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- **Does the County prefer a single-vendor, single-platform solution versus an integrated vendor partnership combining specialized CHA/CHIP data aggregator and data integration & automation expertise through data lake/Power BI/ArcGIS delivery layer? Is a prime contractor with named subcontractors acceptable under this RFP?**
    - The County prefers a single-vendor, single-platform solution that can support all CHA/CHIP activities without requiring staff to move between multiple programs to search for data, build reports, or manage analytics. We do not want a fragmented solution that relies on separate data-lake, Power BI, or ArcGIS layers managed by multiple vendors. A prime contractor with named subcontractors is acceptable only if the final product functions as one unified platform for users.

- **Is there an established budget for this initiative that the county would be able to share?**
    - No. Award will go to most advantageous bidder

- **Is there an expected implementation go live date for this initiative?**
    - The County would like the system configured and initial datasets available by the end of the year. Local data, including community survey results, will also be ready for upload and analysis before year-end, January 2027 at the latest.

- **What is the current process today for CHA/CHIP related work? The RFP refers to manual data processing – are secondary data from the 150+ data sources also managed manually?**
    - The County's CHA/CHIP process is currently manual and relies on collecting, cleaning, and analyzing data from multiple sources individually, this was a contract service previously with a school to have students analyze collected data. Secondary data from our 150+ public-health data sources are also managed manually. Details about our previous CHA workflow can be found at: https://www.co.columbia.wi.us/columbiacounty/hhs/Health-Human-Services/Public-Health/Community-Health/Community-Needs-Assessment.

- **Regarding "150 or more public health datasets" – is there a required or minimum list of specific datasets/sources beyond the named examples (CDC, CMS, HRSA, ACS, EPA, HUD, USDA)?**
    - Examples include Youth Risk Behavior Survey data, Behavioral Risk Factor Surveillance System data, CDC WONDER, HRSA datasets, Census Bureau data, Wisconsin DHS datasets, WIR data, and others that would be relevant. Within each data source, individual topic-level data (such as STI rates, hepatitis cases, suicide rates, anaplasmosis counts, etc.) should be counted as separate datasets. Each data set included in the platform must be relevant, current within the past five years, and appropriate for public-health planning and analysis. The County requires a minimum catalog of 150 datasets.

- **What from the current platform or data landscape requires to be migrated? Can you please provide some data categories and quantification for these data?**
    - The County does not have a formal platform that requires migration. Existing materials include spreadsheets, locally collected survey results, and audio files from interviews. These are the primary items that would need to be imported into the new system. Total volume is modest and limited to content collected within the past five years.

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- **Do you have any data sharing requirements with other counties, or state, or federal governments? Or, are data just shared via exposed reports (example through Power BI) on the County's public website?**
    - The County does not have any formal data-sharing requirements with other counties, state agencies, or federal partners. Public data is shared through reports made available on the County's website.

- **What is the expected number of concurrent/named users across HHS staff, partner agencies, and public-facing stakeholders (relevant to licensing tiers for Power BI, ArcGIS, and any SaaS platform)?**
    - The platform should support at least 10 concurrent users. The County anticipates approximately 10 administrator-level users and up to 100 editors or analysts who will work within the internal, editable portion of the system. External partners and community members will not need access to the internal workspace; instead, they will only require access to the public-facing data page. Public viewers are not known, so the system should support broad, unrestricted public access. The number of partner organizations, workspaces, and active projects may grow over time, and the platform should be able to accommodate this expansion without performance issues.

- **For the qualitative data/AI features (auto-coding, insights, theme extraction) – is there a requirement around where that AI processing occurs (data residency for AI models), especially given HIPAA/HITECH references?**
    - The data being entered would not contain any PHI information, so HIPAA is not a concern. The County prefers an AI deployment model in which all AI and analytics capabilities operate within the vendor's own secure, proprietary environment rather than through publicly available generative AI APIs. The vendor should provide and fully manage any necessary compute resources, including GPU infrastructure.

- **Has the County used, piloted, or received a demonstration for any community health data platform, and if so, is prior familiarity expected to inform bidder responses?**
    - The County has seen demonstrations of other platforms.

- **Is the County open to evaluating proposals that combine a specialized public health content/data platform with a separate enterprise business intelligence and GIS layer, or is the County's intent specifically a single, all-in-one commercial off-the-shelf product?**
    - The County prefers a single-platform solution with unified single sign-on. We are specifically seeking an all-in-one product—whether commercially available or purpose-built—that supports all required CHA/CHIP functions without requiring staff to log into multiple systems or move data between separate tools. A prime contractor with named subcontractors is acceptable only if the final solution operates as one seamless platform for users.

- **Will bid evaluation criteria and their relative weighting be published or made available to bidders prior to the submission deadline?**
    - No specific criteria. The bid will be awarded to the most advantageous bidder.

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- **Please clarify whether award will be based on the lowest responsible responsive bid or a quality-versus-price determination, identify the evaluation factors and their relative weights, and confirm whether product demonstrations or clarification sessions will be part of the evaluation.**
    - The award will be made to the bidder offering the most advantageous proposal. Responses must include all required components outlined in the RFP, and proposed timelines are a high priority due to project deadlines. If a bidder is considered for award, the County may request a product demonstration or clarification session as part of the evaluation process.

- **Please confirm whether every requirement stated as "must" must be operational at contract execution or whether configuration completed by an agreed acceptance date is responsive; please also provide the anticipated kickoff date, production go-live date, acceptance criteria, and expected numbers of internal and partner users requiring training.**
    - The County would like the system configured and initial datasets available by the end of the year. Local data, including community survey results, will also be ready for upload and analysis before year-end, January 2027 at the latest. The public website can be available immediately for community data access, while the CHIP-tracking portion of the site will be needed by fall 2027. Configuration completed by an agreed date is acceptable.

- **Please provide the required or preferred inventory of public-health datasets, minimum historical depth, refresh frequencies, Wisconsin-specific sources, and geographic coverage contemplated by the "150 or more" requirement, and identify any existing County datasets, reports, dashboards, or survey assets that must be migrated.**
    - Examples include Youth Risk Behavior Survey data, Behavioral Risk Factor Surveillance System data, CDC WONDER, HRSA datasets, Census Bureau data, Wisconsin DHS datasets, and WIR data. Within each data source, individual topic-level data (such as STI rates, hepatitis cases, suicide rates, anaplasmosis counts, etc.) should be counted as separate datasets. Each data set included in the platform must be relevant, current within the past five years, and appropriate for public-health planning and analysis. The County requires a minimum catalog of 150 datasets. The County does not currently use a dedicated data warehouse or enterprise analytics solution. Existing data is maintained through standard spreadsheets, public data sources, and locally stored files. Any analysis or integration would occur within the selected platform rather than through a separate warehouse or connected analytics environment. The County's primary integration needs involve importing existing reports that have been converted into spreadsheets for analysis within the system, as well as uploading recorded interviews for theme identification. All data to be integrated or migrated will come from the past five years (2022–2026). The platform should support straightforward file uploads, basic text or audio analysis, and retention of these materials according to public-record requirements. No large-scale system migrations are expected.

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- **Will the platform process or store PHI, regulated PII, or other data requiring HIPAA controls, and will the selected vendor be required to execute a Business Associate Agreement? Please also identify any restrictions on using AI services for qualitative coding or narrative generation, including requirements for data retention, model training, human review, and source traceability.**
    - The platform will not store or process PHI, PII, or other regulated information. So, no BAA will be needed, however a contract will be signed. The County prefers an AI deployment model in which all AI and analytics capabilities operate within the vendor's own secure, proprietary environment rather than through publicly available generative AI APIs. A private or air-gapped deployment using open-source models on County-managed GPUs is not required. Instead, the vendor should provide and fully manage any necessary computing resources, including GPU infrastructure. County data may not be used to train or finetune public AI models and may only be retained as needed to deliver the service. Data may not be shared with third-party sub processors without prior disclosure and explicit County approval. Additionally, all AI-generated content must undergo human review by County staff before publication or use in decision-making.

- **Please confirm that Standard Terms Section 22.3 applies to County-owned data and specifically commissioned County deliverables and does not transfer ownership of the vendor's pre-existing SaaS platform, reusable software components, models, templates, configurations, documentation, or other background intellectual property.**
    - The County confirms that it retains full ownership of all County data and any contract-specific deliverables created under this agreement, including reports, narrative content, uploaded materials, and configuration files. The vendor will retain ownership of its pre-existing platform, software, models, templates, methods, and any licensed third-party data that are part of the standard solution.

- **What are the primary business drivers and objectives for issuing this RFB, and is the County replacing an existing CHA/CHIP or public-health analytics solution or implementing a new platform?**
    - The County is implementing a new platform. We need a single solution that can help us gather, organize, and analyze data efficiently. Previously used resources, such as County Health Rankings, are no longer available, and the County does not have the staffing capacity to locate, pull, and analyze multiple datasets or compare them with locally collected data. Our objective is to adopt an easy-to-use system that centralizes data access and analysis, supports CHA/CHIP development, and allows staff to quickly pull organized information for reporting, grant writing, and other public-health functions.

- **Can the County provide details regarding its current IT/system landscape, including existing public health, data analytics, GIS, reporting, website/portal, and performance-management systems that the proposed solution will need to integrate with?**
    - The County's current IT landscape is limited. We maintain a county website for public information and have an internal GIS system. Staff primarily use Microsoft 365 for internal work, data storage, and document collaboration. Beyond these tools, the County does not use any dedicated public-health analytics, reporting, or performance-management platforms, and no complex integrations are required for the proposed solution.

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- **Can the County share the current and desired future-state (To-Be) technology landscape, including any planned systems, major initiatives, or projects that vendors should consider when proposing the solution?**
    - The County does not have any planned systems or major IT initiatives that would affect this proposal. The only requirement that vendors should consider is that the public portal must meet WCAG 2.1 AA and Section 508 accessibility requirements to ensure full usability for individuals with disabilities, including compatibility with screen readers, high-contrast display options, keyboard navigation, and other assistive technologies.

- **Does the County currently have an incumbent vendor/platform providing CHA, CHIP, public-health analytics, or reporting services? If so, can the County identify the incumbent and, if available, share the scope or prior contract information?**
    - No, we do not.

- **Does the County intend to select a single vendor for the entire solution, or will it consider a prime contractor working with technology partners/subcontractors to provide specialized CHA/CHIP platform capabilities?**
    - The County prefers a single-platform solution with unified single sign-on. We are specifically seeking an all-in-one product—whether commercially available or purpose-built—that supports all required CHA/CHIP functions without requiring staff to log into multiple systems or move data between separate tools. A prime contractor with named subcontractors is acceptable only if the final solution operates as one seamless platform for users.

- **Does the County require a commercially available/COTS platform with all core functionality already available, or will a solution involving configuration, integration, and limited custom development be acceptable?**
    - The County is open to a solution that is either commercially available off the shelf or lightly customized; however, our project timeline makes a fully developed, ready-to-deploy platform strongly preferred. A custom-built solution would only be acceptable if it could be completed within the required timeline and still function as a unified, single-platform experience for users. The County does not want a multi-system approach that requires logging into separate tools or transferring data between platforms.

- **The RFB requires 150+ continuously refreshed public-health datasets. Can the County provide the expected dataset/indicator list and clarify whether the vendor is responsible for procuring and maintaining all data sources, including any associated licensing costs?**
    - The vendor must procure and maintain all required public-health data sources, including any associated licensing costs. The County will not purchase data licenses separately. Expected datasets include Youth Risk Behavior Survey data, Behavioral Risk Factor Surveillance System data, CDC WONDER, HRSA datasets, Census Bureau data, Wisconsin DHS datasets, and WIR data. Within each source, distinct topic-level indicators (such as STI rates, hepatitis cases, suicide rates, anaplasmosis counts, etc.) should be counted as individual datasets. All datasets must be relevant, continuously refreshed, and current within the past five years. The County requires a minimum catalog of 150 datasets.

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- **Can the County provide its current CHA, CHIP and/or CHNA report templates, methodologies, intervention frameworks, and PHAB requirements that the proposed platform is expected to support? The RFB requires automated CHA/CHIP reporting, PHAB documentation and CHNA-compliant outputs.**
    - The County's previous CHA workflow and related materials can be found at: https://www.co.columbia.wi.us/columbiacounty/hhs/Health-Human-Services/Public-Health/Community-Health/Community-Needs-Assessment. The proposed platform must support the current PHAB Standards and Measures, including the latest PHAB edition and all applicable domains for local health department accreditation. For CHA requirements, the County follows Wisconsin DHS 140 standards. We do not have formal report templates or intervention frameworks beyond these standards.

- **For the qualitative analysis and AI capabilities, including coding, theme extraction, sentiment analysis, representative quotes, and automated narratives, does the County have specific AI, data privacy, human-review, or approval requirements before AI-generated content can be used in official reports?**
    - The County prefers an AI deployment model in which all AI and analytics capabilities operate within the vendor's own secure, proprietary environment rather than through publicly available generative AI APIs. A private or air-gapped deployment using open-source models on County-managed GPUs is not required. Instead, the vendor should provide and fully manage any necessary computing resources, including GPU infrastructure. County data may not be used to train or finetune public AI models and may only be retained as needed to deliver the service. Data may not be shared with third-party sub processors without prior disclosure and explicit County approval. Additionally, all AI-generated content must undergo human review by County staff before publication or use in decision-making.

- **Can the County provide the anticipated number of internal users, administrators, external partners/stakeholders, and public users so vendors can appropriately structure software licensing and pricing?**
    - The platform should support at least 10 concurrent users. The County anticipates approximately 10 administrator-level users and up to 100 editors or analysts who will work within the internal, editable portion of the system. External partners and community members will not need access to the internal workspace; instead, they will only require access to the public-facing data page. Public viewers are not known, so the system should support broad, unrestricted public access. The number of partner organizations, workspaces, and active projects may grow over time, and the platform should be able to accommodate this expansion without performance issues.

- **Can the County clarify whether FedRAMP and NIST AAL3 are mandatory requirements or preferences, and whether Azure AD/Entra ID SAML integration is required? The RFB identifies FedRAMP and NIST AAL3 as preferred, while MFA is required.**
    - The County requires compliance with core security standards to ensure the protection of all data within the platform. Microsoft Entra SSO using SAML is preferred, and automated user provisioning is desirable but not mandatory. Multi-factor authentication (MFA) must be supported. The County requires NIST AAL2 as a minimum authentication assurance level, with NIST AAL3 preferred where available. Industry-standard encryption for data in transit and at rest is required. The County does not mandate FedRAMP authorization.

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- **Since the RFB requires all services to be located in the United States, does this requirement apply only to production hosting/data centers, or also to backup/disaster recovery environments, technical support personnel, development/testing environments, and third-party AI/data-processing services?**
    - All services must be in the United States.

- **Are implementation, configuration, training, and ongoing support expected to be performed onsite, or can these services be delivered remotely? Is the County open to offshore resources for non-onsite activities such as application support, development, or data services? The RFB requires direct implementation, configuration, training and ongoing support but does not specify an onsite/remote model.**
    - Remote implementation, configuration, training, and ongoing support are acceptable. However, all support, development, and data-service resources must be located within the United States. The County does not permit offshore resources for any aspect of the project.

- **Please clarify what costs should be included in the Implementation Cost and Annual Cost. Should the five-year pricing include software licensing/subscription, hosting, third-party data licensing, AI services, implementation, configuration, data migration/integration, training, maintenance, support, and upgrades? Are vendors permitted to identify optional/add-on costs separately, and are annual price escalations permitted during the five-year term? The RFB requests implementation cost, annual cost and Year 1–5 totals.**
    - The County is open to a contract term of up to five years. Vendors may present pricing in the format that makes the most sense for the proposed solution. Our primary interest is in understanding the total annual cost for the complete product and services needed to meet the RFP requirements. Implementation costs, licensing, partner access, data or storage fees, AI usage, public portal traffic, annual increases, and optional add-ons may be itemized if relevant, but they should ultimately roll up into a clear annual total so the County can easily compare overall yearly costs across vendors.

- **Does an out-of-state vendor need to be registered or qualified to do business in Wisconsin prior to bid submission, or only prior to contract award? Please also clarify whether any Wisconsin-specific business license, vendor registration, MBE/WBE/DBE/VBE certification, local-vendor preference, or minimum participation requirement applies to this solicitation.**
    - It is the vendor's responsibility to determine whether their company must be registered or qualified to do business in Wisconsin. Any required state business registrations, licenses, or certifications must be completed prior to signing an agreement and beginning work. The County does not have additional local-vendor preferences or minimum participation requirements for this solicitation.

- **What are the expected implementation timeline and target go-live date, and will the County provide designated staff for requirements gathering, data validation, testing, and training?**
    - The County would like access to the platform no later than January 2027, with December 2026 preferred. This will allow us to begin pulling data and importing survey results and interviews. The county will have staff to participate in training in the fall of this year.

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- **Can the County provide the evaluation criteria and weighting for functionality, technical approach, experience, pricing, and other factors, and will shortlisted vendors be required to provide a product demonstration?**
    - The award will be made to the bidder offering the most advantageous proposal. Responses must include all required components outlined in the RFP, and proposed timelines are a high priority due to project deadlines. If a bidder is considered for award, the County may request a product demonstration or clarification session as part of the evaluation process.

- **Is there a preference for local vendors?**
    - No.

- **What is the annual budget allocated for this RFP?**
    - The vendor is required to provide a yearly cost estimate for the specifications provided in the bid.

- **Work will be onsite or remote?**
    - Remote work will be accepted.

- **Can vendor provide entire services from offshore location (outside US geography)**
    - No all services for this project must be in the United States.

- **Who are previous incumbents on this project?**
    - There is none.

- **We kindly request a 1-2 week extension of the proposal submission deadline to ensure a thorough and high-quality response.**
    - There has been an extension. September 14th at 9:00 am.

- **What is the total budget for this contract?**
    - The vendor is required to provide a cost estimate for the specifications provided in the bid.

- **Do you expect this to be a product offering (COTS), or can it be a custom solution that we build specifically for the County's requirements?**
    - The County is open to a solution that is either commercially available off the shelf or lightly customized; however, our project timeline makes a fully developed, ready-to-deploy platform strongly preferred. A custom-built solution would only be acceptable if it could be completed within the required timeline and still function as a unified, single-platform experience for users. The County does not want a multi-system approach that requires logging into separate tools or transferring data between platforms.

- **Who is the incumbent vendor currently providing similar services?**
    - There is none.

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- **What are the current limitations and challenges that you are facing?**
    - limited access to consolidated public-health datasets, manual data collection from multiple sources, and the need to analyze locally collected survey results and interview audio without an integrated system. We also lack tools for creating heat maps, visualizations, and structured reports. Additionally, we do not have an established platform for tracking CHA/CHIP activities or publishing public-facing data, which makes ongoing reporting and collaboration more difficult.

- **Can the County provide the estimated number of users who will access the platform, broken down by administrators, HHS staff, external partners, and public users?**
    - The County anticipates approximately 10 administrator-level users and up to 100 editors or analysts who will work within the internal, editable portion of the system. External partners and community members will not need access to the internal workspace; instead, they will only require access to the public-facing data page. Public viewers are not known, so the system should support broad, unrestricted public access.

- **What is the expected number of concurrent users for the internal platform and public-facing portal?**
    - The platform should support at least 10 concurrent users. See prior question.

- **How many departments, divisions, or partner organizations are expected to use the platform?**
    - Health and Human Services contains 5 divisions. Partner organizations are unknown currently. The number of partner organizations, workspaces, and active projects may grow over time, and the platform should be able to accommodate this expansion without performance issues.

- **Are there any existing public-facing health data portals, dashboards, websites, or GIS applications that the proposed solution will need to replace, integrate with, or coexist alongside?**
    - No

- **Please provide details of any existing data sources, databases, applications, or systems with which the proposed platform must integrate, including available integration methods or APIs, if applicable.**
    - The County does not currently use a dedicated data warehouse or enterprise analytics solution. Existing data is maintained through standard spreadsheets, public data sources, and locally stored files. Any analysis or integration would occur within the selected platform. The County's primary integration needs involve importing existing reports that have been converted into spreadsheets for analysis within the system, as well as uploading recorded interviews for theme identification. All data to be integrated or migrated will come from the past five years (2022–2026). The platform should support straightforward file uploads, and basic text or audio analysis. No large-scale system migrations are expected.

- **How frequently does the County expect to conduct a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)?**
    - Every 5 years

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- **Does the County expect the selected vendor to migrate historical CHA/CHIP reports, datasets, dashboards, or other existing content into the proposed platform? If yes, please provide the approximate volume and formats of the data and documents to be migrated.**
    - No

- **How many internal dashboards are expected as part of the initial implementation?**
    - Amount of dashboard would depend on initial data analyses and the overall process/outcome of the CHA.

- **How many public-facing dashboards or indicator views are expected?**
    - Unknown, will be based on the CHA and CHIP process.

- **Do you have any preference in terms of visualization tools (e.g. PowerBI, Tableau, etc.,)**
    - No

- **Does the County already have a public website/domain where the geospatial portal must be hosted, or should the vendor provide the public-facing web hosting/domain?**
    - The County does not have a dedicated public domain or hosting environment for a geospatial portal. The vendor should provide a fully hosted, public-facing portal, including the domain, security, uptime, and performance management. The solution should allow the County to embed or link the portal from a county website in the future, but County-hosted infrastructure is not required for initial launch.

- **Do you have an estimated project start date and desired go-live date? Please mention in months.**
    - The County would like access to the platform no later than January 2027, with December 2026 preferred. This will allow us to begin pulling data and importing survey results and interviews. The public website can be available immediately for community data access, while the CHIP-tracking portion of the site will be needed by fall 2027.

- **Do you expect the vendor to perform any tasks on-site, or can all work be performed remotely?**
    - Work can be performed remotely.

- **Do you accept offshore resources?**
    - No

- **What is the approved budget or range allocated for this project?**
    - The award will be made to the bidder offering the most advantageous proposal. The vendor is required to provide a cost estimate for the specifications provided in the bid.

- **What are the expectations and timeline for ongoing support and maintenance after the system is implemented?**
    - Ongoing support and maintenance must last through the full contracted period agreed upon, which is up to 5 years.

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- **Could you please clarify how you would like vendors to present pricing for the full five-year proposal? Specifically, should the response separate implementation costs, user licensing, partner organizations, data and storage, AI usage, public traffic, annual increases, and optional add-ons?**
    - The County is open to a contract term of up to five years. Vendors may present pricing in the format that makes the most sense for the proposed solution. Our primary interest is in understanding the total annual cost for the complete product and services needed to meet the RFP requirements. Implementation costs, licensing, partner access, data or storage fees, AI usage, public portal traffic, annual increases, and optional add-ons may be itemized if relevant, but they should ultimately roll up into a clear annual total so the County can easily compare overall yearly costs across vendors.

- **When the RFP mentions "150 or more public-health datasets," what exactly should vendors count as a dataset—source systems, published datasets, data feeds, tables, or individual indicators? It would also be helpful to receive the minimum expected catalog with publisher, geography, historical coverage, refresh frequency, and licensing responsibility.**
    - The County defines a dataset as a distinct, usable collection of structured public-health data originating from a recognized data publisher. Examples include Youth Risk Behavior Survey data, Behavioral Risk Factor Surveillance System data, CDC WONDER, HRSA datasets, Census Bureau data, Wisconsin DHS datasets, and WIR data. Within each data source, individual topic-level data (such as STI rates, hepatitis cases, suicide rates, anaplasmosis counts, etc.) should be counted as separate datasets. Each dataset included in the platform must be relevant, current within the past five years, and appropriate for public-health planning and analysis. The County requires a minimum catalog of 150 datasets. This structure reflects the standard used by modern public-health data platforms and ensures a comprehensive, well-documented dataset library.

- **Could you share which existing systems, files, datasets, reports, and dashboards need to be integrated or migrated? Please also include the expected connection method, historical period, approximate data size, annual growth, and retention requirements.**
    - The County's primary integration needs involve importing existing reports that have been converted into spreadsheets for analysis within the system, as well as uploading recorded interviews for theme identification. All data to be integrated or migrated will come from the past five years (2022–2026). The platform should support straightforward file uploads, basic text or audio analysis, and retention of these materials according to public-record requirements. No large-scale system migrations are expected.

- **Please provide an estimate of the number of administrators, analysts or editors, viewers, and external partner users who will use the platform. It would also be useful to understand peak concurrent usage, expected public users, and the number of partner organizations, workspaces, and active projects the platform should support.**
    - The platform should support at least 10 concurrent users. The County anticipates approximately 10 administrator-level users and up to 100 editors or analysts who will work within the internal, editable portion of the system. External partners and community members will not need access to the internal workspace; instead, they will only require access to the public-facing data page. Public viewer counts are not known, so the system should support broad, unrestricted public access. The number of partner organizations, workspaces, and active projects may grow over time, and the platform should be able to accommodate this expansion without performance issues.

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- **Please provide the anticipated number of users required to access the platform under various access levels such as administrators, internal users, external users like partners, concurrent public users, etc.…**
    - See previous question

- **How many dashboards, public dashboards, maps, scorecards, and formatted reports should the vendor configure for the initial launch? Please also identify the priority KPIs, intended audiences, reporting frequency, and any existing templates that should be used.**
    - The number of dashboards, maps, scorecards, and formatted reports needed for initial launch will depend on the data collected and the priorities identified through the Community Health Needs Assessment. Key performance indicators will also be determined during that process. Reporting will be monthly. The County does not currently use a formal reporting template, as this will be a new approach to tracking and presenting data.

- **Could you confirm the expected timeline for project start, configuration, testing, production launch, and public-portal launch? Please also outline the acceptance criteria, County responsibilities, training needs, support hours, and expected service levels.**
    - The County would like the system configured and initial datasets available by the end of the year. Local data, including community survey results, will also be ready for upload and analysis before year-end, January 2027 at the latest. Bids will be opened and awarded within one week, with agreements signed by October. This would allow configuration, testing, and training to begin as early as October. The vendor is expected to provide all required training and full technical support for the duration of the agreement. Acceptance criteria will include successful data upload, correct functionality of analytics tools, and readiness for staff use.

- **Could you describe the full CHA, CHIP, and CHNA workflow you expect the platform to support, from data collection and analysis through collaboration, approvals, narrative generation, versioning, and publication? Please also confirm the required final output formats, such as editable Word, PDF, web pages, raw data, or all of these.**
    - The County expects the platform to support the full CHIP, and CHA workflow, including data collection, uploading spreadsheets and survey results, analyzing datasets, generating heat maps and visualizations, and identifying key themes from interview recordings. The system should allow collaboration among staff, track edits, support simple approval steps, and enable creation of narratives and summaries throughout the CHA and CHIP processes. Version control for major drafts is preferred. Final outputs must be available in editable Word format, PDF, web-ready pages, and raw data formats to support reporting, publication, and community engagement. details about previous CHA workflow can be found here: https://www.co.columbia.wi.us/columbiacounty/hhs/Health-Human-Services/Public-Health/Community-Health/Community-Needs-Assessment

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- **Should the vendor be responsible for creating and distributing surveys, or only for importing completed survey results? Please also clarify the required formats, languages, expected volume of interview or focus-group transcripts, transcription needs, and whether audio or video processing is included.**
    - The vendor would only need to import completed survey results, not create or distribute surveys. Survey results are typically exported to Excel and should be uploaded in that format. The County anticipates approximately 20–30 interviews, with potential focus groups depending on need. Audio files will be uploaded directly for analysis; transcripts are not required. Supported languages should include English and Spanish.

- **For AI-related features, can the solution use an enterprise API from a publicly available GenAI provider, or does the County require a private or air-gapped deployment using an open-source model on dedicated GPUs? If a private deployment is required, please clarify who will provide and manage the GPU infrastructure. Please also confirm whether County data may be retained, used for model training, or processed by third-party sub processors, and what level of human review is required before AI-generated content is published.**
    - The County prefers an AI deployment model in which all AI and analytics capabilities operate within the vendor's own secure, proprietary environment rather than through publicly available generative AI APIs. A private or air-gapped deployment using open-source models on County-managed GPUs is not required. Instead, the vendor should provide and fully manage any necessary compute resources, including GPU infrastructure. County data may not be used to train or fine-tune public AI models and may only be retained as needed to deliver the service. Data may not be shared with third-party sub processors without prior disclosure and explicit County approval. Additionally, all AI-generated content must undergo human review by County staff before publication or use in decision-making.

- **Will the platform store or process PHI, PII, or other regulated information, and will a Business Associate Agreement be required? Please also confirm whether production, backups, disaster recovery, telemetry, AI processing, support personnel, and all sub processors must remain within the United States, and whether a multi-tenant SaaS model is acceptable.**
    - The platform will not store or process PHI, PII, or other regulated information. The County requires that all production systems, backups, disaster recovery environments, telemetry data, AI processing, support personnel, and any approved sub processors remain within the United States to ensure compliance with applicable privacy and security regulations. A multi-tenant SaaS model is acceptable, provided that data segmentation, access controls, and security measures are in place to protect County information and prevent cross-tenant exposure.

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- **Which PHAB edition and domains should the platform support? Please also confirm the applicable CHNA standard, including whether IRS hospital CHNA requirements apply, and specify any required crosswalks, narratives, evidence records, attachments, and submission-ready packages.**
    - The platform must support the current PHAB Standards and Measures, including the most recent PHAB edition and all applicable domains relevant to local health department accreditation. For CHNA requirements, the County follows Wisconsin DHS 140 standards, and IRS hospital CHNA requirements are not applicable. The solution must provide the ability to generate crosswalks to PHAB and DHS 140 requirements, develop and maintain narrative explanations, organize and store evidence records, include attachments, and produce submission-ready packages that meet state accreditation and compliance expectations.

- **How should the platform support evidence-based interventions, logic models, performance scorecards, and PDSA cycles? Please clarify the required intervention library, fields, approval steps, red/yellow/green status rules, and how these items should connect to priorities, measures, and partners.**
    - The platform should support evidence-based interventions through a structured library that allows users to document core fields such as objectives, target populations, activities, and expected outcomes. Logic-model elements should be supported at a basic level, including inputs, activities, and short- and long-term outcomes. The system must provide straightforward progress-tracking dashboards, including configurable status indicators such as red/yellow/green to reflect movement toward goals. The platform should allow documentation and monitoring of quality-improvement efforts, including PDSA cycles, without requiring complex workflow automation. Interventions should be able to link directly to county priorities, performance measures, and partner organizations to maintain a clear connection between strategies and outcomes. Approval steps, if used, may be simple and optional.

- **Could you confirm the public portal requirements, including domain and branding expectations, publication approval steps, multilingual support, WCAG/Section 508 accessibility, expected traffic, availability, and performance targets?**
    - The County requires a public-facing portal that provides a secure, branded, and easy-to-navigate experience. The portal should allow the County to publish selected data, visualizations, and narrative content with configurable branding elements such as logos, colors, and style settings. All public content must go through a County approval prior to publication. The public portal must meet WCAG 2.1 AA and Section 508 accessibility requirements to ensure full usability for individuals with disabilities, including compatibility with screen readers, high-contrast display options, keyboard navigation, and other assistive technologies. The County expects moderate community and partner traffic and requires high availability, reliable uptime, and responsive performance consistent with modern cloud-hosted public dashboards.

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- **Please clarify which security requirements are mandatory and which are preferred. This includes the required FedRAMP level or accepted alternatives, Microsoft Entra SSO through SAML or OIDC, automated user provisioning, MFA, NIST AAL3, encryption, and any required security certifications or assessment reports.**
    - The County requires compliance with core security standards to ensure the protection of all data within the platform. Microsoft Entra SSO using SAML is preferred, and automated user provisioning is desirable but not mandatory. Multi-factor authentication (MFA) must be supported. The County requires NIST AAL2 as a minimum authentication assurance level, with NIST AAL3 preferred where available. Industry-standard encryption for data in transit and at rest is required. The County does not mandate FedRAMP authorization.

- **Could you confirm that County ownership applies to County data and contract-specific deliverables, while the vendor retains ownership of its pre-existing platform, software, models, templates, methods, and licensed third-party data? At the end of the contract, please clarify the required data exports, transition support, retention period, and deletion certification.**
    - The County confirms that it retains full ownership of all County data and any contract-specific deliverables created under this agreement, including reports, narrative content, uploaded materials, and configuration files. The vendor will retain ownership of its pre-existing platform, software, models, templates, methods, and any licensed third-party data that are part of the standard solution. At the end of the contract, the County requires a complete export of all County-owned data in standard, non-proprietary formats, along with reasonable transition support to ensure continuity. The County expects the vendor to follow a defined data-retention period consistent with contractual and legal requirements and to provide written certification of data deletion once County data has been fully removed from the vendor's systems.

- **Please specify if any data warehouse solution and analytics solution is used currently.**
    - The County does not currently use a dedicated data warehouse or enterprise analytics solution. Existing data is maintained through standard spreadsheets, public data sources, and locally stored files. Any analysis or integration of local data would occur within the selected platform rather than through a separate warehouse or connected analytics environment.

- **Would you require the vendor to create visualization dashboards for the solution to get started with the analytics journey? If yes, please provide an indicative estimate of how many dashboards and insights will be required.**
    - The County would expect the platform to support internal data analysis, including the ability to generate heat maps, trend visualizations, and other analytic displays. County staff should be able to pull these insights into charts or other formats as needed. Amount of dashboard would depend on the outcome of the CHA.

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- **Please provide the target implementation date, production launch date, and public-website launch date.**
    - The County would like access to the platform no later than January 2027, with December 2026 preferred. This will allow us to begin pulling data and importing survey results and interviews. The public website can be available immediately for community data access, while the CHIP-tracking portion of the site will be needed by fall 2027.

- **Does the requirement that "all services" be located in the United States apply to teams for project delivery, platform and maintenance? Must support personnel be physically located in the United States?**
    - Yes, all services need to be in the located in the United States.

- **Does "FedRAMP preferred" mean FedRAMP Authorized, FedRAMP Ready, hosted on FedRAMP-authorized infrastructure, or aligned with FedRAMP controls?**
    - Any software that is FedRAMP Certified Class B, C, or D would be recommended. This is a preference but not a requirement.

- **Will equivalent certifications such as StateRAMP, SOC 2 Type II, ISO 27001, or HITRUST receive consideration?**
    - Yes