

**Request for Proposal #23-0010**  
**Health Research, Inc.**  
**New York State Department of Health**  
Office of the Medical Director  
Digital Health Initiative

**YGetIt? GET! Mobile Application Request for Proposal**

**QUESTIONS AND ANSWERS**

*Questions below were received by the deadline announced in the Request for Proposal (RFP). The New York State Department of Health/Health Research, Inc. is not responsible for any errors or misinterpretation of any questions received.*

The responses to questions included herein are the official responses by the New York State Department of Health/Health Research, Inc. to questions posted by potential bidders and are hereby incorporated into the Request for Proposal #23-0010. In the event of any conflict between the Request for Proposal and these responses, the requirements or information contained in these responses will prevail.

**Administrative:**

**Question 1:** Is there any incumbent for this opportunity?

**Answer 1:** Yes.

**Question 2:** If there is an incumbent, why are you looking for other companies? Are you not happy with them?

**Answer 2:** Our current app developer is unable to continue with the project.

**Question 3a:** If there is an incumbent then are they bidding for this opportunity?

**Question 3b:** Will the incumbent vendor who is supporting the YGetIt? GET! Mobile Application be allowed to submit their proposal response?

**Answer 3a-3b:** It is unknown if the incumbent is bidding for this opportunity.

**Question 4:** What is the allocated budget for this RFP?

**Answer 4:** The allocated budget is \$150,000, as stated in Section I. Introduction, page 3 of the Request for Proposal (RFP).

**Question 5:** Did a Pre-Proposal Conference (PPC) take place for this meeting that we aren't aware of? If yes, can you provide the participant list for this RFP?

**Answer 5:** A bidders conference was not held for this Request for Proposal.

**Question 6:** Is there any diversity goal for this RFP?

**Answer 6:** While there is not a set diversity goal for this Request for Proposal, information about the diversity within the staff engaged in the redevelopment of the app is requested in Section V. Completing the Proposal, A. Proposal Content, 4) Program Activities, question 4b, page 12 of the Request for Proposal.

**Question 7:** Is there a preferred style guide or design system we should follow for the UI/UX enhancements?

**Answer 7:** A current overview of the app showing the existing style/design is available [here](#). We are open to modifications to the current design shown.

**Question 8:** What types of health education resources (articles, videos, interactive modules) are you planning to integrate, and are there specific content providers or formats we should consider?

**Answer 8:** Content consists of short videos (both uploaded and curated from YouTube), short social media like blurbs with accompanying imagery and clickable links.

**Question 9:** Are there additional security or compliance requirements that need to be integrated into the app beyond HIPAA?

**Answer 9:** The security requirements for the funded App Developer are shown in Section II of the Request for Proposal and state: "The developer must have experience with QA and testing processes for areas including model/unit, performance, server, security, performance. The developer should have a core AGI Security compliance". Refer to Section III. Project Narrative/ Work Plan Outcomes, 6 and 7, page 6 of the Request for Proposal, for additional responsibilities of the funded App Developer.

**Question 10:** Can you specify the types of notifications and alerts that the app should support, including any personalized health information updates?

**Answer 10:** Push notification, internal text message notifications, new content alerts, appointment and medication reminders, lab results update notifications, alerts when users have been inactive for a prolonged period of time.

**Question 11:** We understand this is in relation to an existing application, was this application built in house? Page 3.

**Answer 11:** The mobile application was built by an outside contractor.

**Question 12:** Is the requirement to build on the existing solution or a complete rebuild? Page 3.

**Answer 12:** Yes, we would like to build upon and beyond the existing framework.

**Question 13:** Upon signing an NDA, would you be happy for us to look under the hood at the existing codebase? Page 3.

**Answer 13:** Yes, upon signing the NDA the selected applicant will have access to the existing codebase.

**Question 14a:** Are there any known issues/bugs? Can you share any examples or reports of the issues? Page 4

**Question 14b:** What are the current list of issues to be addressed with the App?

**Question 14c:** Most of these auth features exist in your current mobile application, what specific problems are you facing currently?

**Question 14d:** Are there any known pain points with the current mobile application?

**Question 14e:** What are the development/maintenance pain points with the existing mobile applications?

**Answer 14a – 14e:** There are no known issues or bugs, The main issue has been consistent functionality of the existing app. We are seeking to ensure the mobile application consistently maintains functionality and require that the selected applicant provides a regular list of issues and bugs.

**Question 15:** Is there any technical documentation, US/AC (user stories/acceptance criteria) you are able to share? Page 4.

**Answer 15:** Please see: <https://journals.sagepub.com/doi/full/10.1177/15248399221150789>

**Question 16:** Is hosting required as part of this brief? Page 6

**Answer 16:** Yes, hosting will be required.

**Question 17:** What cloud/hosting provider is used? Page 6

**Answer 17:** Microsoft Azure, PaaS

**Question 18:** Are there any third-party services used?

**Answer 18:** Yes, third party services include Microsoft Azure.

**Question 19:** Are you able to share what criteria would be needed to identify critical health factors? Page 6

**Answer 19:** This will be dependent on AIDS Institute's priorities and Digital Health Initiative's goals.

**Question 20:** You mention a wide tech stack on page 5 including both native & hybrid languages, is the solution currently developed natively (iOS - Swift or Objective C; Android - Java, Kotlin) or do they use a hybrid language like React Native?

**Answer 20:** Yes, the app was developed natively and is available on iOS and the Android store.

**Question 21:** What was level of satisfaction did the NY Health Department experience with the original developer? With the App?

**Answer 21:** This information is not relevant to the submission of bids for this Request for Proposal.

**Question 22:** Is the incumbent developer of the App able to bid on this contract?

**Answer 22:** Yes, the current developer of the App is able to submit a proposal in response to this Request for Proposal.

**Questions 23:** Would this contract be for one year or would the winner be able to get contract extensions for more than one year?

**Answer 23:** It is expected that contracts resulting from this Request for Proposal will have the following time period: June 1, 2024 – May 31, 2025. Contract Renewals are dependent upon satisfactory performance and continued funding. Refer to Section IV. Administrative Requirements, F. Term of Contract, page 9 of the Request for Proposal.

**Question 24:** What is projected to be the budget for the developers for the App system development/maintenance in the years after the initial year?

**Answer 24:** Available funding for Year 1 is \$150,000. At this time, contract renewals are dependent upon satisfactory performance and continued funding availability. Refer to Section IV. Administrative Requirements, F. Term of Contract, page 9 of the Request for Proposal.

**Questions 25:** What issues will the new developer need to address in the YGetit GET! Website (if any)?

**Answer 25:** This proposal is exclusively for the mobile application and not the YGetIt website.

### **App Features and Functionality Enhancements**

**Question 26:** Could you elaborate on the specific new features and functionalities you envision for the GET! app's enhancement?

**Answer 26:** Presently, the Digital Health Initiative is looking to address and enhance the core features of the application. Core features include text messaging, searchable content, content alignment with user interested (suggested content), new ways to engage users on the app, and convey health information.

**Question 27:** Are there any specific user interactions or engagement metrics you aim to improve with this update?

**Answer 27:** We aim to improve the following metrics, medical appointments, lab values, user engagement with content, text messaging, sentiment analysis, number of downloads, number of users who removed the app, number of clicks to reach medical provider, etc.

**Question 28:** Are there any user feedback or insights that have informed the planned enhancements?

**Answer 28:** No, there is no current user feedback available.

### **Testing, Maintenance, and Support**

**Question 29:** Is there an existing user group or beta testing community that can be engaged for feedback during development?

**Answer 29:** Yes, there are multiple AIDS Institute partners we collaborate with for beta testing who can be engaged for feedback during development.

**Question 30:** What are your expectations for ongoing maintenance and support post-launch?

**Answer 30:** As stated in Section III. Project Narrative/ Work Plan Outcomes, 7. Maintenance and Support, the funded App developer will provide ongoing support, bug fixes, and regular updates to ensure the app remains fully functional, secure, and compatible with the evolving mobile device landscape.

Expectations for ongoing maintenance and support post-launch will be discussed with the Funded Applicant.

**Question 31:** How do you envision handling user feedback and app updates?

**Answer 31:** This has not been determined by the Digital Health Initiative team at this time.

### **Integration and Compatibility**

**Question 32:** Are there any existing systems or platforms that the modified app needs to integrate with?

**Answer 32:** We are still establishing relationships to address various systems (e.g., electronic health portals).

**Question 33:** Are there any internal or external resources (such as third-party services, APIs, or databases) that the project will rely on? If so, how will access to these resources be managed, and are there any potential availability issues?

**Answer 33:** Presently, we are working with Microsoft Azure, PaaS cloud services. This will be discussed with the Funded Applicant.

**Question 34:** How frequently do you anticipate updating the health education resources?

**Answer 34:** Updating of health education resources may be done quarterly and based on client needs.

### **Project Management and Collaboration**

**Question 35:** Is there flexibility in the budget for unforeseen technical challenges or additional features requested during development?

**Answer 35:** The maximum amount available for this Request for Proposal for Year 1 is \$150,000. The budget will not exceed \$150,000.

**Question 36:** How frequently will stakeholder meetings occur, and what will be the preferred mode of communication?

**Answer 36:** The scope of service will outline the specifics of the deliverables. Most communication will occur via video conferencing.

**Question 37:** Can you identify any potential risks or challenges that might impact the project timeline, budget, or quality?

**Answer 37:** The proposed developer's workflow and staffing capacity will contribute to the potential risks, or challenges that may impact the project timeline and quality of work.

**Redesign phase: Redesign and develop an intuitive and visually appealing user interface that aligns with the GET! app's objectives and enhances user experience.**

**Question 38:** What user experience challenges exist that need to be enhanced in the GET! App?

**Answer 38:** The main issue has been consistent functionality of the existing app. We are seeking to ensure the mobile application consistently maintains functionality and require that the selected applicant provides a regular list of issues and bugs.

**Question 39:** How many screens/pages does the current mobile application have?

**Answer 39:** Currently there are approximately ten (10) pages in the Mobile application.

**Question 40:** Is it expected that the vendor conducts end-user research to validate the redesigned interface with the target audience before final implementation? This could include surveys and focus groups.

**Answer 40:** Yes, it is an expectation of the funded App developer to conduct end-user research to validate the redesigned interface with the target audience before final implementation, including surveys and focus groups.

**Question 41:** Can you provide the current user flow diagrams or wireframes to understand the scope of the redesign?

**Answer 41:** The attached link will provide a walk-through of the current design.  
<https://www.ygetit.org/post/get-app-walkthrough>

**Question 42:** Will the original design files and the style guides be made available to the selected vendor?

**Answer 42:** Yes. The original design files and style guides will be made available to the selected vendor.

**Question 43:** Is there a plan to develop a dark-mode theme for the application?

**Answer 43:** There is not a plan to develop a dark-mode theme for the application at this time.

**Question 44:** Is HRI planning to develop separate designs to support the application on larger screen resolution platforms such as Tablets and iPads?

**Answer 44** This application is device agnostic. The App is currently designed to run on multiple platforms (phone, desktop, laptop, tablets, etc.)

**Backend Development Integration: Develop the GET! app's backend infrastructure, server setup, and integration with the required databases to ensure HIPAA secure and efficient data management.**

**Question 45:** What specific problems are you facing on the Backend? Why are you rearchitecting the backend infrastructure? Please provide some of the major pain points.

**Answer 45:** The main issue has been consistent functionality of the existing app. We are seeking to ensure the mobile application consistently maintains functionality and require that the selected applicant provides a regular list of issues and bugs.

**Question 46:** What is the current backend tech stack and database for the GET! Application? Please provide the technical documents on the current setup to understand the project's overall scope.

**Answer 46:** The backend tech stack Backend: Node.JS, Front End: Angular and Database: SQL Server.

**Question 47:** What cloud services are you using now? And are there any plans to migrate to any specific cloud environment (E.g., AWS, Azure)?

**Answer 47:** Presently, we are currently working with Microsoft Azure and PaaS cloud services. Discussions regarding the plan to migrate to a specific cloud environment will be discussed with the Funded Applicant.

**Question 48:** Is the backend infrastructure in the cloud or on-prem? Please provide more details.

**Answer 48:** The existing backend infrastructure is hosted on the cloud Microsoft Azure.

**Question 49:** Can you detail the specific HIPAA compliance measures that need to be implemented or improved?

**Answer 49:** The app must maintain its current level of HIPAA compliance which includes protecting Patient Health Information and ensuring data integrity. Periodic vulnerability scans, penetration tests, static and dynamic code testing procedures are implemented.

**Question 50:** Is there any specific HIPAA compliance that the team has faced in the existing GET! App?

**Answer 50:** No. The app collects deidentified information.

**Question 51:** Is there an existing Content Management System for publishing updates to the application?

**Answer 51:** Yes, Yes, there is a self-service web application which is made available to upload content which is then reflected in the appropriate channels but we are seeking additional options.

**Question 52:** Is the vendor responsible for making any enhancements or modifications to the CMS system?

**Answer 52:** The vendor is not responsible for making enhancements or modifications to the CMS system.

**Question 53:** Who will be responsible for developing the supporting APIs?

**Answer 53:** The funded App developer is responsible for developing the supporting APIs.

**Question 54:** Can any of the existing Backend systems be reused? If so, which one?

**Answer 54:** Yes, existing Backend systems can potentially be reused but this would be discussed with the Funded Applicant.

**Question 55a:** What specific new APIs need to be developed to enhance the app?

**Question 55b:** Are there any APIs currently under development for future features?



**Answer 55a and 55b:** The API is currently not under development.

**Question 56:** Are you currently using the Firebase services for a Backend? If not, are there plans to utilize it in the future?

**Answer 56:** Currently no, but we expect to utilize Firebase services for a Backend and will discuss further with the Funded Applicant.

**Integrate Health Education Resource: Integrate various health education, such as articles, videos, interactive modules, and educational materials, into GET! app's database and user interface.**

**Question 57:** What specific content is expected to be captured, stored, and served by the backend (e.g., articles, directories, etc.)?

**Answer 57:** Examples of specific content to be captured, stored and served by the backend include articles, comic content, videos, directories, glossary, etc.

**Question 58:** What database are you currently using?

**Answer 58:** We currently use Microsoft Azure.

**Question 59:** Are you integrating the third-party documents in your backend? If so, where are these documents hosted?

**Answer 59:** We are using original and curated content to include in the application.

**Question 60:** Are these documents fed by the link or vendor need to host these documents?

**Answer 60:** These documents can be uploaded to the dashboard which is provided by the user.

**Question 61:** Please specify what modules are interactive and how you plan to integrate them into a mobile app.

**Answer 61:** The Digital Health Initiative team will discuss the interactive modules with the Funded Applicant, which include text messaging, videos, entering medical appointments and self-reporting health data. These existing modules have been built into the app.

**Question 62:** Will the data be served via existing APIs to the mobile app?

**Answer 62:** Yes, the data will be served via existing APIs to the mobile app.

**Question 63:** Is the vendor responsible for creating these APIs and the database to store the resources?

**Answer 63:** Yes, the vendor is responsible for creating the APIs and the database to store resources.

**User Registration and Authentication: Work on the implementation of user registration functionality, including account creation login/logout features, and authentication to ensure data privacy and user security.**

**Question 64:** Are there any plans to integrate these auth services with any external security providers (e.g., OAuth)? Please provide more details.

**Answer 64:** There are no current plans to integrate these auth services with any external security providers. This will be discussed with the Funded App developer.

**Question 65:** What specific enhancements are you looking for in user registration and authentication over your existing implementation?

**Answer 65:** Increase in the mobile app functionality including managing medical appointments, scheduling messaging, laboratory tracking and other content uploads.

**Question 66:** Will there be a different user role requiring varied levels of functionality access and permissions?

**Answer 66:** Yes, there will be a different user role requiring varied levels of functionality access and permissions.

**Notifications/Alerts: Work on the implementation of push notifications and alerts to keep users informed about important updates, reminders, and personalized health related information.**

**Question 67:** Do the existing application support push notifications functionality? If so, what notification services or tools are currently in place?

**Answer 67:** Yes, the application supports push notifications. Notifications vary based on client preference. Examples include medications and appointment reminders, announcements, text messaging and new content.

**Question 68:** Should users have the ability to configure the types of push notifications they receive through the app?

**Answer 68:** Yes, users should have the ability to configure the types of push notifications they receive through the app.

**Question 69:** What is the expected behavior when a user taps a notification?

**Answer 69:** The expected behavior is dependent on the purpose of the notification.

**Question 70:** Should the application support deep linking?

**Answer 70:** Yes, the application should support deep linking.

**Testing and Quality Assurance: Work on rigorous testing and quality assurance, security scan and assessment activities to ensure the GET! app's functionality, usability and performance meet the highest standards.**

**Question 71:** What are the specific types of testing required (E.g., unit, integration, system, usability)?

**Answer 71:** The required types of testing include functionality and usability testing.

**Question 72:** Do you have test plans and test cases in place for the existing application?

**Answer 72:** Yes, test plans and test cases are in place for the existing application.

**Question 73:** Have you done any automation to trigger the test cases?

**Answer 73:** Yes, we have done automation to trigger the test cases.

**Maintenance and Support: Provide ongoing support, bug fixes, and regular updates to ensure the app remains fully functional, secure and compatible with the evolving mobile device landscape.**

**Question 74:** Is there a Defined Release schedule? In addition to annual OS updates and Possible OS-driven updates, how often do you expect new app update releases?

**Answer 74:** Initially when the app was built, updates were made monthly and the frequency reduced thereafter. We would like to get the app released within 8-12 weeks of the issued contract. App update releases will be discussed with the Funded Applicant.

**Question 75:** Is the expectation that the selected vendor will provide the L2 and L3 support and the HRI team will provide L1 support?

**Answer 75:** Yes, the expectation is that the Funded Applicant will provide L2 and L3 support.

**Question 76:** Our understanding is that DHI needs business-hour support only, please confirm.

**Answer 76:** The Digital Health Initiative Team expects response time of within 24 hours on weekdays.

**Question 77:** Are there any known support issues that are directly impacting app functionality currently?

**Answer 77:** The current developer's staffing capacity inhibited app performance.

**Question 78:** Will the vendor or client be responsible for, and have control of, App Store accounts? (Developer and Admin Accounts)

**Answer 78:** Yes, the Funded Applicant will be responsible for and have control of App Store accounts.

**Question 79:** For the year 2023, how many hours were spent on maintenance and support of the GET! app by the previous vendor?

**Answer 79:** Sharing the number of hours spent on maintenance and support in 2023 hours will not adequately represent what will be needed for App developer. Bidders are asked to project the number of hours, hourly and an estimate of the costs to complete each activity. Refer to Attachment 4 – 12-Month Budget Proposal.

**Collaboration: Collaborate and consult with AIDS Institute Digital Health Initiative (DHI) staff to use feedback to support upgrades to the GET! app, data reporting process, and presentation of the mobile app.**

**Question 80:** How many DHI staff will be involved in the collaboration, and what will be their roles?

**Answer 80:** Five (5) Digital Health Initiative staff will collaborate on this project as directors and program coordinators.

**Question 81:** What is the frequency of required status updates, reports, and meetings?

**Answer 81:** Monthly usage data reports and quarterly/bi-annual performance reports are required.

**Question 82:** Will collaboration tools and platforms be provided, or will the vendor need to supply them?

**Answer 82:** The Digital Health Initiative Team will provide communication/collaboration platforms such as Microsoft Teams and Zoom.

**Assess the functionality of the overall app and identify enhancements as needed.**

**Question 83:** How frequently will the app's functionality be reviewed for potential enhancements?

**Answer 83:** GET! App is reviewed annually for potential enhancements; however, the Digital Health Initiative Team utilizes the monthly report to provide ongoing feedback to contractor.

**Question 84:** Are there any analytics and Crashlytics services in place to monitor the usage of the app and to triage the app crashes? Or do you expect the vendor to bring in these capabilities and include the cost in the proposal?

**Answer 84:** This should be provided by the vendor and included in the proposal.

**Work with sources (State, other contractors) to collect, sort, organize and transfer or arrange for delivery of required data for projects designated for analysis in other parts of existing work plan.**

**Question 85:** Are the requirements clearly documented for the current GET app?

**Answer 85:** Yes, requirements for the current GET app are documented.

**Collaborate with DHI to develop and provide new databases as needed for YGetIt? (YGI) project.**

**Question 86:** What are the specific requirements and features expected for the new databases?

**Answer 86:** The specific requirements and features for new databased has not been determined.

**Question 87:** How will these databases integrate with the existing infrastructure of the GET! App?

**Answer 87:** Database integration with the existing infrastructure has not been determined at this time.

**Question 88:** Will the vendor be responsible for data migration into the new databases, and if so, what is the scope of this migration?

**Answer 88:** It has not been determined if the vendor will be responsible for data migration in the new databases at this time.

**Question 89:** What is the data size that needs to be migrated, if any?

**Answer 89:** The data size that needs to be migrated has not been determined.

**Provide report of the GET! mobile application of AI data as requested.**

**Question 90:** Can you please elaborate on these requirements in further detail?

**Answer 90:** General usage and app performance data are required.

**Provide technical assistance related to data analysis, including providing training of the app for DHI staff.**

**Question 91:** What specific data analysis support or report would you require from the vendor?

**Answer 91:** General usage and app performance data are required.

**Miscellaneous Questions**

**Question 92:** Is the GET! mobile application a product that you are licensing to multiple clients?

**Answer 92:** Yes. The GET! Mobile application is licensed to multiple clients.

**Question 93:** If the app is a product, then how many clients and partners do you have on board?

**Answer 93:** We have several potential partnerships and no active users.

**Question 94:** If the app is a product, then have you customized it for your clients? If so, what specific customization have been implemented?

**Answer 94:** The app is customized to the needs of each partner. Partners have the ability to opt in or out of various core features.

**Question 95:** What are the active user counts for the GET application?

**Answer 95:** Presently, there are no active users of the app.

**Question 96:** Is there a plan to support multiple languages in the mobile app? If so, which languages?

**Answer 96:** At this time, there is no plan to support multiple languages in the mobile app.

## **Business Questions**

**Question 97:** Under pages 10 to 12 of **Section V. Completing the Proposal**, A #1 to #4, it mentions the **Maximum Pages** that each subsection question should be completed in. Within those Page limits, it will not be possible to fit answers to each of the individual questions using a normal 12-point font with double-spaced typed pages as instructed on Page 13 subsection **B. Proposal Format**. We request Health Research Inc. to **waive the Page Limit requirement** from the Proposal response as each question within a section may need more than a page to respond to, for example, the A #2 **Background and Experience** in itself has 14 questions, and if we copy an individual question and below that question provide our response, a single question response may take one or more page in itself.

**Answer 97:** Bidders do not need to include the narrative from the question in their proposal. Instead, responses to questions should be labeled based on the label of the question, 1a), 1b), etc. As stated in Section V. Completing the Proposal, B. Proposal Format, page 13 of the Request for Proposal: Proposals **MUST NOT** exceed *six (6) double-spaced typed pages* (not including the cover page, budget and attachments), using a normal 12-point font.

**Question 98:** Apart from the above waiver request, we also request to **waive the *double-spaced typed line spacing requirement***.

**Answer 98:** As stated in Section V. Completing the Proposal, B. Proposal Format, page 13 of the Request for Proposal: Proposals **MUST NOT** exceed *six (6) double-spaced typed pages* (not including the cover page, budget and attachments), using a normal 12-point font.

**Question 99:** Please confirm and name of the incumbent vendor providing support to the web and mobile versions of the application.

**Answer 99:** The incumbent vendor is Rx Health (formerly Mt. Sinai AppLab).

**Question 100:** Does Health Research Inc. anticipate any onsite presence for this project in its offices, or can this work be delivered fully remotely? If yes to onsite presence, for how many personnel and for what duration?

**Answer 100:** All work will be delivered remotely.

**Question 101:** Is Health Research Inc. open to **using some members from the Vendor's offshore team located in another country** in an Onshore-Offshore (Hybrid) delivery model, with **some work being done inside the US**, and **some outside of the US** on an as-needed basis?

**Answer 101:** All applicants must be located in and conduct business in the United States. Outside vendors located in another country are not eligible to apply.

**Question 102:** Is there any scope in the enhancement of the budgeted amount of \$150,000 or this amount is fixed for the 12-Month contract period?

**Answer 102:** The amount of \$150,000 is a fixed amount for the 12-month period.

**Question 103:** Under Page 13 of the RFP, Section **C. Review Process, Model for Rating Feasibility** has 40% weightage, and the 1<sup>st</sup> bullet point mentions that "*applicable data reporting elements exist and are available to Digital Health Initiative*", and the 2nd bullet point mentions that "*no technical constraints exist on the chosen platforms*". What is meant by applicable data reporting elements exist and the word platform in this context?

**Answer 103:** See data metrics above. Platform refers to the mobile application.

**Question 104:** Similarly **Maintaining Conceptual Integrity of the Mobile Platform** has 25% weightage. Are you looking for the Vendor to work on the web platform of the app as well, or only looking for the vendor to showcase their experience in web development in the proposal?

**Answer 104:** The vendor would work on both the web and mobile versions of the application.

**Question 105:** Is the selected vendor supposed to work on both the Mobile and Web version of the GET! App, or the requirement is to only work on the Mobile version of the app. Please confirm as from '**Attachment-4-GET-Mobile-App-Budget-Proposal**', it seems we have to quote for only the mobile version work.

**Answer 105:** The vendor would work on both the web and mobile versions of the application.

**Question 106:** In '**Attachment-4-GET-Mobile-App-Budget-Proposal**', do we need to give the '**Projected Hours** and '**Unit Cost Bid (Hourly)**' for each feature mentioned under the **GET! Mobile App** (#1 to #11) or we only need to fill in the '**Estimated Hours for GET! Mobile**' Row,



and similarly only fill the 'Estimated Hours for GET! Mobile App Data & Reporting' and 'Estimated Hours for Meetings' Rows.

**Answer 106:** Bidders are requested to provide their hourly rate and total dollar amounts in the shaded areas at end of each section; then total the amount requested for the described work and deliverables.

**Question 107:** What is the **UEI#** that is required to be filled in **Attachment 5**, is it the same as Unique Entity Number?

**Answer 107:** The UEI # is the Unique Entity Identifier.

**Question 108:** From the 'HRI Boilerplate Agreement', provided in the RFP (Page 15 to 22) below are the changes that we are requesting HRI to accept

For point #3 – We request HRI to remove this line from the #3 clause “**Requests received after this 60-day period may not be honored**”. The reason for asking to remove this line is ‘*Legally, no work can be deprived off with the payments. If the work is performed, the payments can't be forfeited for such work*’.

For point #12 – We request HRI to change the six years mandate to three years in this line in point #12 clause, “**The Records must be kept for the balance of the calendar year in which they are created and for six years thereafter.**”. The reason for asking to revise to keep records for three years in place of six years, is that it aligns with statutory requirements while maintaining efficiency.

**Answer 108:** Negotiation of the Health Research, Inc. (HRI) Boilerplate would occur with the Funded Applicant and Health Research, Inc.

**Question 109:** We would request Health Research Inc. to provide a minimum of **three (3) weeks** from the date Health Research Inc. shares the responses to the vendor questions to submit the proposal response.

**Answer 109:** All bidders must submit their proposals by the due date of April 23, 2024, at 4:00 PM ET. Late proposals will not be accepted.

**Question 110:** Whether companies from Outside USA can apply for this? (like, from India or Canada)

**Answer 110:** All applicants must be located and conduct business in the United States. We will accept applications from the United States only.

**Question 111:** Whether we need to come over there for meetings?

**Answer 111:** All meetings will be held via video conference.

**Question 112:** Can we submit the proposals via email?



**Answer 112:** Applications will only be accepted electronically to [AIGPU@health.ny.gov](mailto:AIGPU@health.ny.gov). Applications will not be accepted via fax, hard copy, courier, or hand delivery. Late applications will not be accepted.

As stated on the Cover Page of the Request for Proposal:

Applicants must submit one PDF version of the entire application (including Proposal Cover Page, Proposal Narrative and all Attachments) to: [AIGPU@health.ny.gov](mailto:AIGPU@health.ny.gov) by the date listed in the Key Dates section on the cover page of the Request for Proposal. The subject of the email line should reference [YGetIt? GET! Mobile Application](#).