If not, such enhancement requests are further assessed to determine criticality to workflow. Critical requests are escalated to the Change Control Board for review and determination as to how to proceed. For requests deemed non-critical, requirements scoping takes place to ascertain the

level of effort required, cost and timeline for completion of work. In any case, the State's sign-off is required before work begins.

Risk and Issues Management

To manage and mitigate risks, the Team provides a dedicated and knowledgeable Project Manager and engagement team and a proven methodology guided by Risk IT. Key elements of our implementation methodology are focused on risk identification, assessment, prioritization, and the management of tasks, responsibilities, activities and budget to mitigate the risk. Issue management and problem escalation ensure issues and risks are reported, assigned, tracked and monitored through resolution, and retained for Lessons Learned.

From the onset, the Team expects to come away from the project kick-off with a basic understanding of the State's risk tolerance, awareness and accountabilities. The Project Manager may then work with key stakeholders to identify risks, prioritize based on impact and probability, and assess options for mitigating actions. As steps are taken to alleviate risks, resulting changes in status (e.g., eliminated, downgraded, etc.) are monitored and communicated to applicable stakeholders.

Quality Management

Our approach calls for the maintenance of comprehensive audit trails for decision, design and development activities associated with an engagement. Assigned system/service tasks are defined, documented and developed and/or delivered. As part of the delivery method, task Deliverables (whether for tasks, programs, meetings, etc.) are verified as complete and approved, up to and including sign-off as applicable. It is expected that the State will be involved in applicable review, sign-off, acceptance throughout the delivery process.

Budget/Cost Management

The Scope incorporates time and cost exposures. Additional project costs, if any, would be addressed by the inclusion of Change Controls/Requests, which describe and define changes or additions to the project Scope to meet revised requirements. These will be delivered to the State for approval and require sign-off before work begins. Should there be Change Control/Requests, project plans, schedules may be updated to incorporate the impact on timeline, work and cost, as applicable. Cost tracking is provided with our integrated accounting project management business tools.

Human Resources Management

We will use all commercially reasonable efforts to ensure the continued availability of the proposed Key Personnel. From the onset, we'll insulate the State from turnover through upfront mitigation, with management evaluating and monitoring to ensure the right personnel have been assigned. Nonetheless, we recognize there may be a need to replace staff during the term of a Contract. Accordingly, we employ interim transition plans, requiring Team members provide a minimum 30-day notice of intent, allowing sufficient time to transition responsibilities. As required, we will provide the IDOA with written notification of anticipated vacancies of Key Personnel within two (2) business days of receiving the individual's resignation notice, the company's decision to terminate an individual, or the position otherwise becoming vacant.

We maintain contingency staffing plans of identified resources capable of rapidly replacing a departing Team member, and may otherwise recruit a new Team member. Replacements are expected to have qualifications that meet or exceed those specified for their engagement role, and we will keep the IDOA apprised through weekly, written Status Reports of the replacement candidate recruiting process until a qualified individual is hired, including project impact statement. Candidates are (pre)screened, interviewed, background checked, etc. before their résumés are submitted to the Project Manager or

PMO for review. Only after this initial screening will candidates be submitted for the State's consideration. The goal, with the IDOA informed, is to fill a vacant Key Personnel role in as little as 36 hours, or in any case no more than sixty (60) days.

Acceptance-Contract Management

Throughout the engagement, the Team will present applicable Deliverables to the IDOA's designated stakeholders as directed for review and approval, and using Deliverables templates and Controlled Correspondence for signatories. In the event of walkthroughs, the Deliverable owner or designated second will be available to answer the State's questions and take feedback for refinement, per identified Action Items, if needed. This includes auditing and assessment, tracking to milestones/Deliverables, to verify compliance with applicable expectations, specifications, codes, standards.

Project Communication Management

The Communications Plan governs project communication within the Team, and between the State and the Team. This may include an outline defining the purpose of communications (e.g., project kick-off meeting, subsequent meetings or planning sessions, status reporting meetings, etc.), target of communications (i.e., attendees expected), nature of communications (e.g., in-person, by telephone/teleconference, e-mail, etc.), and frequency of communications, etc. Applicable contact information is additionally provided.

The engagement is a joint effort by the Team and IDOA. The Team's Project Manager will work closely with their State-level counterpart, interfacing as scheduled per the project and Communication Plan and as needed to discuss status reports, accomplishments, priorities, issues, etc. Related tasks accomplished and Deliverables approved, along with any necessary rescheduling, are incorporated into the Project Plans/Work Schedules as needed, but at least weekly or as otherwise mutually agreed.

Closure Approach

At least sixty (60) days before solution deployment and implementation, the Team expects to produce a checklist of closeout activities, e.g., to confirm and archive Deliverables for the State, to validate completeness of documentation, to document Lessons Learned, to transition the IDOA to ongoing support for M&O, to establish mutually-agreed follow-up for performance review (environment, solution, users), etc.

After the platform goes live and operations stabilize, the Team will host performance meetings with key stakeholders and process owners both internally and with the State to review previous performance reports, track progress on established goals, and identify service improvement opportunities (e.g., to further improve project performance, enhance stability and efficiency). This allows us to strengthen our partnership by aligning targeted KPIs to expectations and long-term goals set by the State.

Deliverables Schedule

The State will be involved in review, sign-off and acceptance of Project Deliverables throughout the IDOA engagement. Deliverables may be project task activities or actions, as applicable and substantially defined. Or they may be in the form of written documentation, created, maintained and submitted using common office software tools such as Adobe PDF or Microsoft Word, Excel, Project, VISIO, etc., as appropriate.

12. Software Warranty (Attachment L, Section 12)

Confirm your acceptance of the software warranty as described in Attachment L Section 12.

Yes, we accept.

13. Turnover (Attachment L, Section 13)

Confirm your acceptance of the requirements in Attachment L Section 13.

Yes, we accept.

14. Performance Measurement – SLA's and Withholds (Attachment L, Section 14)

1. Confirm your agreement with the requirements and performance targets in Attachment L Section 14.
2. For each enumerated service level agreement in Attachment L Section 14.1, explain how the data for the service level will be collected and reported (i.e., data sources and process) and how you propose to meet or exceed the thresholds for compliance.
3. Describe your process for identifying, prioritizing, and communicating problems that may contribute to a failure to comply with performance targets.

Yes, we accept.

Data sources will be collected and reported through the TrackMy platform. Standard audits are in place to track user activity, and report date/time stamps of key user activity. We plan to exceed the standards noted, by delivering our project with an industry-leading approach and methodology, and lean on our combined 100+ years of experience as a project team - delivering similar sized projects on time. If timelines are not met, or issues arise we will follow the outlined approach for Root Cause Analysis (RCA) and prepare an agreeable plan for remediation.

Our process for identifying, prioritizing, and communicating problems that may contribute to a failure to comply with performance targets starts with our approach and how we track key project/DDI milestones. We do this through Monday.com, a leading project management software - and build leadership views of timelines for transparency. We then follow our project management methodology, and have weekly touchpoint meetings on project status, detail any roadblocks/challenges we may see, and keep a 100% transparent approach to delivering this project.

15. Optional Elements

1. The State is interested in considering providing hosting for the solution.
 - a. Describe what the State hosted solution and what would change in your proposed approach (question 4-14 above).
 - b. Provide details as to the drivers of cost reduction the State can expect if they were to choose a State-hosted solution. Do not provide any financial details, all financial details should be entered into Tab 8 of Attachment D, Cost Proposal. Provide details as to the effects the State can expect in each of these areas:
 - DDI
 - M&O
 - Licenses / Subscriptions / Environment
2. Provide details as to alternative Helpdesk Services offerings that your organization can offer, in addition to the services listed in Attachment L, Section 8. Do not provide any financial details, all financial details should be entered into Tab 8 of Attachment D, Cost Proposal.

TrackMy does not offer a client-hosted solution, as we have particular checks and balances, and security infrastructure built within AWS today, that allows us to offer our COTS to clients and ensure we meet and exceed SOC2, Type 2 Certification. In our model, and delivery approach - a client-hosted solution does not really save much cost overall yet to help show our expected AWS usage, as a line item - we have carved this line item out in the Cost Proposal. In addition, SDLC and customization delivery timelines would be impacted.