Request for Proposals (RFP) for Data Warehouse Development and Implementation for the Arizona Statewide Homelessness-Health Collaborative

A. Introduction and Purpose

The Arizona Statewide Homelessness-Health Collaborative (the Collaborative) seeks to procure a highly collaborative and flexible technology vendor to design and implement a statewide Data Warehouse that will integrate three Homeless Management Information System (HMIS) databases and other relevant human services databases, such as the Medicaid Arizona Health Care Cost Containment System (AHCCCS) database, as determined by the Collaborative. Though referred to as “Data Warehouse” in this document, the Collaborative is interested in both warehouse and data lake solutions, and seeks a vendor that can provide the best solution to the needs and use cases outlined in this Request for Proposals.

The development and use of a statewide Data Warehouse are intended, at minimum, to accomplish the following goals and objectives:

- Improve care coordination among homeless and housing service providers and health care entities, including reducing the need for clients to repeat information across agencies and increasing access to client-level information for front line staff.
- Maintain unduplicated profile of clients and related data across the three Arizona homeless Continua of Care (CoC) regions and data from the statewide Medicaid agency.
- Increase data security and eliminate unauthorized uses and disclosures of client-level data.
- Support efforts to use data to allocate resources, secure necessary local funding, and connect and leverage existing programs and services across systems of care.

Data sharing through a Data Warehouse will enhance coordination with providers across CoC geographic areas, emergency assistance systems, and other intersecting systems of care and resources, such as healthcare. Data sharing will also support improved reporting, planning, and resource allocation strategies at both the CoC and agency level. Standardized data sharing across Arizona will improve how services and housing are accessed by the most vulnerable households, people experiencing and at-risk of homelessness, leading to improved outcomes and increased efficiencies across the system. Goals of the Collaborative include enhanced client experience, reducing the need for clients to share the same health and housing information to multiple entities, increased efficiencies for case management and frontline staff, and maintaining privacy and confidentiality of the data being shared, ensuring that releases of information and levels of appropriate access, determined by the Collaborative, are well managed.

The Collaborative is committed to supporting the creation of a statewide Data Warehouse for HMIS data from the three Arizona Continua of Care as well as Medicaid data from the AHCCCS, with the potential to include data from other systems of care in the future that facilitate cross sector collaboration (e.g. justice, child welfare, benefits).
B. Background

The three Arizona CoCs, Arizona Balance of State Continuum of Care (AZ BoS), Maricopa Regional Continuum of Care (MR CoC), the Tucson/Pima Continuum of Care (TPCH), Arizona Health Care Cost Containment System (AHCCCS), and the Arizona Department of Economic Security (ADES), hereafter referred to as the Collaborative, have agreed to participate in a statewide integration project, including Homeless Management Information System (HMIS) data and Medicaid (see Appendix A). The purpose of the Collaborative is to manage the initial design and implementation of the Statewide Homelessness-Health Data Warehouse to facilitate increased understanding of homelessness in Arizona, as well as person-centered coordination between systems of care including, but not limited to, homelessness response and AHCCCS and/or ADES. The Collaborative is responsible for developing and approving standard baseline policies and procedures, agreements, and management of the Data Warehouse.

Currently, the Homelessness-Health Collaborative’s fiscal agent is the Arizona Housing Coalition (AHC). AHC will provide fiscal management for the Data Warehouse. The Data Warehouse will be governed by the Collaborative Governance Framework, which includes membership from each CoC, AHCCCS, and other partners. The Collaborative is the decision-making entity driving the development, implementation, and ongoing operation of the Data Warehouse. The Collaborative is responsible for the development of protocols that govern usage of the Data Warehouse, including user permissions, end user agreements, release of information and any data sharing agreements specific to data maintained within the network that may be necessary.

C. Scope of Work

Design – HMIS Integration

The Collaborative seeks competitive bids to secure a contract for the provision and maintenance of a customized Data Warehouse for both historical and future data related to systems impacting homelessness across the state. The vendor will work with the Collaborative to achieve consensus across three CoCs on the HMIS datasets for the Warehouse. The first phase of the Warehouse implementation will aggregate HMIS data from participating CoCs and AHCCCS (see below). At a minimum, the Warehouse will be designed to:

- Export HMIS and systems of care data in a standard CSV file format on a regular basis (see attachment A for a list of HMIS data elements to be shared);
- De-duplicate data and identify quality issues;
- Develop strategy for regular uploading/sharing of data to ensure it is “real time”; and
- Control ability to view and use information by establishing different levels of access.

The Data Warehouse will leverage existing data collection efforts and any new forms or policies (such as standard Release of Information and data privacy protocols) developed and approved by the Collaborative.

As conceptualized, the Data Warehouse will receive identifiable data, ensure it is not duplicative, and make merged data available in two formats:

- Anonymous and de-identified data set to inform policy and planning activities; and
- Personal and identifiable data set to support care coordination for people accessing services

The Warehouse will include safeguards that limit access to data based on the type of agency requesting the data and how the data will be used. For example, general dashboard reports comprising aggregated
de-identified data may be made available to appropriate users; more detailed personal and identifiable
client-level data may be available to CoCs and contributing agencies where there is a data use
agreement for a specific business case in place. To ensure the safety and security of the data and also
ensure compliance with all applicable state and federal privacy laws, all CoCs and associated service
provider agencies that want to access personal and identifiable client-level data will have to meet
specific requirements such as:
  • Appropriate Release of Information allowing for this use
  • Standard statewide data sharing protocols
  • Clear HMIS oversight structure
  • Participation in the Collaborative

These examples are not exhaustive; additions or changes may be made at the discretion of the
Collaborative.

**Design – AHCCCS Integration**

The Data Warehouse phase 1 integration will include data from AHCCCS (and outlined in Appendix A).
Vendors submitting proposals for the Data Warehouse are asked to submit a workflow diagram of how
this integration might work. Finally, the vendor will need to demonstrate consent management
functionality across the homeless and health care data in the Data Warehouse. The consent
management functionality can either be native to the vendor or through a third-party partner. The
consent management feature must account for storing and expiration of authorizations. The system
must be able to interface with the AHCCCS Data Warehouse to draw specific data upon receipt of a valid
authorization.

**Design – Future System Needs**

At a minimum during the first phase of implementation the system should be able to match and
integrate the three Arizona CoC HMIS implementations’ data with AHCCCS data. Future needs may
include other types of data – such as health care data from Managed Care Organizations (MCOs) and
hospitals. Additional data elements may be incorporated in the future including, but not limited to, data
from the ADES. The successful vendor will demonstrate that their product can accommodate both
present and future needs.

**System Features, Functions, Administration, and Reporting**

The review panel will evaluate the ability to capture, update, share and produce reports related to
systems, users, clients, and/or aggregate data at the Continuum of Care level. The system should allow
administrators to control and automate access levels to shared data. The applicants will be evaluated on
their ability to export and import data in various formats (e.g., HUD standard format) and integrate data
from external sources (e.g., CSV/XML and API). In addition, the ease of use and creation of ad hoc
reporting tools, dashboards, third-party reporting tools (e.g., mapping software, consent management)
and the general flexibility and user interface will be weighed. Timing of report generation capabilities
(real, near-real, batch) and data services (e.g., back-ups, data sharing, confidentiality) will be evaluated.

**Licensing, Support, Customer Service and Training**

Submissions are expected to detail whether the solution would be licensed or owned by the
Collaborative, as well as providing estimates of costs for both options (if possible). Submissions will also
be evaluated on their ability to demonstrate timely, effective, and convenient support to the
Collaborative and designees. This may include help desk availability during operating hours, technical support for HMIS Lead Agency staff and other system administrators, ability to provide tech support for initial implementation, provisions for ongoing system maintenance and updates, and ability to make enhancements for changing needs. Associated training materials and communication plans to support proposed system changes will also be evaluated.

Privacy, Security, Cybersecurity

Submissions must delineate the technology in place to ensure privacy, security and cybersecurity of the Data Warehouse. Proposals should include specific tools in place to assist end-users and Warehouse administrators in ensuring the security of the data contained in the Data Warehouse.

Cost Effectiveness/Budget

Proposals will be evaluated on the feasibility, cost-effectiveness, reasonableness, and accuracy of the budget. In addition, proposals will be weighed against comparable warehouse system costs and to other submissions. Proposed costs should be delineated by what is considered to be standard, an available add-on, or customization of the system.

Proposals should include description of organizational capacity to implement the project, a timeline and plan for implementation and budget. Section E includes a scoring rubric and outline for each step in the selection process.

Phases and Timelines

The Collaborative anticipates a phased approach for engagement with a vendor as outlined.

1. **Proof of concept**: vendor will demonstrate system capacity to manage, at minimum, privacy, system analytic capacity, sample reports, using randomized and false data. Proof of concept phase anticipated timeline months 0 – 3. Collaborative will determine extending contract for a Beta phase based on the demonstration and Collaborative satisfaction in this phase.

2. **Beta**: vendor will demonstrate system capacity, merging approved, time limited, one-time data from the three Arizona CoCs and AHCCCS. Beta phase anticipated timeline months 3 – 6. Approval of Collaborative required for both proof of concept and beta phases are required to qualify for formal launch. Collaborative reserves the right to reissue an RFP and contract with a new vendor for a proof of concept and/or beta phase. During the beta, the Collaborative will work alongside the vendor to identify and repair any security vectors or UI/UX and functionality issues that are encountered.

3. **Launch**: pending approval of the proof of concept and beta phase, the Collaborative will contract for a period of up to two years for the management of the Data Warehouse and to incorporate both HMIS and AHCCCS data sets as outlined in the Scope of Work. Launch anticipated timeline months 6 – 24.

D. Contract Details

**Period of Performance** – This contract will go into effect once signed and will be complete after a two-year period. Contracting and pricing are dependent on vendor being selected to move beyond proof of
concept phase, beta, and launch. Contracts will be amended or renewed at each phase, pending Collaborative approval, and at least annually.

**Payment, Incentives, and Penalties** – This is a project-based contract with a maximum budget proposal of $250,000 annually for two years with the schedule outlined in the table below.

<table>
<thead>
<tr>
<th>Year One</th>
<th>Year Two</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proof of Concept</td>
<td>Beta</td>
</tr>
<tr>
<td>Months 0 – 3</td>
<td>Months 3 – 6</td>
</tr>
<tr>
<td>$25,000</td>
<td>$75,000</td>
</tr>
<tr>
<td>Launch</td>
<td>Months 6 – 12</td>
</tr>
<tr>
<td>$150,000</td>
<td>Months 0 - 12</td>
</tr>
<tr>
<td>Maintain &amp; Expand</td>
<td>$250,000</td>
</tr>
</tbody>
</table>

**Contractual Terms and Conditions** – AHC will serve as fiscal administrator, on behalf of the Collaborative, and reserves the right to issue work orders based on negotiated Scope of Work and level of effort for all or some of the tasks to be accomplished. The Collaborative also may allocate work orders to one or more vendors.

### E. Selection Process

The Collaborative will use a multi-step process for the final selection of a qualified vendor to perform stated work:

**Selection Step 1:**

In Step 1, a review committee will score the content of proposals by section. There are objective and competitive/subjective elements to scoring. Initial evaluation and comparative review of proposal sections will be based on de-identified copies to allow evaluators to assess the content of each individual section neutrally and independent of other sections. The scored areas are listed below.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scope of Services</td>
<td>100</td>
</tr>
<tr>
<td>Organizational Capacity</td>
<td>20</td>
</tr>
<tr>
<td>Planning and Implementation</td>
<td>20</td>
</tr>
<tr>
<td>Budget/Cost Analysis</td>
<td>40</td>
</tr>
<tr>
<td>Clarity/Relevance of Proposal Responses</td>
<td>10</td>
</tr>
<tr>
<td>References</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>200</strong></td>
</tr>
</tbody>
</table>

Proposals must be submitted in a format that follows the above format/outline for ease of scoring and comparison.

The Collaborative’s review committee may request additional information during Step 1 to ensure an accurate assessment. The Collaborative reserves the right not to consider proposals in Step 3 if:

- Assessment indicates that the proposed solution cannot meet the Collaborative’s needs.
• The amount of customization required to meet the Collaborative’s needs, based on the narrative responses in the project plan, is substantially greater than other applicants and/or presents an unacceptable risk to meeting a target date for implementation or meeting overall needs; or
• The cost analysis exceeds the overall budget.

All applicants will be notified of their proposal status by email at the completion of Step 1.

Selection Step 2: Interviews and Demonstrations with Selected Applicants

Based on the proposals, up to 3 applicants may be invited to schedule an interview and a demonstration to present to the evaluation panel. In general, this presentation is expected to include:
• Organizational capacity, software functionality, and overall ability to meet requirements.
• User experience for ad hoc reporting and data visualization tools
• User levels and security levels for data input versus data access
• Seamless integration across multiple systems and data sources

Applicants should be prepared to demonstrate any aspect of functionality described in the proposal in a remote setting. If the proposal includes custom development, applicants may be asked to present sketches, wireframe mockups, diagrams, etc.

Step 2 scoring will focus on the software, data integration, and access.

<table>
<thead>
<tr>
<th>Scoring Area</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Quality of Presentation/Content</td>
<td>30</td>
</tr>
<tr>
<td>User Experience</td>
<td>30</td>
</tr>
<tr>
<td>Configurability/Admin User Experience</td>
<td>20</td>
</tr>
<tr>
<td>Demonstration Consistent with Proposal</td>
<td>10</td>
</tr>
<tr>
<td>Collaborative Feedback and Reference Checks</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Selection Step 3: Final Selection

AHC will initiate contract negotiations on behalf of the Collaborative with the highest ranked application. If contract negotiations are unsuccessful, AHC will enter into a subsequent negotiation with the next highest short-listed vendor.

F. Selection Schedule

The anticipated procurement schedule is as follows:

<table>
<thead>
<tr>
<th>RFP Event</th>
<th>Event Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>RFP Issued</td>
<td>February 7, 2022</td>
</tr>
<tr>
<td>Deadline to Submit Questions to Linda Jensen, Education Director, Arizona Housing Coalition, <a href="mailto:linda@azhousingcoalition.org">linda@azhousingcoalition.org</a></td>
<td>February 16, 2022</td>
</tr>
<tr>
<td>Answers to Questions Posted</td>
<td>February 23, 2022</td>
</tr>
<tr>
<td>Application Submission Deadline</td>
<td>March 9, 2022</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Demonstration/Interviews</td>
<td>Week of March 21</td>
</tr>
<tr>
<td>Applicant Identified for Contract Negotiations</td>
<td>Week of March 28</td>
</tr>
<tr>
<td>Contract in Place</td>
<td>Mid-April</td>
</tr>
</tbody>
</table>

**G. Submission Requirements**

For consideration, proposals must include:

- A brief cover letter to the attention of the Arizona Statewide Homelessness-Health Collaborative.
- A brief narrative that addresses how the Scope of Work, as outlined in Section C, will be accomplished for each phase.
- The organizational capacity, qualifications of the applicant and include the resume of the principal resource development professional that will provide direct service for this project.
- An outline of the projected responsibilities of both the Collaborative and the selected firm.
- The project budget and all costs payable by the Coalition on behalf of the Collaborative must be clearly defined, including billing requirements, as outlined in the Scope of Work, Cost Effectiveness/Budget section.
- Minimum of three (3) references where the bidder has successfully performed similar services.

Proposals must be submitted by **March 9, 2022** by 5 p.m. (MST)

Proposals not meeting the criteria outlined in the RFP will not be considered. Proposals should be emailed to: Linda Jensen, Education Director, Arizona Housing Coalition, linda@azhousingcoalition.org
APPENDIX A
Proposed Shared LIST OF SHARED HMIS Data Elements

DATA ELEMENTS (available here: FY 2020 HMIS Data Standards Data Dictionary - Version 1.7 (hudexchange.info)):

1. **HMIS**: Homeless Management Information System data elements are listed here. Individual HMIS implementations at the three AZ CoCs may have customized data fields which could also potentially be included.

   Reports using anonymous and de-identified data will utilize the following standard HUD HMIS data elements for reporting purposes:

   All HUD HMIS project descriptor data elements (2.1 – 2.8);
   - 2.1 Organization Identifiers
   - 2.2 Project Identifiers
   - 2.3 Continuum of Care Code
   - 2.4 Project Type
   - 2.5 Method for Tracking Emergency Shelter Utilization
   - 2.6 Federal Partner Funding Sources
   - 2.7 Bed and Unit Inventory Information
   - 2.8 Additional Project Information

   HUD HMIS universal identifier elements that describe demographics (3.4 – 3.7);
   - 3.1 Name
   - 3.2 Social Security Number
   - 3.3 Date of Birth
   - 3.4 Race
   - 3.5 Ethnicity
   - 3.6 Gender
   - 3.7 Veteran Status

   All HUD HMIS universal project stay elements (3.8 – 3.917); and
   - 3.8 Disabling Condition
   - 3.10 Project Start Date
   - 3.11 Project Exit Date
   - 3.12 Destination
   - 3.15 Relationship to Head of Household
   - 3.16 Client Location
   - 3.20 Housing Move-in Date
   - 3.917 Living Situation

   All HUD HMIS program specific data elements (4.2 – 4.18).
   - 4.2 Income and Sources
   - 4.3 Non-Cash Benefits
   - 4.4 Health Insurance
   - 4.5 Physical Disability
   - 4.6 Developmental Disability
   - 4.7 Chronic Health Condition
   - 4.8 HIV/AIDS
   - 4.9 Mental Health Problem
   - 4.10 Substance Abuse
4.11 Domestic Violence  
4.12 Contact  
4.13 Date of Engagement  
4.14 Bed-Night Date  
4.18 Housing Assessment Disposition

Reports using personal and identifiable data will utilize the following standard HUD HMIS data elements for reporting and care coordination purposes:

- 2.1 Organization Identifiers  
- 2.2 Project Identifiers  
- 2.3 Continuum of Care Code  
- 3.1 Name  
- 3.2 Social Security Number  
- 3.3 Date of Birth  
- 3.6 Gender  
- 3.7 Veteran Status  
- 3.8 Disabling Condition  
- 3.10 Project Start Date  
- 3.11 Project End Date  
- 3.12 Destination  
- 3.16 Client Location  
- 4.18 Housing Assessment Disposition  
- 4.43 Last Permanent Address

**AHCCCS Data:** For these purposes AHCCCS data will include the follow data categories, but are not limited to the below list:

<table>
<thead>
<tr>
<th>AHCCCS ID</th>
<th>Encounter Data (Billing)+</th>
<th>Enrollment/Eligibility</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHCCCS ID</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>MCO enrollment ID</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Medicaid enrollment status</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Justice involvement (Z-code or other indicator)</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Homeless Z Code</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information related to high utilization of health care services</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>SMI status (NOT diagnosis, just indicator)</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>SMI Assessment status</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Long-term disability (ALTCS) (NOT diagnosis, just indicator)</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Information related to presence of chronic health conditions (such as from a defined list of conditions)</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Client inpatient flag</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Most recent hospital used</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Issue</td>
<td>Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Used inpatient psych in last year</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Home or Clinic point of contact</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Involved with forensic community team /ACT</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Referred or matched to AHCCCS housing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High service need indicator</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MCO/Plan information</td>
<td></td>
<td></td>
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</table>