

WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM
DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC)
1771 CENTENNIAL DRIVE SUITE 220
LARAMIE, WY 82070

REQUEST FOR PROPOSAL

**WYOMING EARLY HEARING DETECTION AND INTERVENTION -
INFORMATION SYSTEM (EHDI-IS)**

PROPOSAL DUE DATE AND TIME

JANUARY 17, 2025 AT 2:00 P.M. (MOUNTAIN TIME)

PROGRAM REPRESENTATIVE: SARAH FITZGERALD
E-MAIL ADDRESS: INFO@WYOMINGEHDI.ORG
TELEPHONE NUMBER: 307-721-6212

DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC)
REPRESENTATIVE: JAIME STINE

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SECTION 1: REQUEST FOR PROPOSAL (RFP)

1. SUBMISSION OF PROPOSALS:

The Developmental Preschool and Day Care Center (DPDC), Wyoming Early Detection and Intervention (EHDI) Program will receive proposals for continued development and maintenance of a secure software data management system for tracking and surveillance of newborn and early childhood hearing screening results and follow-up, including audiological and medical diagnostic results related to hearing status, vision screening results and follow-up, and early intervention data and language acquisition outcomes for children birth through five (5) years of age who are Deaf or hard of hearing (D/HH) via email. Proposals are due no later than January 17, 2025 at 2:00 p.m. Mountain Time. Email proposals to info@wyomingehdi.org.

The technical proposal and cost proposal should be emailed as separate documents and identified as such.

- 1.1. Proposals should be accompanied by the attached Proposal Price Sheet and signed by the proper official of the firm (Section 9: Proposal Price Sheet and Signature Page). All proposals should be sent via email.
- 1.2. Proposals should be submitted via email on or before the time and date specified. Proposals received after the time specified and date may be rejected.
- 1.3. The DPDC/EHDI reserves the right to withdraw this RFP, without cause, at any time before a contract has been fully signed and submitted to the DPDC/EHDI.

2. MODIFICATIONS OR WITHDRAWAL OF PROPOSALS:

- 2.1. A proposal may be altered via email before the proposal due date and time contained in this document.
- 2.2. The proposer may withdraw its proposal via email up to the proposal due date and time contained in this document. If a proposal is accepted and the proposer fails to furnish the service agreed to in the proposal, that proposer may be eliminated from future consideration.

3. PREPARATION OF PROPOSALS:

- 3.1. A proposal may be rejected if it modifies any of the provisions, specifications or minimum requirements of this RFP.
- 3.2. In case of error in the extension of prices in the proposal, unit prices will govern.

4. AWARD AND CONTRACT INFORMATION:

- 4.1. The DPDC/EHDI will ensure that minority business enterprises will be afforded full opportunity to submit proposals. The DPDC will not discriminate on the grounds of age, race, color, sex, creed, national origin, or disability status.
- 4.2. The proposer also, agrees that should this firm be awarded a contract, it will not discriminate against any person who performs work there under because of age, race, color, sex, creed, national origin, or disability. In addition, the successful proposer shall comply with the Americans with Disability Act and the Wyoming Fair Employment Practices Act.
- 4.3. The proposer expressly warrants to the DPDC/EHDI that it has the ability and expertise to perform the contract if awarded. In doing so it shall use the highest standards of professional workmanship.
- 4.4. The DPDC/EHDI reserves the right to reject any or all proposals, to waive any informality or technical defect in the proposals, or to award the contract in whole or in part, if deemed to be in the best interest of the DPDC/EHDI to do so. The DPDC/EHDI will award the contract to the firm, determined to have the most responsive and responsible proposal by the DPDC/EHDI.
- 4.5. The successful proposer will be required to agree to and execute a formal contract with the DPDC/EHDI.
- 4.6. If applicable, the DPDC/EHDI will negotiate payment terms based upon a schedule to be determined by the proposer and the DPDC/EHDI. Paying invoices will be based upon the proposer successfully completing the deliverables within the stated deadlines, and upon the DPDC/EHDI's written acceptance of the deliverables or services.
- 4.7. Contract is contingent upon award and availability of funds from a Centers for Disease Control and Prevention cooperative agreement for Enhancing Timely Data Reporting, Quality, and Use in EHDI Surveillance.

DATED: DECEMBER 12, 2024

JAIME STINE, DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER
SARAH FITZGERALD, WYOMING EARLY HEARING DETECTION AND INTERVENTION

SECTION 2: GENERAL PROVISIONS

1. INSURANCE:

- 1.1. The contract between the successful proposer and the DPDC/EHDI shall require the successful proposer to carry certain insurance policies. All such insurance policies, except workers' compensation and unemployment compensation policies, shall contain a waiver of subrogation against the DPDC/EHDI, its agents and employees.
- 1.2. The contract between the successful proposer and the DPDC/EHDI shall require cyber liability insurance which shall be sufficiently broad to cover all duties and obligations undertaken by successful proposer and shall include, but not be limited to, claims involving infringement of intellectual property, but not limited to, infringement of copyright, trademark, trade dress, invasion of privacy violations, information theft, damage to or description of electronic information, release of private information, alteration of electronic information, extortion and network security, with minimum limits as follows:
 - 1.2.1. \$2,000,000.00 each occurrence; and
 - 1.2.2. \$2,000,000.00 general aggregate
 - 1.2.3. Coverage should include breach response, regulatory fines and penalties, and credit monitoring expenses, with limits sufficient to respond to these obligations.

2. LAWS TO BE OBSERVED:

- 2.1. The proposer shall keep fully informed of, and comply with, all applicable federal and state laws or rules, all local bylaws, regulations and all orders and decrees of bodies or tribunals having any jurisdiction or authority. The proposer shall protect and indemnify the DPDC/EHDI and its representatives against any claim or liability arising from or based on the violation of any law, bylaw, ordinance, regulation, order or decree whether by himself or its employees.

3. ASSIGNMENT:

- 3.1. The proposal shall not be assigned by the proposer. Third party participation is authorized only as a joint venture that shall be clearly stated in detail in the original proposal and signed by all parties participating.
- 3.2. The proposer shall not enter into any subcontracts for any of the work contemplated under this RFP without the DPDC/EHDI's prior written authorization.

4. ACCOUNT REPRESENTATIVE:

4.1. The successful proposer shall appoint, by name, a company representative who shall be responsible for servicing its account. The representative shall provide the services required to ensure that the account will be administered in an organized, systematic manner.

5. EXTENSION AND AMENDMENT:

5.1. The proposer and the DPDC/EHDI covenant and agree that this proposal or subsequent contract may, with the mutual approval of the proposer and the DPDC/EHDI, be extended multiple times for a total contract period not to exceed ten (10) years.

6. AUDIT AND ACCESS TO RECORDS:

6.1. The DPDC/EHDI or any of its duly authorized representatives shall have access to the proposer's books, documents, papers, electronic data and records that are directly pertinent to this RFP.

7. CONFLICT OF INTEREST:

7.1. The proposer warrants that no kickbacks, gratuities, or contingency fees have been paid in connection with this RFP and none have been promised. The proposer warrants that no one being paid pursuant to the proposal is engaged in any activity that would constitute a conflict of interest with respect to the purposes of the proposal.

8. NO FINDER'S FEE:

8.1. The proposer warrants that no finder's fee, employment agency fee, or other such fee related to the proposal shall be paid.

9. INDEMNIFICATION:

9.1. The proposer shall release, indemnify, and hold harmless the DPDC/EHDI, and its officers, agents, and employees from any and all claims, suits, liabilities, court awards, damages, costs, attorneys' fees, and expenses arising out of proposer's failure to perform any of proposer's duties and obligations hereunder or in connection with the negligent performance of proposer's duties or obligations, including, but not limited to, any claims, suits, liabilities, court awards, damages, costs, attorneys' fees, and expenses arising out of proposer's negligence or other tortious conduct.

10. APPLICABLE LAW/VENUE:

- 10.1 The construction, interpretation, and enforcement of this RFP shall be governed by the laws of the State of Wyoming, without regard to conflicts of law principles. The terms “hereof,” “hereunder,” “herein,” and words of similar import, are intended to refer to this Request for Proposal as a whole and not to any particular provision or part.

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SECTION 3: SPECIAL PROVISIONS INFORMATION

PROPOSALS SHOULD BE SUBMITTED VIA EMAIL BY 2:00 P.M. MOUNTAIN TIME ON JANUARY 17, 2025.

PROPOSALS SHOULD BE EMAILED TO: INFO@WYOMINGEHDI.ORG

PROPOSALS RECEIVED AFTER THE TIME AND DATE SPECIFIED MAY BE REJECTED.

It is the responsibility of the proposer to clearly identify all information that is considered confidential in accordance with the Wyoming Public Records Act, W.S. §16-4-201 through §16-4-205. Please identify each confidential page with the word "CONFIDENTIAL" in capital, bold letters centered at the bottom of each page. Information not clearly marked may be considered public. If the proposer submits information that it believes is confidential, it should include a statement justifying its basis for that belief.

1. DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC) AND WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM PARTIES

- 1.1. This Request for Proposal (RFP) is issued by the DPDC/EHDI.
- 1.2. Throughout this document and others in connection with this project, various references are made, or will be made to the "DPDC/EHDI". Generally, whenever this reference appears, the term "DPDC/EHDI" incorporates all agencies that will be working on this project.
- 1.3. It should be understood that the Director of the DPDC is empowered to be the signatory on all contracts, agreements, or modifications pertaining to this project. Any contracts, agreements, or modifications not bearing this signature or that of a designee are invalid.
- 1.4. This RFP constitutes a Large (Formal) purchase by the DPDC. The DPDC's Procurement Policy may be found in Appendix A.

2. CONTENT AND PROCUREMENT POINTS OF CONTACT:

- 2.1. EHDI is the primary point of contact from the date of release of the RFP until the Contract is fully executed.

2.2. Written questions about the procurement process should be submitted via email (info@wyomingehdi.org) until 2:00 p.m. Mountain Time on December 20, 2024. Any questions received after the deadline may not be accepted or considered.

2.3. Written responses will be made available via email and on the Wyoming EHDI website (www.wyomingehdi.org). Responses will not identify the firm that submitted the question. Only the written answers issued by the DPDC/EHDI are the official position on an issue, and these answers shall become part of the RFP.

3. RESTRICTIONS ON COMMUNICATIONS WITH DPDC/EHDI STAFF:

3.1. Until a proposer is selected and the selection is announced, proposers are not allowed to communicate with DPDC/EHDI staff about the RFP except:

3.1.1. Procurement Section:

3.1.2. Via written questions through email (info@wyomingehdi.org).

3.2. If a proposer violates, the DPDC/EHDI reserves the right to reject the proposal.

4. EFFECTIVE DATES OF PROPOSAL:

4.1 All terms, conditions and costs quoted in the proposer's response will be binding on the proposer for 180 days from the effective date of the proposal.

5. ADVERTISING AWARD CONDITIONS:

5.1 A fully executed contract should be completed with DPDC/EHDI before the successful proposer may advertise the award of the contract or the services being provided. The proposer should agree not to refer to awards in commercial advertising in such a manner that states or implies that the firm or its services are endorsed or preferred by the DPDC/EHDI.

6. CONTRACT NEGOTIATIONS:

6.1. The DPDC/EHDI will notify the most qualified/successful proposer and negotiate a contract in accordance with the DPDC's Advisory Board contract guidelines. The successful proposer will be required to enter into and sign a formal contract with the DPDC/EHDI.

6.2. In the event the successful proposer fails to reach an agreement with the DPDC/EHDI, negotiations will be terminated, and at the DPDC/EHDI's sole

discretion, negotiations may be initiated with the next most qualified/successful proposer, or the RFP may be withdrawn or reissued. This process will be followed until an agreement is reached, or until the DPDC/EHDI determines that the RFP will be withdrawn or reissued. The DPDC/EHDI assumes no obligation to a selected proposer until an agreement is reached and a contract is fully executed. The DPDC/EHDI will not negotiate concurrently with more than one proposer for the same award.

7. BEGINNING WORK:

- 7.1. The successful proposer may not perform any work that could be billed until a contract has been executed. The DPDC/EHDI will not pay for any work by the proposer before a contract is executed.

8. COPYRIGHT INFRINGEMENT:

- 8.1. The proposer warrants that no materials, products and services proposed will infringe upon or violate any patent, copyright, trade secret, or other proprietary right of any third party. In the event of a claim by any third party against the DPDC/EHDI, the DPDC/EHDI shall promptly notify the proposer, and the proposer shall defend the claim. The defense will be at the proposer's expense.

9. COST OF PREPARING PROPOSALS:

- 9.1. All costs incurred for preparing the proposal and for other procurement related activities are solely the proposer's responsibility. The DPDC/EHDI will not provide reimbursement of these costs.

10. RISKS AND LIABILITY:

- 10.1. By submitting a proposal, a proposer assumes any and all risks and liability associated with information in the proposal and its release.

11. AMENDMENTS:

- 11.1. The DPDC/EHDI reserves the right to amend this RFP before the proposal submission date. Amendments will be uploaded to the Wyoming EHDI website (www.wyomingehdi.org). It is the proposer's responsibility to check the Wyoming EHDI website for amendments.

12. PROPERTY DAMAGE AND LIABILITY INSURANCE:

- 12.1. The proposer may be required to furnish proof of property damage liability insurance in the amount deemed necessary by the DPDC/EHDI for the project, if applicable.
- 12.2. Questions regarding required insurance coverages and limits for this project should be submitted in writing in accordance with instructions outlined in the special provisions.

13. MISREPRESENTATION OF INFORMATION:

- 13.1. Misrepresentation of a proposer’s status, experience, or capability in the proposal may result in disqualification of that proposer from the selection process. Discovery of litigation or investigations in a similar area of endeavor may, at the discretion of the DPDC/EHDI and after consultation with the DPDC Advisory Board, preclude the proposer from the selection process.

14. DISPOSITION OF PROPOSALS:

- 14.1. All material submitted becomes the property of the DPDC/EHDI, which is under no obligation to return any of the material submitted.

15. LEGAL CONSIDERATION:

- 15.1. Proposers are presumed to know all requirements of the RFP and applicable law. Any proposal that fails to meet all requirements may, at the option of the DPDC/EHDI, be rejected without further consideration.

16. PROPOSER RELATIONSHIP WITH DPDC/EHDI:

- 16.1. Proposer staff will have an ongoing relationship with DPDC/EHDI staff that is based on trust, confidentiality, objectivity and integrity. The proposer will operate at all times in the DPDC/EHDI’s best interests and in a straightforward, trustworthy and professional manner. The proposer shall:
 - 16.1.1. Work cooperatively with the DPDC/EHDI’s staff and business partners whenever required.
 - 16.1.2. Work cooperatively with the staff of other proposers whenever required.

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SECTION 4: KEY DATES

The following schedule of events is subject to change at the sole discretion of the DPDC/EHDI:

Event Description	Date	Time
RFP Released	December 12, 2024	N/A
Closing Date for Questions	December 20, 2024	2:00 P.M. MT
Response to Questions Returned	December 27, 2024	N/A
Proposal Submission Due Date	January 17, 2025	2:00 P.M. MT
Oral Presentations	January 27 - 31, 2025	N/A
Tentative Contract Award Date	February 2025	N/A
Tentative Work Begins Date	July 2025	N/A

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SECTION 5: ADMINISTRATIVE INFORMATION

1. INTRODUCTION AND BACKGROUND:

The Wyoming EHDI Program works to ensure that children who are D/HH birth to school-age are identified as early as possible. This is done through coordinating universal newborn hearing screening in the state's birthing hospitals and with licensed midwives.

In a 1988 report to Congress and the President, the Commission on Education of the Deaf estimated that in the United States, the average age that children with congenital hearing loss were identified was 2½ to 3 years of age, with many children not being identified until 5 or 6 years of age¹. Newborn hearing screening in Wyoming began in and has been universal (>95% of Wyoming births screened) since 1999. The Joint Committee on Infant Hearing (JCIH) recommends that newborns be screened by one month of age, evaluated prior to three months of age (when needed), and referred to early intervention before six months (when appropriate) to promote optimal developmental outcomes for children identified as D/HH².

Research has demonstrated that when these "1-3-6" guidelines are met children who are D/HH develop language and literacy on par with their peers who have normal hearing³. The Centers for Disease Control and Prevention estimates that the incidence of congenital hearing loss is 2-3/1000 births⁴. On average, there are 15-20 Wyoming children identified as D/HH at birth annually with additional children identified with transient conductive hearing loss that is medically treatable and remediated. Permanent hearing loss may be unilateral or bilateral and range from minimal to profound. The laterality, type, and degree of hearing loss may affect the communication options that families choose for their children ranging from total communication (e.g., auditory, verbal, visual) to only one modality. Many parents choose for their children to have assistive hearing devices and, when appropriate, cochlear implants.

By the time a child enters school, the incidence of permanent hearing loss has been shown to at least double^{5,6}. To identify late onset hearing loss as early as possible, Wyoming EHDI provides community-level partners (e.g., child development centers, Early/Head Starts) with training on hearing screening protocols and follow-up procedures. The Wyoming EHDI Program also makes available age-appropriate audiological evaluation and management services, early intervention support for families and professionals, supports the collection and tracking of language acquisition outcomes for children who are D/HH through the Wyoming Early Intervention Initiative (WEII) for Families and their Children who are D/HH, and administers the Wyoming Children's Hearing Aid Program.

The DPDC/EHDI coordinates newborn and early childhood hearing screening and follow-up tracking and surveillance through a contract with the Early Intervention and Education Program (EIEP) of the Wyoming Department of Health.

In order to meet state and federal reporting requirements, a software system containing all records and documents applicable to tracking and surveillance of newborn and early childhood hearing screening results and follow-up including audiological and medical diagnostic results related to hearing status, vision screening results and follow-up, connection to family support, and early intervention data and language acquisition outcomes for children birth through five (5) years of age who are D/HH. The system should allow for pulling essential reports that are provided to the Centers for Disease Control and Prevention (CDC) and the Maternal and Child Health Bureau, Health Resources and Services Administration (MCHB) in order to comply with federal funding requirements.

REFERENCES:

¹ Looking to the Future: Commission on Education of the Deaf Recommendations. 1988. *American Annals of the Deaf* 133(2): 79-84. doi:10.1353/aad.2012.1108

² Year 2019 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs. 2019. *Journal of Early Hearing Detection and Intervention* 4(2): 1-44. doi:10.15142/fptkb748

³ Year 2007 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs. 2007. *Pediatrics* 120(4): 898-921. doi:10.1542/peds2007-2333

⁴ Quick Statistics About Hearing. 2021. Centers for Disease Control and Prevention. <https://www.nidcd.nih.gov/health/statistics/quick-statistics-hearing>. Accessed: December 12, 2024.

⁵ Hearing Loss in Children: A Review. 2020. Lieu, JEC, M Kenna, S Anne, L Davidson. *JAMA* 324(21): 2195-2205. doi:10.1001/jama.2020.17647

⁶ Congenital Hearing Loss. 2017. Korver, AMH, RJH Smith, G Van Kamp, MR Schleiss, MAK Bitner-Glindzicz, LR Lustig, S Usami, AN Boudewyns. *Nature Reviews Disease Primers* 3, 16094. doi:10.1038/nrdp.2016.94

2. PURPOSE AND INTENT:

The purpose of this Request for Proposal (RFP) is to solicit competitive proposals from vendors who can offer a statewide web-based data system for collection and reporting of state and federal data requirements. The system will have the ability to collect, store, and analyze specific data elements and other information to meet the DPDC/EHDI needs and expectations, as described within this RFP.

3. PARTNERS:

The EHDI team, birthing hospital staff, midwives, audiologists, early interventionists, special education service providers, and family liaisons who serve children and families receiving newborn and early childhood screening and follow-up services including early intervention are the primary users of the data system. Users are required to input child specific information in regards to newborn and early childhood hearing screening and follow-up, including early intervention and language acquisition outcomes for children who are D/HH. Additional partners include the EIEP, CDC, and MCHB. Data are collected and analyzed to make continuous improvements for children who receive EHDI services in Wyoming.

4. RFP REQUIREMENTS:

4.1. The DPDC/EHDI defined the requirements stated herein and created this RFP.

The Requirement/Specifications document is included as a part of this RFP.

THESE ARE MANDATORY REQUIREMENTS, WHICH MAY BE SUBJECT TO VARIATION AND MODIFICATION ONLY THROUGH THE WRITTEN APPROVAL OF THE DPDC/EHDI.

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SECTION 6: REQUIREMENTS/SPECIFICATIONS

RESPONSIBILITIES OF CONTRACTOR

1. SCOPE OF PROJECT:

The successful proposer will be required to continue to develop and maintain the Wyoming Early Hearing Detection and Intervention - Information System (EHDI-IS) in accordance with federal and state requirements. This system must be capable of meeting the requirements listed below for the purposes of tracking, surveillance, and state and federal reporting.

1.1. SCOPE OF ACTIVITY

1.1.1. Meetings over project work with EHDI

- EHDI will schedule phone/web-based meetings with the successful proposer to review project components. Upon a fully executed contract, meetings will be held at the discretion of EHDI.
- EHDI staff will work with the successful proposer as decisions are made about technical architecture (e.g., hardware and software, naming conventions) and provide clarification as necessary.
- EHDI staff will work with the successful proposer to review, refine, and approve mock-ups of modules, reports, and other functions.
- EHDI staff will work with the successful proposer on the ongoing development of data dictionaries.

1.1.2. Project Requirements Overview

- Provide EHDI a plan for meeting each of the contract deliverables and timeline.
- Complete all components of the project as stated in the executed contract's Statement of Work.

1.1.3. Project Management Responsibilities

- EHDI will monitor the successful proposer's overall performance of work products and deadlines and provide feedback to ensure quality products.

1.1.4. Implementation Preparation Responsibilities

- EHDI staff will collaborate with the successful proposer to create deployment plans, including guidelines for transition to the new data system/enhancement, schedule, and roles and responsibilities.
- EHDI staff will test modules and provide feedback to the successful proposer as modules are developed until they function as intended.

- EHDI staff will communicate with the successful proposer to ensure adequate system performance based upon anticipated system peak usage.
- EHDI staff will ensure end-user support (e.g., training, release notes) is provided to all end users for data system enhancement.
- EHDI staff will confirm that contingency plans exist for problems during and after deployment of data system enhancement.

1.2. SUGGESTED PROJECT DURATION:

The proposed contract will begin tentatively in July 2025 with initial meetings to begin upon full execution of the contract with a point of contact for the agency to be determined within fifteen (15) calendar days of contract signature. The contract will be in place through June 2030 contingent upon continued Centers for Disease Control and Prevention funding and an annual review to update Scope of Work requirements. It is expected that the existing EHDI-IS will continue to be developed and maintained through this RFP. However, should a transition of all current records housed in the existing EHDI-IS be necessary, the transition shall begin no later than ninety (90) calendar days of a signed contract. In addition, training for EHDI staff related to any transition of records shall begin within thirty (30) days of Contract execution and recorded webinars for end-users shall occur within sixty (60) calendar days of project completion.

2. **GENERAL REQUIREMENTS:**

2.1. LOCATION AND WORK ENVIRONMENTS

The DPDC/EHDI has no requirements or expectations as to where the Proposer will be physically located. The Proposer, however, shall attend regularly scheduled meetings via either phone or web as prescribed by EHDI.

2.1.1. On-site requirements: There are no on-site requirements associated with this project.

2.1.2. Offsite Remote Requirements:

2.1.2.1. Offsite Remote Work Hours: This entails potentially performing work for the State of Wyoming, using remote access to networks and systems in accordance with the State of Wyoming VPN (Virtual Private Network) access guidelines. The proposer would be required to utilize the

State of Wyoming VPN client software and meet the requirements for proposer remote access.

2.2. COMMUNICATION REQUIREMENTS:

2.2.1. Proposer shall provide a single point of contact and will create and provide a communication plan. The Communication Plan should encompass objectives, goals, and tools for all communications, including top-down, bottom-up, and cross-organizational communications.

2.2.2. Bi-monthly project status reports/meetings: status reports/meetings outlining the project's progress updates which include key issues, identified unknown risks, accomplishments, and compliance with milestones and delivery dates.

2.3. EQUIPMENT:

2.3.1. Proposer shall provide all electronic and telecommunications equipment needed to support the contract, including but not limited to:

- 2.3.1.1. File Servers
- 2.3.1.2. Personal computers
- 2.3.1.3. Software applications
- 2.3.1.4. Internet service provider

2.4. EHDI PERSONNEL:

2.4.1. EHDI will provide a project manager who will prioritize tasks and facilitate iterative development, provide guidance on task requirements, assist in User Acceptance Testing (UAT), schedule meetings and planning sessions, and be the point of contact between the successful proposer and EHDI.

2.4.2. EHDI will provide customer support and training for users of the EHDI-IS on an ongoing basis. Training provided by EHDI may include data specification documents, training guides, and additional testing.

3. SYSTEM OR WYOMING IT STANDARDS:

The services, work products and final deliverables provided by the proposer shall be in compliance with State Statutes, Chief Information Officer Promulgated Rules, State Information Technology (IT) policies and standards and the Wyoming Department of Health standards for required system hardware, software and development components, when completed and accepted by EHDI.

- 3.1 State of Wyoming Electronic Transactions:
Visit <https://rules.wyo.gov/Search.aspx> and search for Electronic Transactions. Click on the Enterprise Technology Services drop-down arrow, then the Director's Office drop-down arrow. Chapters 4, 5 and 7.
- 3.2 State of Wyoming IT Policies and Standards:
<https://ets.wyo.gov/resources/policies-standards>
- 3.3 Wyoming EHDI Program and Wyoming EHDI – Information System (EHDI-IS) below:

MAINTAIN the Following System Requirements

1	Provide a web-based newborn and early childhood hearing screening, diagnostic evaluations, early intervention, family support, and language acquisition outcomes management system that may be accessed without installing client software. For this RFP, ActiveX browser components and software plug-ins (e.g., Adobe Reader, Microsoft) are not considered client software for this requirement.
2	Client Workstations. Accommodate users accessing the system using either a laptop or desktop hardware running currently supported versions of Microsoft operating system, Apple operating system, Microsoft Office, and, at a minimum, currently supported versions of Apple Safari, Microsoft Edge, and Google Chrome (PC and Apple).
3	Network Services. Accommodate users with a minimum 56kBps-based Internet connection.
4	Data Integrity and Validity. Provide the ability to check data integrity and validity via various cross-referencing field verification checks.
5	Reduce Redundant Data Entry. Provide the ability to reduce redundant and irrelevant data entry and use forced-choice entry techniques where applicable.
6	Microsoft Office Compatibility. Provide the ability to utilize Microsoft Office 2010 and its evolutionary replacement for required documents, spreadsheets, narratives, summaries, and face sheets (detailed history documents).
7	Demonstrate an application architecture and design consistent with current industry best practices. The database shall be scalable, hardware-independent, and support cross-platform application operations.
8	Provide software assurance guarantees.

9	Provide an established process for migrating to new software releases.
10	Additional focus areas as required.

MAINTAIN the Following Basic Security Requirements

1	Ability for web pages to be accessed directly.
2	Timeout a user's screen with an automatic timer for security.
3	Capability of mass security updates with written notice to EHDl staff.
4	Provide for the use of Secure Sockets Layer (SSL) encryption initially and Transport Layer Security (TLS) or other forms of comparable Advanced Encryption Standard (AES) encryption, for all transfer of individually identifiable data between client and server.
5	Ability to complete mass updates to groups of users as needed.
6	Use a consistent security model throughout.
7	Capability to log into the system.
8	Capability to require two-factor authentication to log into the system.
9	Require a unique username and password to log into the system.
10	Mask the password with asterisks as the user types in the password.
11	Capability to limit the number of log-on failed attempts to three (3) and then direct the user to a page indicating that log-on failed.
12	Ability to restrict access and record failed and successful security contacts.
13	Require the user to enter a new password if the old password has expired and provide the capability to notify the user if the username or password is not valid.
14	The ability to build individual security profiles that users would be associated with, rather than each individual having its own set of permissions.
15	Provide the capability to associate roles with a user and provide the capability to add, change, or delete roles.

16	<p>Capability to assign a role to an application area using a security setting of:</p> <ul style="list-style-type: none"> • No access (NA); • Read-only (R); • Edit/Read (ER); • Edit/Add/Read; and • Edit/Add/Read/Delete-For EHDl only
17	<p>Capability of the System Administrator role to add, change, delete page controls (i.e. fields, checkboxes, approval buttons, etc.) for each page.</p>
18	<p>Provide the ability to copy a role and its defined access rights.</p>
19	<p>Ability for non-software users to access the system based on their rights and roles. Examples of non-software users are not limited to: State monitors, auditors, and administrators.</p>
20	<p>Capability to define the SMTP (Simple Message Transport Protocol) server user account and password that shall be used for email notifications.</p>
21	<p>Capability for designated users to control who has access to the results of queries.</p>
22	<p>Ability to maintain an audit trail of transactions made in the software system, identifying who made the change, the type of change made, and the date and time the change was made. This shall be accomplished for adds, deletes, and edits. This shall include all security maintenance transactions. Both a before and after image of data changes shall be captured to record the specific data elements that were modified and shared with EHDl upon change/request.</p>

Data Migration and Integration Requirements

It is expected that the existing EHDl-IS will continue to be developed and maintained through this RFP. However, should a transition of all current records housed in the existing EHDl-IS be necessary, the proposed software system shall provide the capability to migrate data from the existing EHDl-IS. The successful proposer will analyze database tables and data elements within the existing EHDl-IS and will create a Migration Plan that is aimed at migrating required data elements to the proposed system. The Migration Plan will also include a plan for populating required data elements that will not be addressed by the migration of data from the existing EHDl-IS. Unless specified otherwise within the Migration Plan, the successful proposer will be required to provide all tools, equipment, materials, and resources necessary to effectively perform the required work tasks.

MAINTAIN the Following Information and Data Element Requirements

The following requirements are expected to be maintained over a five-year period. The proposed software system will continue to have the ability to:

1	Enable users to view data in their approved profile.
2	Log all activity related to accessing and editing files.
3	Collect all child details/demographics (information identifying the child including but not limited to: first name, middle name, last name, date of birth, sex, birth location, birth weight, plurality, birth order, transfer status) as prescribed by EHDI.
4	Collect parent details (including but not limited to: maternal and paternal date of birth, education, race, ethnicity, payment type, contact information of parents and guardians).
5	Continue to allow for electronic data linkage and record matching with Wyoming Vital Statistics Services (VSS) including updates based on data collected by VSS and required by state and federal grant reporting.
6	Maintain the reporting process for newborn hearing screening hospital statistics including but not limited to: number of live births, number of children not screened, reasons not screened, pending rescreenings, failed rescreenings, contact information for any children in need of follow-up, and notes.
7	Maintain the importing process for Vital Statistics Services records to include automatic and manual matching when necessary including option to select reason for manual matching and reports associated with these processes.
8	Maintain monthly reports sent back to hospitals regarding individual and aggregate newborn hearing screening and follow-up data.
9	Collect all hearing screenings done for a child and screening details (including but not limited to: dates administered, screening methods, results, provider/screener, notes).
10	Collect reasons for hearing screenings not being completed for individual children (including but not limited to: waived, missed, died).
11	Collect detailed information regarding all audiological and medical diagnostic evaluations related to hearing status done for each child. This includes but is not limited to: diagnostic date, reporting date, audiologist, family's location (home city) at time of evaluation, hearing loss type, degree, slope, tests administered, results of tests, recommendations, case history, notes.

12	Maintain amplification information page. This includes but is not limited to: amplification status, amplification type, amplification date, serial number, make, model, ear/laterality, age at initial amplification, hours of daily use, whether family received information on amplification maintenance.
13	Maintain referral information page regarding referrals. This includes but is not limited to referrals to family to family support, D/HH adult to family support, and the WEII Plus Coordinator.
14	Maintain iEHDI patient-level data files to collect all current and future data field requirements from the Centers for Disease Control and Prevention for patient-level datasets. Current requirements include 179 variables listed in the CDC Data Dictionary (Appendix B).
15	Continue to make available functionality to construct iEHDI patient-level data files without assistance from proposer.
16	Maintain all SHALL requirements of the CDC EHDI-IS Functional Standards (Appendix C).
17	Maintain reports necessary to complete the annual CDC Hearing Screening and Follow-up Survey (HSFS) with aggregate data for the report and individual child level data to ensure accuracy and completeness of data.
18	Maintain ability for individual users to complete follow-up action items.
19	Maintain ability to generate surveys for groups of users and specific users including the option to copy questions and responses to previous surveys for repeated questions on new surveys.
20	Maintain ability for documents and document type (including but not limited to: newborn hearing screening results, failed rescreening forms, diagnostic results, release of information forms, WEII Plus assessment results, letters, Language ENvironment Analysis) to be added to individual children's records
21	Enable the user, based on their level of access, to complete ad-hoc queries/reports by checking few or all fields from a list of fields as prescribed by EHDI.

22	<p>Maintain reports as prescribed by EHDI in the following areas:</p> <ul style="list-style-type: none"> ● Newborn hearing screening and follow-up <ul style="list-style-type: none"> ○ Birthing hospitals ○ Transfer hospitals (out of state) ○ Wyoming residents born out of state ○ Out of hospital births ● Vital statistics ● Risk factors for late onset hearing loss ● Early childhood hearing screening and follow-up ● Early childhood vision screening and follow-up ● Diagnostic results (audiological and medical) ● Audiology report reviews by independent audiologists ● Early intervention data for children diagnosed as D/HH ● User management
23	<p>General Maintenance – System updates, bug fixes and report updates as determined by the needs of WY EHDI.</p>
24	<p>Continue to provide automated functions that support program practices for end-users, (e.g., date tickler or calendar reminders of critical dates such as deadlines for hearing screening follow-up).</p>
25	<p>The EHDI-IS will continue to have security measures that allow the state to comply with federal, state, and local privacy requirements, including those that address:</p> <ul style="list-style-type: none"> • Data backup and recovery • Data storage • Data encryption • Proper destruction of data • Secure transmission of data
26	<p>Selected modifications within the data system with little or no reliance on the successful proposer, such as adjusting user permissions and adding support documents.</p>
27	<p>Track entries/changes made by end-users to data in the database, and the user who made them.</p>
28	<p>Support the use of translation tools (e.g., Google Translate) to translate system web pages and documents.</p>

DEVELOP/UPDATE the Following Information and Data Element Requirements

The following requirements are expected to be developed and/or updated over a five-year period. The proposed software system will have the ability to:

1	Update the uploading and importing processes including automatic and manual matching of records for results downloaded from newborn hearing screening equipment at birthing hospitals in order to accommodate file format updates from equipment manufacturers.
2	Collect medical information relative to hearing status (including but not limited to: congenital cytomegalovirus, otolaryngology).
3	Update and develop early intervention information including but not limited to referral dates, eligibility, IFSP/IEP/non-Part C early intervention start dates, IFSP/IEP review dates, IFSP/IEP/non-Part C early intervention exit dates, reasons for exit, reasons for no early intervention, additional disabilities, service time per month, communication choices (listening and spoken language, sign language, total communication, cued speech).
4	Collect service information (list of services for a plan for a child – e.g., name of service, provider name, start date, end date, narrative information, frequency-intensity, etc.). The ability to collect service details.
5	Make available functionality to validate iEHDI patient-level data files without assistance from proposer.
6	Develop and update automated data reports to summarize demographic data from iEHDI patient-level datasets.
7	Develop and/or maintain all SHOULD requirements of the CDC EHDI-IS Functional Standards (Appendix C).
8	Develop and/or maintain all MAY requirements of the CDC EHDI-IS Functional Standards (Appendix C).
9	Develop queries needed to extract data for use in quality improvement of EHDI services.
10	Ensure/develop the ability for authorized users to export data to other data management and analytical software tools (Excel and SAS) for demographic factors that may affect screening, diagnosis and early intervention timelines.

11	Maintain and update data fields to collect language acquisition outcomes for children participating in the WEII Plus assessments including but not limited to results from the DAYC-2, MacArthur, Cincinnati Auditory Skills Checklist, Expressive One Word Picture Test, LittleEARS.
12	Maintain and update import process for CSV files of WEII Plus assessment data as prescribed by EHDI.
13	Develop reports for individual child data regarding language acquisition progress and outcomes for children completing WEII Plus assessments.
14	Develop reports for aggregate data regarding language acquisition progress and outcomes for children completing WEII Plus assessments.
15	Develop and update ability to generate follow-up action items for individual users including but not limited to release of information, letter and fax back form templates.
16	Integrate electronic signature capabilities.
17	Provide additional built-in edit-check routines at the application and/or database levels (e.g., format checks, field validation restrictions, import restrictions/checks).
18	Provide reports to assess data quality (e.g., error reports, outliers, missing data).
19	Directly or through a related application, reporting and analysis tools that provide end-users, including state and local program staff, with easy access to the data in both raw form and reports based on access.
20	Provide interoperability that allows for linking the EHDI-IS to other statewide longitudinal and early childhood data systems.

3.4 Statutory Mandates:

Code of Federal Regulations (CFR) Title: 34, Parts 300 & 303
 34 CFR Part 99 (Family Educational Rights and Privacy Act)

4. TECHNOLOGY AND SPECIFICATIONS:

Technology which will drive the development, implementation, and operations of the proposed data system should have the following specifications to the extent applicable:

4.1. Proposed technology (hardware and software)

- 4.2. If existing State of Wyoming environment will be utilized, provide details as to the configuration and operating system
- 4.3. In-house development versus Custom Off-the-Shelf (COTS) application
- 4.4. Program language
- 4.5. Web development
- 4.6. ADA compliance
- 4.7. Interfaces and/or integration
- 4.8. Maintenance/Support
- 4.9. Reliability
- 4.10. Performance measures
- 4.11. Disaster Recovery
- 4.12. Security
- 4.13. Help Desk Support
- 4.14. Central Services, Network, Telecommunications and/or Video, etc.

5. HOSTING:

- 5.1 The proposer should provide multiple layers of external and internal security that provides administrative, physical, and technical means to protect sensitive or confidential information used in performing the responsibilities and duties set forth in this RFP. In addition, the proposer should include, but is not limited to the following requirements:
 - 5.1.1 **Physical location:** primary and failover facility(ies),
 - 5.1.2 **Facility access and security/integrity:** facility and equipment allocation.
 - 5.1.3 **Staffing Security:** The proposer should maintain policies and procedures for security clearance and staffing controls, allowing proposer personnel access to State owned confidential information and/or to restricted areas within the proposer's host environment.
 - 5.1.4 **Security and Environmental Controls:** The proposer shall maintain proper power and cooling, including redundant power and cooling, to safeguard all hardware, software and State owned data. The secure outer perimeter of defense includes, but is not limited to, the use of technical barriers, physical barriers, and administrative safeguards, etc.

- 5.1.5 **Technical Support/Staffing:** The proposer shall maintain adequate technical support/staffing to provide 24x7x365 hosting services.
- 5.1.6 **Architectural Design:** hardware infrastructure description/network diagram, database structure, operating system (OS), etc.).
- 5.1.7 **Secure Server(s):** Server(s) is protected from intrusion through the use of physical barriers, technical barriers, and administrative barriers, etc.
- 5.1.8 **Secure Network:** Network is secured through use of multiple redundant firewalls, anti-virus software, data encryption for files transferred to and from external users, etc. Data encryption shall meet Federal Information Processing Standard (FIPS) 140-3.
- 5.1.9 **Secure Application:** Access to the proposer system is granted through the use of a unique user identifier and user profile, combined with a strong password. Any transaction or change to data is traced and audited, down to the user ID level.
- 5.1.10 **Security Awareness:** Security policies and procedures are maintained for each location or account. Proposer routinely reviews logs of system activity for suspicious activity. [If applicable, proposer shall provide HIPAA privacy and security training to all new hires and subcontractors].
- 5.1.11 **Data Storage:** proposer shall provide sufficient storage to operate and support the proposed solution.
- 5.1.12 **Denial of Service (DOS) Attack:** proposer should provide examples of policy, procedures, and safeguards employed to respond and/or recover from a denial of services. Proposer should also include metric RTO, etc.
- 5.1.13 **Internet Congestion:** proposer will provide sufficient bandwidth and redundancy to access the proposed solution functionality.
- 5.1.14 **Backup/Archive routine:** proposer should be able to demonstrate at a minimum requirement for archiving set by the agency first, then Industry standards and practices.
- 5.1.15 **Disaster Recovery Plan (DRP):** A copy of the hosting DRP and Continuity of Operations Plan (COOP). Proposer shall have a disaster recovery facility

and provide documented policies and procedures to implement a recovery. If a complete failure occurs, the proposed solution shall be available within twenty-four (24) hours. Annual testing shall be conducted to ensure a smooth transaction should the plan need to be activated. The proposer shall provide a copy of the annual test results to the DPDC/EHDI within 30 days of disaster recovery demonstration.

5.1.16 **Restoration Priority:** Enumerate the prioritized order of restoration for your proposed solution hosted services.

5.1.17 **Data Security:** Proposer shall maintain policy and procedures to maintain and support the security of confidential information. Provide a description of your policies, procedures and protocol on data security breach. Data breach notification procedures and plans are maintained and shall at a minimum, comply with W.S. § 40-12-502.

5.1.18 **Data Breach – Venue of Law:** If the proposer’s proposed solution were to be selected, provide discussion on what state law would have jurisdiction in regards to data security breach notification.

5.1.19 **Certification and Audits:** Provide a discussion on certifications/audits, as applicable to this RFP requirements, your company may have achieved (i.e. SAS 70 Audit, HIPAA, SOX, GLB, etc.).

5.1.19.1 Provide a copy of these certification/audits, including the dates these were conducted.

5.1.20 **Website Archiving:** Provide a description of the proposer’s web site archiving practices and how their practices will meet the requirements of the Wyoming Public Records Act: W.S. 16-4-201 through 16-4-205.

5.1.21 **System Availability:** The system should be available 24/7. Any maintenance outages will be coordinated in advance with the Agency designed personnel.

6. **CONTRACTOR STAFFING/QUALIFICATIONS:**

The following are the proposer staffing and qualification requirements, as it relates to the services set forth in the RFP. These include, but are not limited to:

6.1. RELEVANT EXPERIENCE:

- 6.1.1. Project Management
- 6.1.2. Business/Technical Assessment
- 6.1.3. IDEA Experience
- 6.1.4. Solution Planning & Design
- 6.1.5. Solution Development & Testing
- 6.1.6. Solution Stabilizing & Acceptance
- 6.1.7. Solution Deployment & Optimization

7. REPORTING:

- 7.1. Bi-monthly progress reports/status reports, to include but not limited to: milestones and deliverables, risks and mitigation strategy, cost projects and burn rate and next steps.
- 7.2. Monthly management and budget reporting
- 7.3. Ad-hoc (as needed/requested)
- 7.4. Customized reports

8. TRAINING AND KNOWLEDGE TRANSFER PLAN:

- 8.1 It is expected that the existing EHDI-IS will continue to be developed and maintained through this RFP. However, should a transition of all current records housed in the existing EHDI-IS be necessary, the following are the training requirements the proposer will be required to perform prior to the Go Live Date, either on-site or via webinar (including, but not limited to):
 - 8.1.1. Train-the-trainer
 - 8.1.2. Internal State users
 - 8.1.3. Recorded webinars for end users

9. OPERATIONAL READINESS AND OPERABILITY TESTING:

The following are the responsibilities the proposer will be asked to perform to prove operational readiness and operability testing.

- 9.1. Customer Service
 - 9.1.1. Number of available developers, what percentage of time can each developer be available for change management and troubleshooting questions
 - 9.1.2. Training plan / policy on new features to EHDI staff to follow updates (before issued to all users)

- 9.1.3. Ongoing technical support
- 9.2. Hardware/software installation and operations
 - 9.2.1. Configuration Management Plan
 - 9.2.2. Punch List(s)
- 9.3. Telecommunications
- 9.4. Interfaces
 - 9.4.1. Set up
 - 9.4.2. Maintenance
- 9.5. Training
 - 9.5.1. State staff training
 - 9.5.2. Technical training - Training plan / policy on new features to EHDl staff to follow updates (before issued to all users)
 - 9.5.3. External user training
- 9.6. Application and/or Toolset Documentation
 - 9.6.1. System,
 - 9.6.2. User, and
 - 9.6.3. Operations
- 9.7. System security
 - 9.7.1. Confidentiality of Data
 - 9.7.2. System access
- 9.8. Report generation and distribution processes
- 9.9. Coordination of responsibilities with other component proposers
- 9.10. Pilot

10. MAINTENANCE AND SUPPORT REQUIREMENTS: (IF APPLICABLE):

- 10.1 The proposer will be responsible for maintaining and upgrading the software/solution as part of the contract maintenance responsibilities for ten (10) base years.
- 10.2 The proposer should provide sufficient technical staff to perform all routine maintenance responsibilities as follows:
 - 10.2.1 Perform research immediately upon recognizing potential system problems.
 - 10.2.2 Proactively maintain and upgrade software – current version.

10.2.3 Allow the Wyoming Department of Health access to source code or establish a software escrow account per the contract terms and conditions as needed.

11. CHANGE CONTROL MANAGEMENT:

11.1 The proposer must maintain a control change process. The control change process should include the reason for the change, a complete description of work to be performed, an estimate of time and cost to complete the task, a completion date for the change and an impact analysis indicating ramifications or impact to the project.

11.1 If unforeseen circumstances arise where a dispute resolution might be needed, proposer will submit (in writing) a description of the problem and proposed resolution to the DPDC/EHDI's project manager for their consideration.

12. DELIVERABLES AND MILESTONES:

The following are the potential expected deliverables the proposer will deliver to the Agency:

- 12.1 Project Plan – no proposer work will start without the DPDC/EHDI's written approval of the Project Plan
- 12.2 Communication Plan
- 12.3 Implementation Plan
- 12.4 Configurations Management Plan (Documentation version control and software version control)
- 12.5 Business Analysis Report
- 12.6 Project Reports and Recommendations
- 12.7 Requirement Specifications Document
- 12.8 Design/Architecture Plan
- 12.9 System Documentation
- 12.10 Test Plan
- 12.11 User Acceptance Plan
- 12.12 Training Plan
- 12.13 User Guides (online or hard copies)
- 12.14 Help Desk Management Plan
- 12.15 Disaster Recovery/Contingency Plan
- 12.16 Implementation Plan
- 12.17 Operational Readiness Checklist/Hardware, software installation punch list

SECTION 7: PROPOSAL REQUIREMENTS AND EVALUATION METHODOLOGY

1. OVERVIEW:

1.1. Evaluation Committees: The DPDC/EHDI will conduct a comprehensive, fair, objective and impartial evaluation of proposals received in response to this RFP. Proposals will be evaluated independently by the evaluation committee members. The evaluation committee is made up of members representing the project subject expertise. The evaluation committee will review and score all proposals independently and consolidate the scores in order to determine award.

2. COMPLIANCE WITH MANDATORY REQUIREMENTS:

2.1. To be considered responsive, a submitted proposal should meet the minimum requirements defined in this RFP. The minimum requirements are intended to ensure that evaluation of the Technical Proposal can proceed and that the Contractor agrees to perform all responsibilities within the RFP.

3. TECHNICAL SCORING AND RANKING:

Each proposer is required to complete each area and score at least 50% of the total points available in each section below to be considered.

3.1. **Proposer Background and Experience: 20 Points.** In this section of the proposal, the proposer should present material describing its organizational capability to successfully perform the responsibilities of this contract. This material should include details of similar corporate experience, preferably in developing, implementing, and maintaining an interactive web-based application.

3.1.1. Details of previous contractual experience should include the length of time covered by the contract, the types of tasks performed, and the results thereof, and a reference that includes a name, current title, and telephone number. Emphasis should be placed on experience with developing/implementing systems similar to the scope of work described in this RFP.

3.1.2. At least three (3) project references for current or recently completed (within the last seven (7) years) contracts similar in nature to the services required by the DPDC/EDHI for this contract will be included in this section. Contract references should include the name, position, title, current phone number of the client, and a brief overview of the work performed for each

reference to include the name and description of specific data systems, if applicable.

3.1.3. This section will also address overall organizational size, computer resources, financial stability, and current contractual obligations. The proposer should include a current financial statement and proof of federal or professional certifications or other credentials.

3.2. **Staffing and Project Organization: 20 Points.** The proposer should provide within this section an Organization Chart with all proposed personnel, including the supervisor level, functional responsibilities, key personnel, and other staff members who will be involved in the project.

3.2.1. The proposer should emphasize their proposed resources are dedicated to the achievement and ongoing support and maintenance of corporate-level certifications and corporate credentials related to electronic data systems.

3.2.2. The proposer should include brief résumés for personnel that will be working on the project. The résumés should clearly identify expertise in the functional areas listed in Section 6 of this RFP. Specialized training courses will not be acceptable for demonstration of expertise in the required areas. Proven work experience combined with related education will be means of substantiating expertise.

3.2.3. The proposer should identify a single point of contact for all contract management activities. The proposer's Project Manager's name and resume should be submitted with the proposal.

3.3. **Proposer's Project Work Plan: 40 Points.** The proposer should submit a work plan that meets the needs of the RFP and indicates a thorough understanding of the scope of the work. The work plan should:

3.3.1. Identify all required work activities, personnel hours of effort, and responsibilities for each work activity over a five year period.

3.4. **Approach to Contract Performance: 30 Points.** The proposer should describe its:

3.4.1. Approach to meeting the mandatory requirements and specifications, as described in the RFP.

- 3.4.2. Approach in addressing the goals and objectives specified in this RFP.
 - 3.4.3. Approach to a comprehensive and practical plan for project management and control mechanisms, including progress reporting, major decision-making, sign-off procedures, and internal control procedures.
 - 3.4.4. Approach to how project delays will be addressed and mitigated, should they occur.
 - 3.4.5. Assurances that sufficient resources and knowledgeable or experienced staff are available to meet delays.
 - 3.4.6. Approach to contract responsibilities.
 - 3.4.7. Approach to resolving disputes or disagreements in contract or work requirements.
 - 3.4.8. Approach to change orders or modifications to work in progress.
- 3.5. **Demonstration and Oral Presentations: 20 Points.** The Evaluation Team will determine, after receipt of the written proposals, whether selected proposers will be requested to make any oral presentation based on their proposal. However, the Evaluation Team reserves the right to make an award without requesting an Oral Presentation from any proposer. All oral presentation costs will be the responsibility of the proposer. There may be an additional written requirement in place of or following the oral presentation.

4. COST SCORING AND RANKING:

- 4.1. **Cost Analysis: 20 Points.** The cost for activities is not expected to exceed sixty thousand dollars (\$60,000) per year. Over a five-year period, the cost for activities is not expected to exceed three hundred thousand dollars (\$300,000) total. The DPDC/EHDI reserves the right to conduct a cost analysis of the proposer's budget proposal. The analysis will include a review of the associated costs based on the technical content of their submission. The total project cost should include a detailed breakdown of all of the items listed in Section 6 of this RFP. If any of the Section 6 services cannot be provided in the proposal or the requirement cannot be met – this is to be clearly explained as to why and what the alternative approach will be and its associated cost. If there are no exclusions or exceptions – it will be determined that all of the criteria has been met for the price quoted,

inclusive of all personnel, overhead, travel, equipment usage, and other miscellaneous costs for the contract period quoted.

5. EVALUATION POINT SUMMARY:

Proposer Background and Experience	20 points
Staffing and Project Organization	20 points
Proposer’s Project Work Plan	40 points
Approach to Contract Performance	30 points
Demo/Oral Presentation	20 points
<u>Cost Analysis</u>	<u>20 points</u>
TOTAL	150 points

6. FINAL RANKING OF PROPOSALS:

The DPDC/EHDI will be the sole authority for evaluating proposals. The firm that best meets the conditions of each of the criterion will be awarded the highest (not necessarily maximum) points for that criterion. The balance of the proposals will be rated based on their evaluated points. After each criterion is evaluated, the proposer with the highest number of points will be notified. The DPDC/EHDI reserves the right to reject any or all proposals, to waive any informality or technical defect in the proposals, or to award the contract in whole or in part, if deemed in the best interest of the DPDC/EHDI to do so.

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SECTION 9: PROPOSAL PRICE SHEET AND SIGNATURE

The undersigned agrees to provide the Wyoming Early Hearing Detection and Intervention - Information System (EHDI-IS) to the Developmental Preschool and Day Care Center(DPDC)/ Wyoming Early Hearing Detection and Intervention (EHDI) Program in accordance with the Request for Proposal (RFP).

Provide the all-inclusive base HOURLY RATE for any activities related to MAINTENANCE AND DEVELOPMENT of the EHDI-IS for the five-year project period. Provide MAINTENANCE and DEVELOPMENT cost sums separately for the five-year project period.

HOURLY RATE FOR MAINTENANCE AND DEVELOPMENT (written in words and number)

FIVE-YEAR LUMP SUM FOR MAINTENANCE (written in words and number)

FIVE-YEAR LUMP SUM FOR DEVELOPMENT (written in words and number)

1. BY SUBMISSION OF A PROPOSAL, THE PROPOSER CERTIFIES:
 - 1.1 Prices in this proposal have been arrived at independently, without consultation, communication or agreement for the purpose of restricting competition.
 - 1.2 Proposer has not and will not attempt to induce any other person or firm to submit a proposal for the purpose of restricting competition.
 - 1.3 The person signing this proposal certifies that he/she is authorized to represent the company and is legally responsible for the price and supporting documentation provided as a result of this advertisement.
 - 1.4 Proposer will comply with all applicable state and federal regulations, policies, guidelines and requirements.

1.5 Prices in this proposal have not been knowingly disclosed by the proposer nor will they be disclosed prior to award.

2. GENERAL INFORMATION:

Proposer Name:

Phone:

Email Address:

FAX:

Mailing Address:

City:

State:

ZIP:

FEIN:

3. OWNERSHIP AND CONTROL:

Proposer's Legal Structure:

_____ Sole Proprietorship

_____ General Partnership

_____ Corporation

_____ Limited Partnership

_____ Other: _____

The proposer shall provide to the DPDC/EHDI a certificate of good standing from the Wyoming Secretary of State or other proof that proposer is authorized to conduct business in the State of Wyoming before performing work under this Contract. The proposer shall ensure that all annual filings and corporate taxes due and owing to the Wyoming Secretary of State's office are up-to-date before signing the contract. Proposers may contact the Wyoming Secretary of State's Office, Corporation Division at (307) 777-7311 for assistance.

If Contractor is a sole proprietorship, list:

Owner Name:

Phone:

Mailing Address:

City:

State:

ZIP:

FEIN:

Beginning date as owner of sole proprietorship:

Provide the names of all individuals authorized to sign for the proposer:

NAME (printed or typed)

TITLE

VENDOR VERIFICATION

I certify under penalty of perjury, that I am a responsible official (as identified above) for the business entity described above as the proposer, that I have personally examined and am familiar with the information submitted in this disclosure and all attachments, and that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including criminal sanctions which can lead to fines or imprisonment.

Signature

Name and Title (Typed or Printed)

Date

The DPDC/EHDI will negotiate payment terms based upon a schedule to be determined by the proposer and the DPDC/EHDI.

APPENDIX A

(printed: 8.5" x 11.0", portrait)

WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM
DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC)
1771 CENTENNIAL DRIVE SUITE 220
LARAMIE, WY 82070

REQUEST FOR PROPOSAL

**WYOMING EARLY HEARING DETECTION AND INTERVENTION -
INFORMATION SYSTEM (EHDI-IS)**



Developmental Preschool & Day Care Center

DPDC ★ ExCEL ★ Project Reach
Building brighter futures

Main Office: 1771 Centennial Drive, Laramie, WY 82070
Day Care Office: (307) 742-6374 Fax: (307) 721-5982
Early Intervention Office: (307) 742-3571 Fax: (307) 742-6397

Procurement Policy

Developmental Preschool & Day Care Center (DPDC) will adhere to the following policy requirements for any procurements related to all federal procurement rules as required by Procurement Regulations **7 CFR 226.6, 21, 22, and 2 CFR Part 200.317-326** (For all recipients of federal funds).

DPDC uses the following method(s) of procurement when making purchases with federal funds:

Micro-purchase method for goods and services

- Purchase/transaction less than \$10,000.00 or current threshold (per 2 CFR 200.67). Micro-purchases may be awarded without soliciting competitive quotes if the price is considered reasonable. To the extent feasible, however, the **DPDC** must distribute micro-purchases equitably among qualified suppliers (i.e., rotating purchases through different suppliers).
- DPDC will maintain invoices or receipts for purchases from different vendors or suppliers, including the date, vendor or supplier organization, items, quantity, and price.

Small (Simple) purchase method for goods and services

- Purchase greater than a micro and less than \$50,000.00 (i.e. \$10,000 ≤ \$50,000). A **small purchase** does not require a bid process, however, the small purchase shall be made on a competitive basis.
- DPDC will obtain price or rate quotes from qualified vendors, contractors, or suppliers for these purchases. Our DPDC uses the “Informal purchasing log” or a similar tracking method to document this process and maintains records of any quotes obtained.

Large (Formal) purchase method for goods and services

- A purchase greater than \$50,000.00 is considered a **formal purchase**, and a contract must be awarded through a formal RFP process and a call for bids or proposals shall be published at least once in a newspaper of general circulation in the State, posted on the **DPDC’s** website, and sent to known prospective vendors. No contract shall be divided for the purpose of avoiding this paragraph.

Per 2 CFR 200.321 the **DPDC** will purchase from small, minority and women’s business enterprises and labor surplus firms whenever possible.

Geographic Preference:

No Geographic Preference (advantage based on location) is allowed with federal funds except for documented Farm to School (Farm to Preschool) efforts.



Project Reach | 1801 Edinburgh | Rawlins, WY 82301 | (307) 324-9656 | Fax: (307) 324-5670
ExCEL Preschool | 204 W Spring | P.O. Box 1481 | Saratoga, WY 82331 | (307) 326-5839

Below are the DPDC requirements and policy for all formal purchases.

Bid Specifications:

DPDC contracts will not be awarded to any potential vendors who write any of the bid specifications, the solicitation documents, or the contract.

Identical bid specifications and/or request for proposals will be provided to all potential vendors.

DPDC will avoid acquisitions of unnecessary or duplicative items. Consideration should be given to consolidating or breaking out procurements to obtain a more economical purchase.

Debarment and Suspension:

DPDC will obtain verification regarding debarment and suspension for all service contracts to be paid with Federal assistance.

- To meet this requirement DPDC will include a suspension and debarment statement within the text of all contracts.

Standard of Conduct for DPDC Employees:

DPDC maintains the following code of conduct for any employees engaged in award and administration of contracts supported by Federal Funds:

- No DPDC employees will engage in any procurement when there is a conflict of interest, real or perceived, and DPDC employees cannot solicit or accept any gratuities, favors or anything of monetary value from prospective vendors
- No DPDC employee shall participate in the selection, award or administration of a contract when any of the following persons have a financial interest in the firm selected for award:
 - The employee
 - Any member of his/her immediate family
 - People with whom there is an affectionate personal relationship
 - An DPDC which employs or is about to employ any of the above
- DPDC would like all employees to behave with the utmost integrity and never be self-serving, be fair in all aspects of the procurement process, be alert to conflicts of interest, and avoid any compromising situations.
- Employees found to be in violation of this policy are subject to disciplinary action. Based on the severity of the infraction, the penalties could include a written reprimand to their personnel file, a suspension with or without pay, or termination.



Contract Administration:

DPDC will maintain a contract administration system which will ensure that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders. DPDC's Executive Director will review all aspects of any contractor bid documents, expenditures, processes, and procedural aspects to ensure compliance with all federal, state, and DPDC organizational regulations.

DPDC's **contract administration system** will address administrative, contractual, or legal remedies in instances where contractors violate or breach contract terms. Appropriate sanctions and/or penalties will be included.

All contracts in excess of \$10,000.00 must address termination for cause and for convenience and include the manner by which it will be effected and the basis for settlement.

Contracts made under a Federal Award (such as with funding from the USDA Child Nutrition Programs) will also contain all applicable federal provisions as referenced under *Appendix II to Part 200-Contract Provisions for Non-Federal Entity Contracts Under Federal Awards*.

Discounts, Rebates, Credits:

DPDC will verify that all food program contracts and procurements are net of all applicable discounts, rebates, and credits. All contractors will maintain records and source documents in support of all costs, discounts, rebates, and credits.

Records Retention and Access:

DPDC will allow access to all records per 2 CFR 200.336.

DPDC will retain all Food Program records for three years after final payments and/or three years after any pending matters have been closed and completed.

DPDC will also maintain records sufficient to detail the history of any procurements. These records will include, but are not limited to, the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price. Record retention will adhere to all 2 CFR 200.333 requirements.

Bid Protest Procedures:

Any actual or prospective bidder or proposer who believes they are aggrieved in connection with or pertaining to a bid or proposal may file a protest. The protest must be delivered in writing to the Executive Director, in person or by certified mail. The protest must be received prior to the solicitation's closing date or within seven (7) calendar days after the issuance of the formal bid notification letter. The written protest must include:

1. Organization, mailing address, e-mail address, and business phone number of the protesting part;



2. Appropriate identification of the bid or proposal being protested;
3. A precise statement of the reasons for the protest; and
4. Any documentation or other evidence supporting the protest and any alleged claims.

The business office will attempt to resolve the protest, including at the Executive Director's option, meeting with the protesting party. If the protest is successfully resolved by mutual agreement, written verification of the resolution, with specifics on each point addressed in the protest; will be forwarded to the DPDC Board of Directors.

If the business office is not successful in resolving the protest, the protesting party may request in writing that the protest be considered by the DPDC Board of Directors. Applicable documentation and other information applying to the protest will be forwarded to the Board, who will promptly review such documentation and information. If additional information is desired, the Board may notify the necessary party or parties of the protest to provide such information. The decision of the Board will be final.



APPENDIX B

(printed: 8.5" x 14.0", landscape)

WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM
DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC)
1771 CENTENNIAL DRIVE SUITE 220
LARAMIE, WY 82070

REQUEST FOR PROPOSAL

**WYOMING EARLY HEARING DETECTION AND INTERVENTION -
INFORMATION SYSTEM (EHDI-IS)**

0	ESSET Category	Tier	Variable Name	Long Name	Description	Type	Coding Format/Valid Content	Comment	Validation Rule
1	General > Infant		1 IID	Unique ID	A unique 15-digit number identifying each infant in the data file. The first two digits are the FIPS code of the state submitting the data , followed by a 13 digit number issued by each state.	Numeric	Each character: 0-9 First two digits: FIPS code from US Census Bureau 2010 https://www.census.gov/geo/reference/ansi_statetables.html		
2	General > Infant		1 IDOB	Date of birth	Date of infant's birth.	Date (numeric)	MM/DD/YYYY Each character: 0-9		
3	General > Infant		1 ISEX	Gender	Gender of infant.	Numeric	0 - Male 1 - Female 2 - Non binary 88 - Unknown		cannot be null and must be from the listed values
4	General > Infant		1 IBPLACE_ST	Birth state	Identifies, using a FIPS code, state where infant was born.	Numeric	Each character: 0-9 unknown: 88 FIPS code from US Census Bureau 2010 https://www.census.gov/geo/reference/ansi_statetables.html	This code could be different from the first two digits in IID if the baby was not born in the same state	
5	General > Infant		2 IBPLACE_ZIP	Zipcode	5-digit US zipcode indicating location of infant's birth (home or hospital).	Numeric	Each character: 0-9 unknown: 88888 does not collect: 99999		
6	General > Infant		2 IBPLACE_FCD	Facility type	Classification of facility type where infant was born.	Numeric	1 - Hospital (birthing/non-birthing) 2 - Freestanding birthing center (non-hospital) 3 - Clinic/Doctor's office 4 - Home birth 5 - Other (e.g. born in car) 88 - Unknown 99 - does not collect this item		cannot be null and must be from the listed values
7	General > Infant		2 ITRAN	Transferred	An indication of whether infant was transferred to another facility.	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect this item	If item #8 ITRAN_24 is Yes, this item has to be Yes as well.	cannot be null and must be from the listed values
8	General > Infant		2 ITRAN_24	Transferred - 24 hours	An indication of whether infant was transferred to another facility within 24 hours of delivery.	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect this item		cannot be null and must be from the listed values
9	General > Infant		2 INICU	NICU baby	An indication of whether the infant was in the NICU (any unit other than well baby unit).	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect this item		
10	General > Infant		2 IB_WT	Birth weight	Infant's weight at birth, in grams.	Numeric	Each character = 0-9; with decimals to hundredth. Unknown: leave it blank does not collect this item: leave it blank		
11	General > Infant		2 ICHIP	CHIP enrollment	An indication of whether the infant is enrolled in the CHIP (Children's Health Insurance Program).	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect this item		cannot be null and must be from the listed values
12	General > Mother		2 MRSDC_ST	Mother's state	Identifies, using a FIPS code, state in which infant's mother resides.	Numeric	Each character: 0-9 unknown: 88 does not collect: 99 FIPS code from US Census Bureau 2010 https://www.census.gov/geo/reference/ansi_statetables.html If not reside in the		
13	General > Mother		2 MRSDC_ZIP	Mother's zip code	5-digit US zipcode indicating location of mother's residence.	Numeric	Each character: 0-9 unknown: 88888 does not collect: 99999		
14	General > Mother		1 MDOB	Mother's birthdate	Date of mother's birth.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown/does not collect: leave it blank		

15	General > Mother	2	MMAR	Marital status	An indication of whether the mother was married.	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect this item		cannot be null and must be from the listed values
16	General > Mother	2	MWIC	WIC food receipt	An indication of whether mother received WIC food packages.	Character	0 - No 1 - Yes 88 - unknown 99 - does not collect this item		cannot be null and must be from the listed values
17	General > Mother	2	MPAY_CD	Payment type	Payment classification of mother's primary method of payment for services.	Numeric	1 - Private Insurance 2 - Medicaid 3 - Self-pay 4 - Other 88 - Unknown 99 - does not collect this item		cannot be null and must be from the listed values
18	General > Mother	1	MEDUC	Mother's education	Classification of mother's highest level of education.	Numeric	1 - 8th grade or less 2 - 9th - 12th grade, no diploma 3 - High school graduate or GED completed 4 - Some college credit but no degree 5 - Associate degree 6 - Bachelor's degree 7 - Master's degree 8 - Doctorate or Professional degree 88 - Unknown 99 - does not collect this item		cannot be null and must be from the listed values
19	General > Mother	1	METHNIC	Mother's ethnicity	An indication of whether the mother is Spanish/Hispanic/Latino, and specified group.	Numeric	1 - No, not Spanish, Hispanic, or Latino 2 - Yes, Mexican, Mexican-American, Chicano 3 - Yes, Puerto Rican 4 - Yes, Cuban or Cuban-American 5 - Yes, Other Spanish, Hispanic or Latino group 6 - Yes, Unspecified 88 - Unknown 99 - does not collect this item		cannot be null and must be from the listed values
20	General > Mother	1	MRACE1	Mother's race - White	An indication of whether the mother is White.	Numeric	0 - No 1 - Yes	Single race: code only one of the items between MRACE1 and MRACE15 Yes, and all others NO. MRACE16 and MRACE17 should be NO Multiple races: if specific races are known, code those items Yes and the rest NO. OR code	cannot be null and must be from the listed values See comment section for all MRACE variables
21	General > Mother	1	MRACE2	Mother's race - Black or African American	An indication of whether the mother is Black or African American.	Numeric	0 - No 1 - Yes		
22	General > Mother	1	MRACE3	Mother's race - American Indian or Alaskan Native	An indication of whether the mother is American Indian or Alaskan Native.	Numeric	0 - No 1 - Yes		
23	General > Mother	1	MRACE4	Mother's race - Asian Indian	An indication of whether the mother is Asian Indian.	Numeric	0 - No 1 - Yes		
24	General > Mother	1	MRACE5	Mother's race - Chinese	An indication of whether the mother is Chinese.	Numeric	0 - No 1 - Yes		
25	General > Mother	1	MRACE6	Mother's race - Filipino	An indication of whether the mother is Filipino.	Numeric	0 - No 1 - Yes		
26	General > Mother	1	MRACE7	Mother's race - Japanese	An indication of whether the mother is Japanese.	Numeric	0 - No 1 - Yes		
27	General > Mother	1	MRACE8	Mother's race - Korean	An indication of whether the mother is Korean.	Numeric	0 - No 1 - Yes		
28	General > Mother	1	MRACE9	Mother's race - Vietnamese	An indication of whether the mother is Vietnamese.	Numeric	0 - No 1 - Yes		
29	General > Mother	1	MRACE10	Mother's race - Other Asian	An indication of whether the mother is Other Asian (not Asian Indian, Chinese, Filipino, Japanese, Korean or Vietnamese).	Numeric	0 - No 1 - Yes		
30	General > Mother	1	MRACE11	Mother's race - Native Hawaiian	An indication of whether the mother is Native Hawaiian.	Numeric	0 - No 1 - Yes		
31	General > Mother	1	MRACE12	Mother's race - Guamanian or Chamorro	An indication of whether the mother is Guamanian or Chamorro.	Numeric	0 - No 1 - Yes		
32	General > Mother	1	MRACE13	Mother's race - Samoan	An indication of whether the mother is Samoan.	Numeric	0 - No 1 - Yes		
33	General > Mother	1	MRACE14	Mother's race - Other Pacific Islander	An indication of whether the mother is Other Pacific Islander (not Nation Hawaiian, Guamanian or Chamorro, or Samoan).	Numeric	0 - No 1 - Yes		
34	General > Mother	1	MRACE15	Mother's race - Other	An indication of whether the mother is Other race.	Numeric	0 - No 1 - Yes		
35	General > Mother	1	MRACE16	Mother's race - Multiracial, not specified	An indication of whether the mother is Multiracial but not specified racial group.	Numeric	0 - No 1 - Yes		

36	General > Mother	1	MRACE17	Mother's race - Unknown	An indication of whether the mother's race is unknown.	Numeric	0 - No 1 - Yes		
37	General > Father	2	FEDUC	Father's education	Classification of father's highest level of education.	Numeric	1 - 8th grade or less 2 - 9th - 12th grade, no diploma 3 - High school graduate or GED completed 4 - Some college credit but no degree 5 - Associate degree 6 - Bachelor's degree 7 - Master's degree 8 - Doctorate or Professional degree 88 - unknown		cannot be null and must be from the listed values
38	General > Father	2	FETHNIC	Father's ethnicity	An indication of whether the father is Spanish/Hispanic/Latino, and specified group.	Numeric	1 - No, not Spanish, Hispanic, or Latino 2 - Yes, Mexican, Mexican-American, Chicano 3 - Yes, Puerto Rican 4 - Yes, Cuban or Cuban-American 5 - Yes, Other Spanish, Hispanic or Latino group 6 - Yes, Unspecified 88 - unknown 99 - does not collect		cannot be null and must be from the listed values
39	General > Father	2	FRACE1	Father's race - White	An indication of whether the father is White.	Numeric	0 - No 1 - Yes	Single race: code only one of the items between MRACE1 and MRACE15 Yes, and all others NO. Multiple races: if specific races are known, code those items Yes and the rest NO. Or code	cannot be null and must be from the listed values
40	General > Father	2	FRACE2	Father's race - Black or African American	An indication of whether the father is Black or African American.	Numeric	0 - No 1 - Yes		See comment section for all FRACE variables
41	General > Father	2	FRACE3	Father's race - American Indian or Alaskan Native	An indication of whether the father is American Indian or Alaskan Native.	Numeric	0 - No 1 - Yes		
42	General > Father	2	FRACE4	Father's race - Asian Indian	An indication of whether the father is Asian Indian.	Numeric	0 - No 1 - Yes		
43	General > Father	2	FRACE5	Father's race - Chinese	An indication of whether the father is Chinese.	Numeric	0 - No 1 - Yes		
44	General > Father	2	FRACE6	Father's race - Filipino	An indication of whether the father is Filipino.	Numeric	0 - No 1 - Yes		
45	General > Father	2	FRACE7	Father's race - Japanese	An indication of whether the father is Japanese.	Numeric	0 - No 1 - Yes		
46	General > Father	2	FRACE8	Father's race - Korean	An indication of whether the father is Korean.	Numeric	0 - No 1 - Yes		
47	General > Father	2	FRACE9	Father's race - Vietnamese	An indication of whether the father is Vietnamese.	Numeric	0 - No 1 - Yes		
48	General > Father	2	FRACE10	Father's race - Other Asian	An indication of whether the father is Other Asian (not Asian Indian, Chinese, Filipino, Japanese, Korean or Vietnamese).	Numeric	0 - No 1 - Yes		
49	General > Father	2	FRACE11	Father's race - Native Hawaiian	An indication of whether the father is Native Hawaiian.	Numeric	0 - No 1 - Yes		
50	General > Father	2	FRACE12	Father's race - Guamanian or Chamorro	An indication of whether the father is Guamanian or Chamorro.	Numeric	0 - No 1 - Yes		
51	General > Father	2	FRACE13	Father's race - Samoan	An indication of whether the father is Samoan.	Numeric	0 - No 1 - Yes		
52	General > Father	2	FRACE14	Father's race - Other Pacific Islander	An indication of whether the father is Other Pacific Islander (not Nation Hawaiian, Guamanian or Chamorro, or Samoan).	Numeric	0 - No 1 - Yes		
53	General > Father	2	FRACE15	Father's race - Other	An indication of whether the father is Other race.	Numeric	0 - No 1 - Yes		
54	General > Father	2	FRACE16	Father's race - Multiracial, not specified	An indication of whether the father is Multiracial but not specified racial group.	Numeric	0 - No 1 - Yes		
55	General > Father	2	FRACE17	Father's race - Unknown	An indication of whether the father's race is unknown.	Numeric	0 - No 1 - Yes		

56	Risk Factors	2	RFCC	Caregiver concern	An indication of whether	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	If you collect risk factor data, but this item is NOT on the list of risk factors that you collect, code it 99 Same rule applies to items #57 through 66
57	Risk Factors	2	RFFHPCHL	family history of permanent childhood hearing loss	An indication of whether there is a family history of permanent childhood hearing loss.	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
58	Risk Factors	2	RFRC	Neonatal intensive care for more than 5 days	An indication of whether the infant was in the NICU for more than five days.	Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
59	Risk Factors	2	RFECMO	ECMO or Assisted ventilation		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
60	Risk Factors	2	RFEOM	Exposure to ototoxic medications (e.g., Chemotherapy*, gentamicin and tobramycin, furosemide/Lasix)		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
61	Risk Factors	2	RFHPBLNM	Hyperbilirubinemia that requires exchange transfusion		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
62	Risk Factors	2	RFUINF	In utero infections (e.g., CMV, Herpes, Rubella, Syphilis, Toxoplasmosis)		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
63	Risk Factors	2	RFANM	Craniofacial anomalies or syndrome		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
64	Risk Factors	2	RFPNINF_CP	Culture-positive postnatal infections > Confirmed bacterial and viral (especially herpes viruses and varicella) meningitis		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
65	Risk Factors	2	RFPNINF_OTH	Culture-positive postnatal infections > Other(s)		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
66	Risk Factors	2	RFHDTRM	Head trauma		Numeric	0 - No 1 - Yes 88 - unknown 99 - does not collect	
67	Hearing Screening	1	HSDATE	Final inpatient screening date	For hospital births: date of final inpatient screening conducted prior to discharge. For non- hospital births: date of first outpatient screening conducted after birth.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown: leave it blank	

68	Hearing Screening	1	HSRSLT_RIGHT	Final inpatient screening result-right	Identifies the result of the final inpatient screening, for the infant's right ear.	Numeric	1 - Passed 2 - Not passed 3 - Not screened 4 - Fail on visual inspection 88 - Unknown	Use this field and #69 to document results of either 1)final inpatient screening if born in a hospital or 2) if home birth, the first outpatient screening received after birth	cannot be null and must be from the listed values
69	Hearing Screening	1	HSRSLT_LEFT	Final inpatient screening result-left	Identifies the result of the final inpatient screening, for the infant's left ear.	Numeric	1 - Passed 2 - Not passed 3 - Not screened 4 - Fail on visual inspection 88 - Unknown		cannot be null and must be from the listed values
70	Hearing Screening	2	HS_MTHD	Final inpatient screening method	Classification of the method used to conduct the infant's final inpatient screening.	Numeric	1 - OAE 2 - AABR 3 - DPOAE 4 - TOAE 5 - ABR 88 - Unknown 99 - does not collect this item		cannot be null and must be from the listed values
71	Hearing Screening	1	HSN_REASON	Reason for no final inpatient screening	Classification for the reason why infant did not receive a final inpatient screening.	Numeric	1 - Infant died 2 - Parent declined 3 - Unable to contact 4 - Parents / Family Contacted but Unresponsive 5 - Infant Missed 6 - Equipment broken 7 - Moved out of jurisdiction / nonresident 8 - Medically fragile / Ear Malformation/ NICU Patient 9 - directly went to diagnosis evaluation 10 - Birth provider(hospital, midwives, etc.) did not offer hearing screening 11 - Other reason not listed above 88 - Unknown 99 - does not collect this item	Only fill in this field if both HSRSLT_RIGHT and HSRSLT_LEFT are Not Screened (3). Otherwise leave it blank.	If HSRSLT_RIGHT and HSRSLT_LEFT are both Not screened (3), then this field is required.
72	Hearing Screening	1	HSMRNT_DATE	Final outpatient screening date	Date of infant's final/most recent outpatient follow-up screening as a result of referred on initial screening.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown/does not collect: leave it blank	If your state does not do outpatient screening at all and require all kids who failed the initial screening to go directly to diagnostic evaluation, code items #73 through 79 99 - does not collect Otherwise if outpatient screening information is not available for any particular kid, code these item as 88 - unknown	
73	Hearing Screening	1	HSMRNT_RSLT_RIGHT	Final outpatient screening result-right	Identifies the result of the final/most recent outpatient screening, for the infant's right ear.	Numeric	1 - Passed 2 - Not passed 3 - Not screened 4 - Fail on visual inspection 88 - Unknown 99 - does not collect this item	use this field and #74 to document results of the most recent outpatient screening. If the initial screening is a pass and no outpatient screening is needed, please leave these fields blank.	0
74	Hearing Screening	1	HSMRNT_RSLT_LEFT	Final outpatient screening result-left	Identifies the result of the final/most recent outpatient screening, for the infant's left ear.	Numeric	1 - Passed 2 - Not passed 3 - Not screened 4 - Fail on visual inspection 88 - Unknown 99 - does not collect this item		
75	Hearing Screening	2	HSMRNT_MTHD	Final outpatient screening method	Classification of the method used to conduct the infant's final/most recent outpatient screening.	Numeric	1 - OAE 2 - AABR 3 - DPOAE 4 - TOAE 5 - ABR - 5 88 - Unknown 99 - does not collect this item		
76	Hearing Screening	2	HSMRNT_LOC	Final outpatient screening location	Classification of the location where the infant's final/most recent outpatient screening was conducted.	Numeric	1 - Audiologic Center 2 - Birth Hospital 3 - Free standing birthing center 4 - Primary provider's office 5 - Public Health Office 6 - Early Intervention service location 7 - Home 8 - Other location not listed above 88 - Unknown 99 - does not collect this item		

77	Hearing Screening	2	HSMRNT_ZIP	Final outpatient screening location zipcode	5-digit US zipcode indicating location of infant's final/most recent outpatient screening.	Numeric	Each character: 0-9 Unknown: 88888 does not collect this item: 99999		
78	Hearing Screening	2	HSMRNT_PRVD_TP	Final outpatient screening location screener type	Classification of the person who conducted the infant's final/most recent outpatient screening.	Numeric	1 - Audiologist - 1 2 - Physician - 2 3 - Nurse - 3 4 - Other - 4 88 - Unknown 99 - does not collect this item		
79	Hearing Screening	1	HSMRNT_REASON	Final/most recent outpatient/follow-up > Reason not received (only one reason can be selected)	Classification for the reason why infant did not receive a final/most recent outpatient screening.	Numeric	1 - Infant died 2 - Parent declined 3 - Unable to contact 4 - Parents / Family Contacted but Unresponsive 5 - Infant Missed 6 - Equipment broken 7 - Moved out of jurisdiction / nonresident 8 - Medically fragile / Ear Malformation/ NICU Patient / Transfer 9 - directly went to diagnosis evaluation 10 - Birth provider(hospital, midwives, etc.) did not offer hearing screening 11 - Other reason not listed above 88 - Unknown 99 - does not collect this item	Only fill in this field if both HSMRNT_RSLT_RIGHT and HSMRNT_RSLT_LEFT are Not Screened (3). Otherwise leave it blank.	If HSMRNT_RSLT_RIGHT and HSMRNT_RSLT_LEFT are both Not screened
80	Diagnostic Testing	1	HDFRCVD	Receipt of diagnostic testing	An indication of whether the infant received diagnostic testing.	Numeric	1 - Yes, infant received diagnostic testing 2 - No, the infant died 3 - No, parent declined testing 4 - No, infant was medically fragile/NICU 5 - No, unable to contact 6 - No, parents/family contacted but unresponsive 7 - No, moved out of jurisdiction/nonresident 8 - No, other reason not listed above 9 - No, unknown reason 88 - unknown 99 - does not collect this item	If the infant passed screening (initial or follow up) and no longer need any further follow up, leave this item and all the rest of the spreadsheet blank (except risk factors, if any of them are applicable).	
81	Diagnostic Testing	1	HDFST_TEST_DATE	First diagnostic test visit date	Date of first visit to an audiologic facility for diagnostic testing.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown: leave it blank	First diagnostic test visit, may or maynot lead to a diagnosis.	
82	Diagnostic Testing	2	HDFST_TEST_ABR_TB	First visit - test type : ABR with tone burst		Numeric	0 - No 1 - Yes	Code any applicable test method Yes and the rest No. If test method unknown or does not collect code item #96 HDFST_TEST_UNK Yes and the rest No.	See comment for all HDFST_TEST variables
83	Diagnostic Testing	2	HDFST_TEST_ABR_CLK	First visit - test type : ABR with click			0 - No 1 - Yes		
84	Diagnostic Testing	2	HDFST_TEST_ABR_OTHER	First visit - test type : other diagnostic ABR			0 - No 1 - Yes		
85	Diagnostic Testing	2	HDFST_TEST_BC	First visit - test type - bone conduction			0 - No 1 - Yes		
86	Diagnostic Testing	2	HDFST_TEST_ASSR	First visit - test type : ASSR			0 - No 1 - Yes		
87	Diagnostic Testing	2	HDFST_TEST_OAE	First visit - test type : OAE			0 - No 1 - Yes		
88	Diagnostic Testing	2	HDFST_TEST_TYMP_1000	First visit - test type : Tympanometry 1000 HZ			0 - No 1 - Yes		
89	Diagnostic Testing	2	HDFST_TEST_TYMP_OTHER	First visit - test type : Tympanometry Other			0 - No 1 - Yes		
90	Diagnostic Testing	2	HDFST_TEST_REFLEX	First visit - test type : Reflexes			0 - No 1 - Yes		
91	Diagnostic Testing	2	HDFST_TEST_ADMTR	First visit - test type: audiometry			0 - No 1 - Yes		
92	Diagnostic Testing	2	HDFST_TEST_SF	First visit - test type : Sound field			0 - No 1 - Yes		
93	Diagnostic Testing	2	HDFST_TEST_EARPHONE	First visit - test type: Earphone			0 - No 1 - Yes		

94	Diagnostic Testing	2	HDFST_TEST_BHV_OTHER	First visit - test type : behavioral test			0 - No 1 - Yes		
95	Diagnostic Testing	2	HDFST_TEST_OTHER	First visit - test type : other test			0 - No 1 - Yes		
96	Diagnostic Testing	2	HDFST_TEST_UNK	First visit - test type : test method unknown			0 - No 1 - Yes		
97	Diagnostic Testing	2	HDFST_TEST_SEDATE	First visit - was the infant sedated during test			0 - No 1 - Yes 88 - unknown		
98	Diagnostic Testing	2	HDFST_TEST_ZIP	First diagnostic test visit zipcode	5-digit US zipcode indicating location of infant's first diagnostic test	Numeric	Each character: 0-9 unknown: 88888 does not collect: 99999		
99	Diagnostic Testing	1	HDFST_TEST_RSLT	First diagnostic test visit result	Identifies the result of the first diagnostic test.	Numeric	1 - No hearing loss 2 - Permanent hearing loss 3 - Non-permanent hearing loss 4 - In process 88 - Unknown	If the result is 1, 2, or 3, it means that it is a diagnosis , then the first visit is the same as the first completed diagnosis, then item #81 through 99 should be the same as item# 100 - 118	If HDRCVD = 1 (Yes, infant received diagnostic testing) , this field must NOT b
100	Diagnostic Testing	1	HDFST_DX_DATE	First completed diagnosis date	Date of first completed diagnosis.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown: leave it blank		
101	Diagnostic Testing	2	HDFST_DX_ABR_TB	First completed diagnosis - test type : ABR with tone burst		Numeric	0 - No 1 - Yes	Code any applicable test method Yes and the rest No. If test method unknown or does not collect code item #115 HDFST_DX_UNK Yes and the rest No.	See comment section for all HDFST_DX variables
102	Diagnostic Testing	2	HDFST_DX_ABR_CLK	First completed diagnosis - test type : ABR with click			0 - No 1 - Yes		
103	Diagnostic Testing	2	HDFST_DX_ABR_OTHER	First completed diagnosis- test type : other diagnostic ABR			0 - No 1 - Yes		
104	Diagnostic Testing	2	HDFST_DX_BC	First completed diagnosis - test type - bone conduction			0 - No 1 - Yes		
105	Diagnostic Testing	2	HDFST_DX_ASSR	First completed diagnosis- test type : ASSR			0 - No 1 - Yes		
106	Diagnostic Testing	2	HDFST_DX_OAE	First completed diagnosis- test type : OAE			0 - No 1 - Yes		
107	Diagnostic Testing	2	HDFST_DX_TYMP_1000	First completed diagnosis- test type : Tympanometry 1000 HZ			0 - No 1 - Yes		
108	Diagnostic Testing	2	HDFST_DX_TYMP_OTHER	First completed diagnosis- test type : Tympanometry Other			0 - No 1 - Yes		
109	Diagnostic Testing	2	HDFST_DX_REFLEX	First completed diagnosis- test type : Reflexes			0 - No 1 - Yes		
110	Diagnostic Testing	2	HDFST_DX_ADMTR	First completed diagnosis- test type: audiometry			0 - No 1 - Yes		
111	Diagnostic Testing	2	HDFST_DX_SF	First completed diagnosis- test type : Sound field			0 - No 1 - Yes		
112	Diagnostic Testing	2	HDFST_DX_EARPHONE	First completed diagnosis - test type: Earphone			0 - No 1 -Yes		
113	Diagnostic Testing	2	HDFST_DX_BHV_OTHER	First completed diagnosis - test type : behavioral test			0 - No 1 - Yes		
114	Diagnostic Testing	2	HDFST_DX_OTHER	First completed diagnosis - test type : other test			0 - No 1 - Yes		
115	Diagnostic Testing	2	HDFST_DX_UNK	First completed diagnosis- test type : test method unknown			0 - No 1 - Yes		
116	Diagnostic Testing	2	HDFST_DX_SEDATE	First completed diagnosis- was the infant sedated during test			0 - No 1 - Yes 88 - unknown		
117	Diagnostic Testing	2	HDFST_DX_ZIP	First completed diagnosis zipcode	5-digit US zipcode indicating location of infant's first completed diagnosis.	Numeric	Each character: 0-9 unknown: 88888 does not collect: 99999		

118	Diagnostic Testing	1	HDFST_DX_RSLT	First completed diagnosis result	Identifies the result of the first completed diagnosis.	Numeric	1 - No hearing loss 2 - Permanent hearing loss 3 - Non-permanent hearing loss 4 - unable to diagnose - infant died 5 - unable to diagnose - parent refused 6 - unable to diagnose - moved out of jurisdiction 7 - unable to diagnose - medically fragile 8 - unable to diagnose - unable to contact 9 - unable to diagnose - contacted but unresponsive 10 - unable to diagnose - still in process, more tests scheduled 11 - unable to diagnose - other reason not listed 88 - Unknown	If the child who has had one inconclusive diagnostic evaluation (HDFST_TEST_RSLT is 4: "in process"), but then the family refuses, moves away or the child expires or is medically unable to receive further evaluations, then code this field with values 4 - 7	
119	Diagnosis: Type/Severity	1	HLFST_LTR	First completed diagnostic test laterality	Identifies the laterality of first diagnosis.	Numeric	1 - No hearing loss 2 - Unilateral right 3 - Unilateral left 4 - Bilateral 88 - Unknown 99 - does not collect this item	* Hearing loss laterality (HLFST_LTR, and HLCNT_LTR): if one ear has permanent HL but the other is transient conductive hearing loss, code the LTR field as Bilateral and give the ear specific information in the Type of Hearing loss fields (HLFST_TP_LEFT, HLFST_TP_RIGHT, etc.).	cannot be null if HDFST_DX_RSLT is 2 or 3.
120	Diagnosis: Type/Severity	1	HLFST_TP_RIGHT	First completed diagnosis right ear HL type	Identifies the result of the first completed diagnosis for the right ear.	Numeric	1 - No hearing loss 2 - Sensorineural 3 - Transient Conductive 4 - Permanent Conductive 5 - Mixed 6 - Auditory Neuropathy 88 - Unknown 99 - does not collect this item		cannot be null if HRCNT_DX_RSLT is 2 or 3.
121	Type/Severity	1	HLFST_DGR_RIGHT	First completed diagnosis right ear severity	Identifies the severity of the first completed diagnostic test for the right ear using the American Speech-Language-Hearing Association (ASHA) classification system.	Character	1 - No hearing loss 2 - Slight (16 - 25 dB HL) 3 - Mild (26 - 40 dB HL) 4 - Moderate (41 - 55 dB HL) 5 - Moderately severe (56 - 70 dB HL) 6 - Severe (71 - 90 dB HL) 7 - Profound (91+ dB HL) 88 - Unknown 99 - does not collect this item		cannot be null if HRCNT_DX_RSLT is 2 or 3.
122	Type/Severity	1	HLFST_TP_LEFT	First completed diagnosis left ear HL type	Identifies the result of the first completed diagnosis for the left ear.	Numeric	1 - No hearing loss 2 - Sensorineural 3 - Transient Conductive 4 - Permanent Conductive 5 - Mixed 6 - Auditory Neuropathy 88 - Unknown 99 - does not collect this item		cannot be null if HRCNT_DX_RSLT is 2 or 3.
123	Type/Severity	1	HLFST_DGR_LEFT	First completed diagnosis ear severity	Identifies the severity of first completed diagnosis for the left ear using American Speech-Language-Hearing Association (ASHA) classification system.	Character	1 - No hearing loss 2 - Slight (16 - 25 dB HL) 3 - Mild (26 - 40 dB HL) 4 - Moderate (41 - 55 dB HL) 5 - Moderately severe (56 - 70 dB HL) 6 - Severe (71 - 90 dB HL) 7 - Profound (91+ dB HL) 88 - Unknown 99 - does not collect this item		cannot be null if HRCNT_DX_RSLT is 2 or 3.
124	Diagnosis Testing	2	HLFST_ONSET	First completed diagnosis: congenital or late-onset	indicate whether the hearing loss is congenital or late-onset/progressing	Numeric	1 - Congenital 2 - late onset/progressing 88 - unknown 99 - does not collect this item		
125	Diagnostic Testing	1	HRCNT_DX_DATE	Most recent completed diagnosis test date	Date of most recent diagnosis	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown: leave it blank	If the child only receive one diagnosis, then item #125 through 149 should be the same as item# 100 through 124	

126	Diagnostic Testing	2	HDCRCNT_DX_ABR_TB	Most recent completed diagnosis - test type : ABR with tone burst		Numeric	0 - No 1 - Yes	Code any applicable test method Yes and the rest No. If test method unknown or does not collect code item #115 HDCRCNT_DX_UNK Yes and the rest No.	See comment for all HDCRCNT_DX variables
127	Diagnostic Testing	2	HDCRCNT_DX_ABR_CLK	Most recent completed diagnosis - test type : ABR with click			0 - No 1 - Yes		
128	Diagnostic Testing	2	HDCRCNT_DX_ABR_OTHER	Most recent completed diagnosis- test type : other diagnostic ABR			0 - No 1 - Yes		
129	Diagnostic Testing	2	HDCRCNT_DX_BC	Most recent completed diagnosis - test type - bone conduction			0 - No 1 - Yes		
130	Diagnostic Testing	2	HDCRCNT_DX_ASSR	Most recent completed diagnosis- test type : ASSR			0 - No 1 - Yes		
131	Diagnostic Testing	2	HDCRCNT_DX_OAE	Most recent completed diagnosis- test type : OAE			0 - No 1 - Yes		
132	Diagnostic Testing	2	HDCRCNT_DX_TYMP_1000	Most recent completed diagnosis- test type : Tympanometry 1000 HZ			0 - No 1 - Yes		
133	Diagnostic Testing	2	HDCRCNT_DX_TYMP_OTHER	Most recent completed diagnosis- test type : Tympanometry Other			0 - No 1 - Yes		
134	Diagnostic Testing	2	HDCRCNT_DX_REFLEX	Most recent completed diagnosis- test type : Reflexes			0 - No 1 - Yes		
135	Diagnostic Testing	2	HDCRCNT_DX_ADMTR	Most recent completed diagnosis- test type: audiometry			0 - No 1 - Yes		
136	Diagnostic Testing	2	HDCRCNT_DX_SF	Most recent completed diagnosis- test type : Sound field			0 - No 1 - Yes		
137	Diagnostic Testing	2	HDCRCNT_DX_EARPHONE	Most recent completed diagnosis - test type: Earphone			0 - No 1 - Yes		
138	Diagnostic Testing	2	HDCRCNT_DX_BHV_OTHER	Most recent completed diagnosis - test type : behavioral test			0 - No 1 - Yes		
139	Diagnostic Testing	2	HDCRCNT_DX_OTHER	Most recent completed diagnosis - test type : other test			0 - No 1 - Yes		
140	Diagnostic Testing	2	HDCRCNT_DX_UNK	Most recent completed diagnosis- test type : test method unknown			0 - No 1 - Yes		
141	Diagnostic Testing	2	HDCRCNT_DX_SEDATE	Most recent completed diagnosis- was the infant sedated during test			0 - No 1 - Yes 88 - unknown		
142	Diagnostic Testing	2	HDCRCNT_DX_ZIP	Most recent completed diagnosis test zipcode	5-digit US zipcode indicating location of infant's final/most recent diagnostic test	Numeric	Each character: 0-9 unknown: 88888 does not collect: 99999		
143	Diagnostic Testing	1	HDCRCNT_DX_RSLT	Most recent completed diagnosis result	Identifies the result of the most recent diagnosis	Numeric	1 - No hearing loss 2 - Permanent hearing loss 3 - Non-permanent hearing loss 88 - Unknown		
144	Diagnosis: Type/Severity	1	HLCRCNT_LTR	Most recent completed diagnostic test laterality	Identifies the laterality of the final/most recent diagnosis.	Numeric	1 - No hearing loss 2 - Unilateral right 3 - Unilateral left 4 - Bilateral 88 - Unknown 99 - does not collect this item	* Hearing loss laterality (HLFST_LTR, and HLCRCNT_LTR): if one ear has permanent HL but the other is transient conductive hearing loss, code the LTR field as Bilateral and give the ear specific information in the Type of Hearing loss fields (HLCRCNT_TP_LEFT, HLCRCNT_TP_RIGHT, etc.).	cannot be null if HDCRCNT_DX_RSLT is 2 or 3.
145	Diagnosis: Type/Severity	1	HLCRCNT_TP_RIGHT	Most recent diagnosis right ear HL type	Identifies the result of the final/most recent diagnosis for the right ear.	Numeric	1 - No hearing loss 2 - Sensorineural 3 - Transient Conductive 4 - Permanent Conductive 5 - Mixed 6 - Auditory Neuropathy 88 - Unknown 99 - does not collect this item		cannot be null if HDCRCNT_DX_RSLT is 2 or 3.

146	Type/Severity	1	HLCRCNT_DGR_RIGHT	Most recent diagnosis right ear severity	Identifies the severity of the final/most recent diagnostic test for the right ear using the American Speech-Language-Hearing Association (ASHA) classification system.	Character	1 - No hearing loss 2 - Slight (16 - 25 dB HL) 3 - Mild (26 - 40 dB HL) 4 - Moderate (41 - 55 dB HL) 5 - Moderately severe (56 - 70 dB HL) 6 - Severe (71 - 90 dB HL) 7 - Profound (91+ dB HL) 88 - Unknown 99 - does not collect this item		cannot be null if HLCRCNT_DX_RSLT is 2 or 3.
147	Type/Severity	1	HLCRCNT_TP_LEFT	Most recent diagnosis left ear HL type	Identifies the result of the final/most recent diagnostic test for the left ear.	Numeric	1 - No hearing loss 2 - Sensorineural 3 - Transient Conductive 4 - Permanent Conductive 5 - Mixed 6 - Auditory Neuropathy 88 - Unknown 99 - does not collect this item		cannot be null if HLCRCNT_DX_RSLT is 2 or 3.
148	Type/Severity	1	HLCRCNT_DGR_LEFT	Most recent diagnosis ear severity	Identifies the severity of the final/most recent diagnostic test for the left ear using American Speech-Language-Hearing Association (ASHA) classification system.	Character	1 - No hearing loss 2 - Slight (16 - 25 dB HL) 3 - Mild (26 - 40 dB HL) 4 - Moderate (41 - 55 dB HL) 5 - Moderately severe (56 - 70 dB HL) 6 - Severe (71 - 90 dB HL) 7 - Profound (91+ dB HL) 88 - Unknown 99 - does not collect this item		cannot be null if HLCRCNT_DX_RSLT is 2 or 3.
149	Diagnosis Testing	2	HLCRCNT_ONSET	Most recent completed diagnosis: congenital or late-onset	indicate whether the hearing loss is congenital or late-onset/progressing	Numeric	1 - Congenital 2 - late onset/progressing 88 - unknown 99 - does not collect this item		
150	Diagnostic Testing	2	HD_DISP_EVAL	Disposition after the most recent diagnosis - further evaluation	Classification to determine infant's disposition after completion of final/most recent diagnostic test: whether additional evaluation is needed	Numeric	0 - No additional evaluation needed 1 - Return for additional evaluation in XX weeks/months 88 - unknown		
151	Diagnostic Testing	2	HD_DISP_MNT	Disposition after the most recent diagnosis - audiologic monitoring for possible late onset hearing loss	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether continue audilogic monitoring for possible late onset hearing loss is needed		0 - No 1 - Yes 88 - Unknown 99 - does not collect		
152	Diagnostic Testing	2	HD_DISP_REC_PC	Disposition after the most recent diagnosis - recommend referral to primary care provider	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether recommend referral to primary care provider		0 - No 1 - Yes 88 - unknown 99 - does not collect		
153	Diagnostic Testing	2	HD_DISP_REC_ENT	Disposition after the most recent diagnosis - recommend referral to ENT	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether recommend referral to ENT		0 - No 1 - Yes 88 - unknown 99 - does not collect		
154	Diagnostic Testing	2	HD_DISP_REC_GEN	Disposition after the most recent diagnosis - recommend referral to genetics evaluation	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether recommend referral to genetics evaluation		0 - No 1 - Yes 88 - unknown 99 - does not collect		

155	Diagnostic Testing	2	HD_DISP_REC_PS	Disposition after the most recent diagnosis - recommend referral to parent support services	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether recommend referral to parent support services		0 - No 1 - Yes 88 - Unknown 99 - does not collect	
156	Diagnostic Testing	2	HD_DISP_REC_HA	Disposition after the most recent diagnosis - recommend referral to hearing aid services	Classification to determine infant's disposition after completion of final/most recent diagnosis: whether recommend referral to hearing aid services		0 - No 1 - Yes 88 - Unknown 99 - does not collect	
157	Diagnostic Testing	1	HDEI_REF	Early intervention referral	An indication of whether the infant was referred to early intervention	Numeric	0 - No 1 - Yes 88 - Unknown 99 - does not collect	Leave item # 157 and beyond blank if diagnosis result is normal hearing. Item #157 through 160 include ANY EI services, both part C and non-Part C. And item #161 through 162 are for Part C only
158	Diagnostic Testing	1	HDEI_REFDATE	Early intervention referral date	Date infant was referred to early intervention.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown/does not collect: leave it blank	
159	Early Intervention	1	EIENRL_DATE	Initial early intervention enrollment date	Date of infant's enrollment in early intervention services.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown/does not collect: leave it blank	If the child enrolled in multiple EI services (e.g. both part C and non-Part C), fill in this one with the earliest enrollment date
160	Early Intervention	1	EIPARTC_ENRLD	Enrolled in Part C services	An indication of whether the infant was enrolled in Part C services.	Numeric	1 - Yes, infant is enrolled in Part C 2 - No, Infant died 3 - No, parent declined services 4 - No, infant was medically fragile/long term care facility 5 - No, Unable to contact 6 - No, parents/family contacted but unresponsive 7 - No, moved out of jurisdiction/nonresident 8 - No, not eligible for Part C services 9 - No, other reason not listed above 10 - No, unknown reason 88 - Unknown 99 - does not collect	
161	Early Intervention	1	EIIFSP_DATE	Date of IFSP	Date of signed IFSP.	Date (numeric)	MM/DD/YYYY Each character: 0-9 unknown/does not collect: leave it blank	
162	Early Intervention	2	EINPARTC_ENRLD	Enrolled in non-Part C services	An indication of whether the infant was ever enrolled in Non-Part C services (e.g., private or other state intervention services).	Numeric	0 - No, state does not do non-Part C 1 - Yes, infant is enrolled in non-Part C service 2 - No, Infant died 3 - No, parent declined services 4 - No, infant was medically fragile/long term care facility 5 - No, Unable to contact 6 - No, parents/family contacted but unresponsive 7 - No, moved out of jurisdiction/nonresident 8 - No, infant was not eligible for non part C services 9 - No, other reason not listed above 10 - No, unknown reason 88 - Unknown 99 - does not collect	If state does not do part C, code it 0
163	Early Intervention	2	EICO_SELECT	Has one or more communication options been selected or not?	An indication of whether one or more communication options have been selected or not	Numeric	0 - No, not yet selected 1 - Yes 88 - unknown 99 - do not collect	
164	Early Intervention	2	EICO_LSL	Communication options - Listening and Spoken language		Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect	

165	Early Intervention		2 EICO_CS	Communication options -Cued Speech/language		Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect		
166	Early Intervention		2 EICO_TC	Communication option - Total communication (English-based sign system and speech)		Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect		
167	Early Intervention		2 EICO_AS_L	Communication option - American Sign Language		Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect		
168	Medical Intervention		2 MIHA	Hearing aid	An indication of whether the patient uses hearing aid	Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect		
169	Medical Intervention		2 MIHA_FTDATE	Hearing aid > Date fitted	Date of fitting hearing aid	Date	MM/DD/YYYY		
170	Medical Intervention		2 MIHA_MB	Hearing aid > Monaural / binaural		Numeric	1 - Monoaural 2 - Binaural 88 - Unknown 99 - Do not collect		
171	Medical Intervention		2 MIPLT	Implant	And indication of whether the patient received cochlear implant	Numeric	0 - No 1 - Yes 88 - unknown 99 - do not collect		
172	Medical Intervention		2 MIPLT_SGRDATE	Implant > Date of surgery		Date	MM/DD/YYYY		
173	Medical Intervention		2 MIPLT_LTR	Implant > Laterality			1 - Left 2 - Right 3 - Both 88 - Unknown 99 - Do not collect		
174	Medical Intervention		2 MIPLT_ACTDATE	Implant > Date of activation		Date	MM/DD/YYYY		
175	Early Intervention		2 EIPARTC_FST_EXIT_DATE	Date of exiting Part C service - first exit	first time the kid exit part C	DATE	MM/DD/YYYY	If the kid is still in EI, and never exists, leave this field blank.	Item #174 to 178 should only be filled out for patients who are enrolled in part C (EIPARTC_ENRLD = 1)
176	Early Intervention		2 EIPARTC_FST_EXIT_REASON	Reason of exiting Part C service first time		Numeric	0 - Child died 1 - IFSP objectives met 2 - Declined 3 - Moved 4 - Withdrew/discontinued before IFSP objectives are met 5 - Transferred to other programs 6 - Ineligible according to eligibility assessment 7 - Unable to locate/unable to contact/contacted but unresponsive 8 - Child turned 3: Part B/LEA Eligible 9 - Child turned 3: Not eligible for Part B/LEA, exit with referral to other program 10 - Child turned 3: Not eligible for Part B/LEA, exit without referral to other program 11 - Child turned 3: Part B or LEA eligibility unknown/undetermined 12 - Other 88 - Unknown 99 - Not collected		
177	Early Intervention		2 EIPARTC_FNL_EXIT_DATE	Date of most recent/final exit from Part C		DATE	MM/DD/YYYY		
178	Early Intervention		2 EIPARTC_FNL_EXIT_REASON	Reason of final exiting Part C service		Numeric	0 - Child died 1 - IFSP objectives met 2 - Declined 3 - Moved 4 - Withdrew/discontinued before IFSP objectives are met 5 - Transferred to other programs 6 - Ineligible according to eligibility assessment 7 - Unable to locate/unable to contact/contacted but unresponsive 8 - Child turned 3: Part B/LEA Eligible 9 - Child turned 3: Not eligible for Part B/LEA, exit with referral to other program 10 - Child turned 3: Not eligible for Part B/LEA, exit without referral to other program 11 - Child turned 3: Part B or LEA eligibility unknown/undetermined 12 - Other 88 - Unknown 99 - Not collected	If the kid is still in EI, and never exists, leave this field blank	
179	Early Intervention		2 EIPARTC_DURATION	total # of days the kid was enrolled in EI		Numeric		If the kid is still in EI, and never exists, leave this field blank	

APPENDIX C

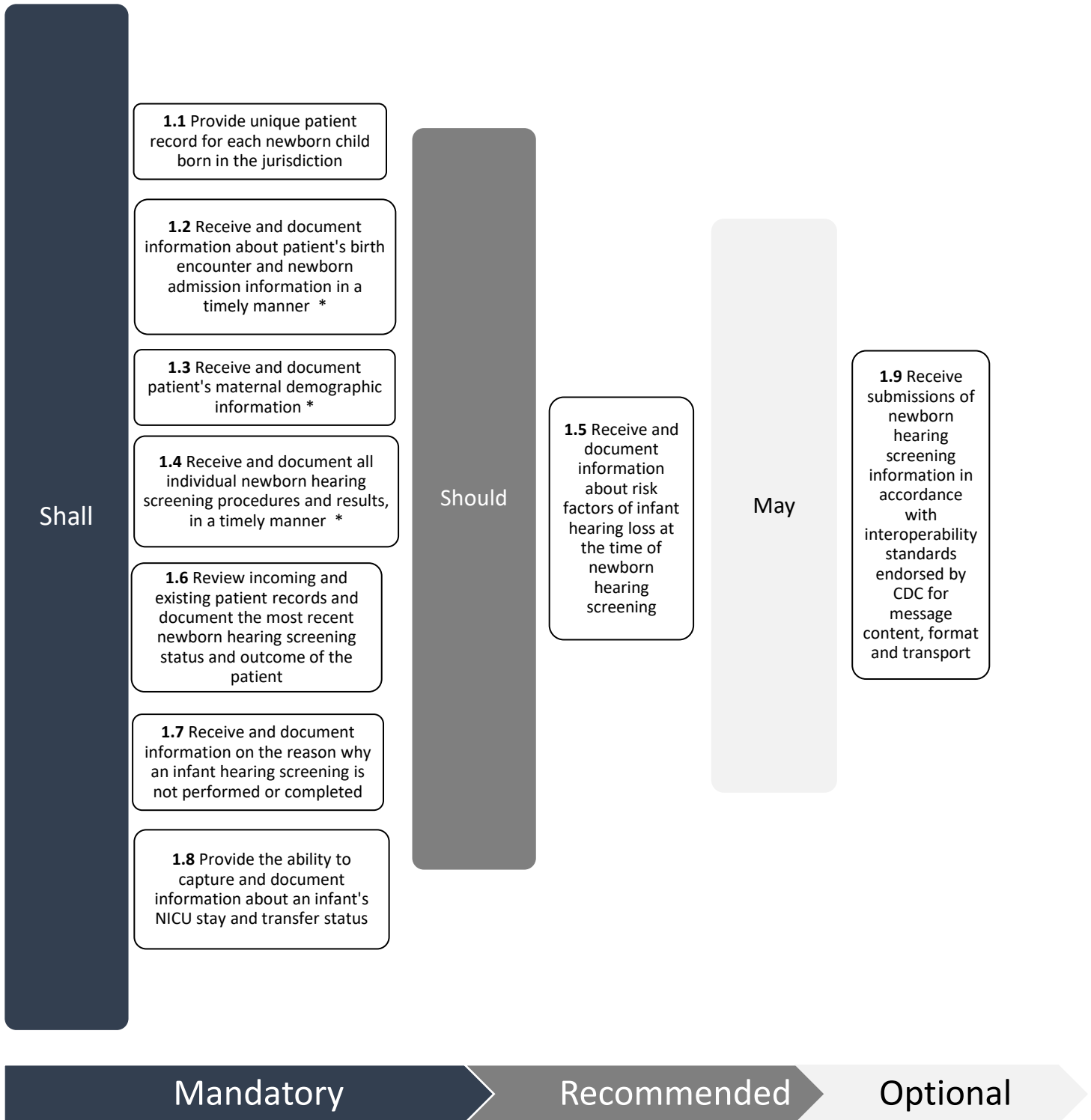
(printed: 8.5" x 11.0", portrait)

WYOMING EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM
DEVELOPMENTAL PRESCHOOL AND DAY CARE CENTER (DPDC)
1771 CENTENNIAL DRIVE SUITE 220
LARAMIE, WY 82070

REQUEST FOR PROPOSAL

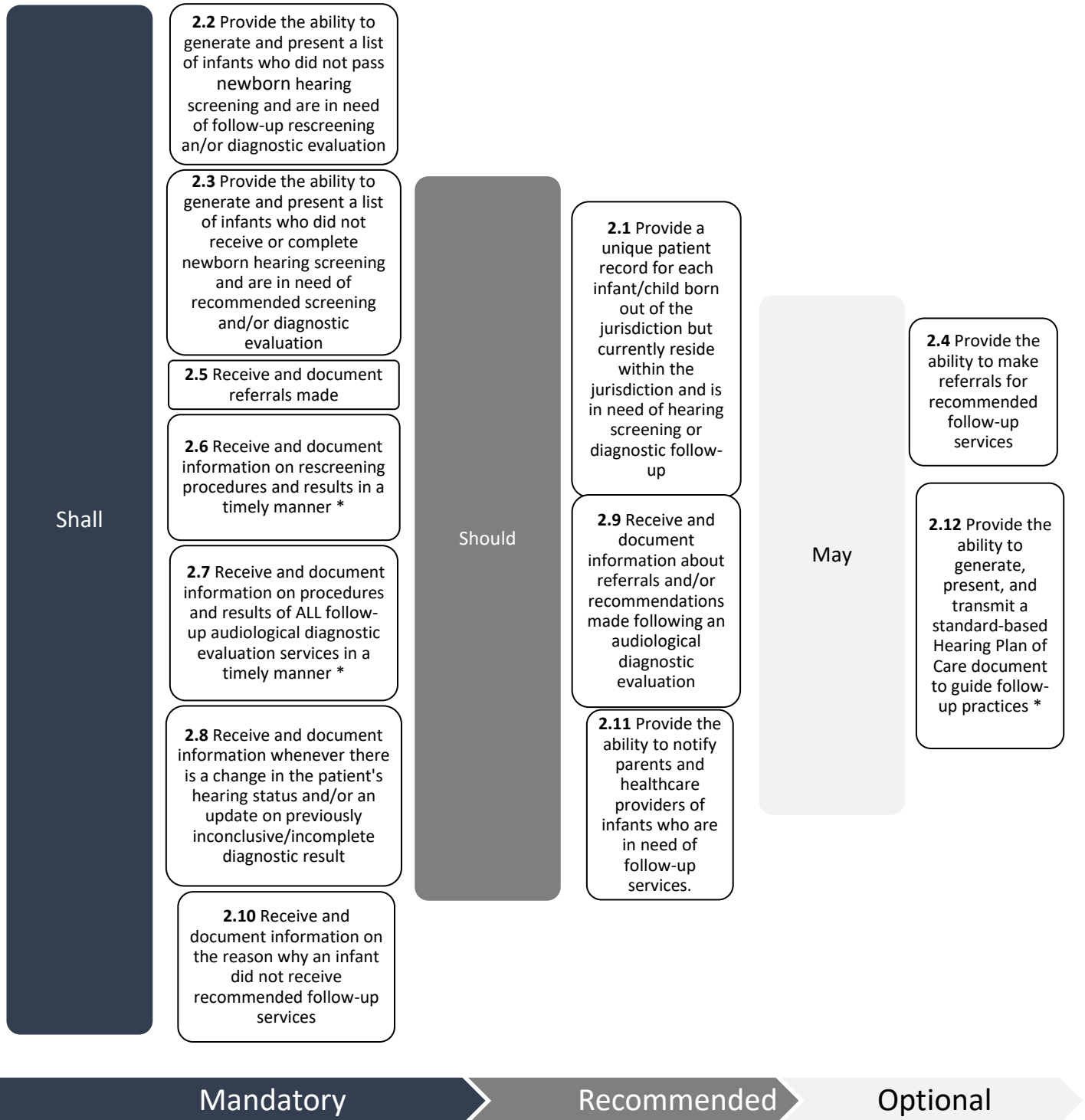
**WYOMING EARLY HEARING DETECTION AND INTERVENTION -
INFORMATION SYSTEM (EHDI-IS)**

Goal 1: Document unduplicated individually identifiable data on the delivery of newborn hearing screening services for all infants born in the Jurisdiction



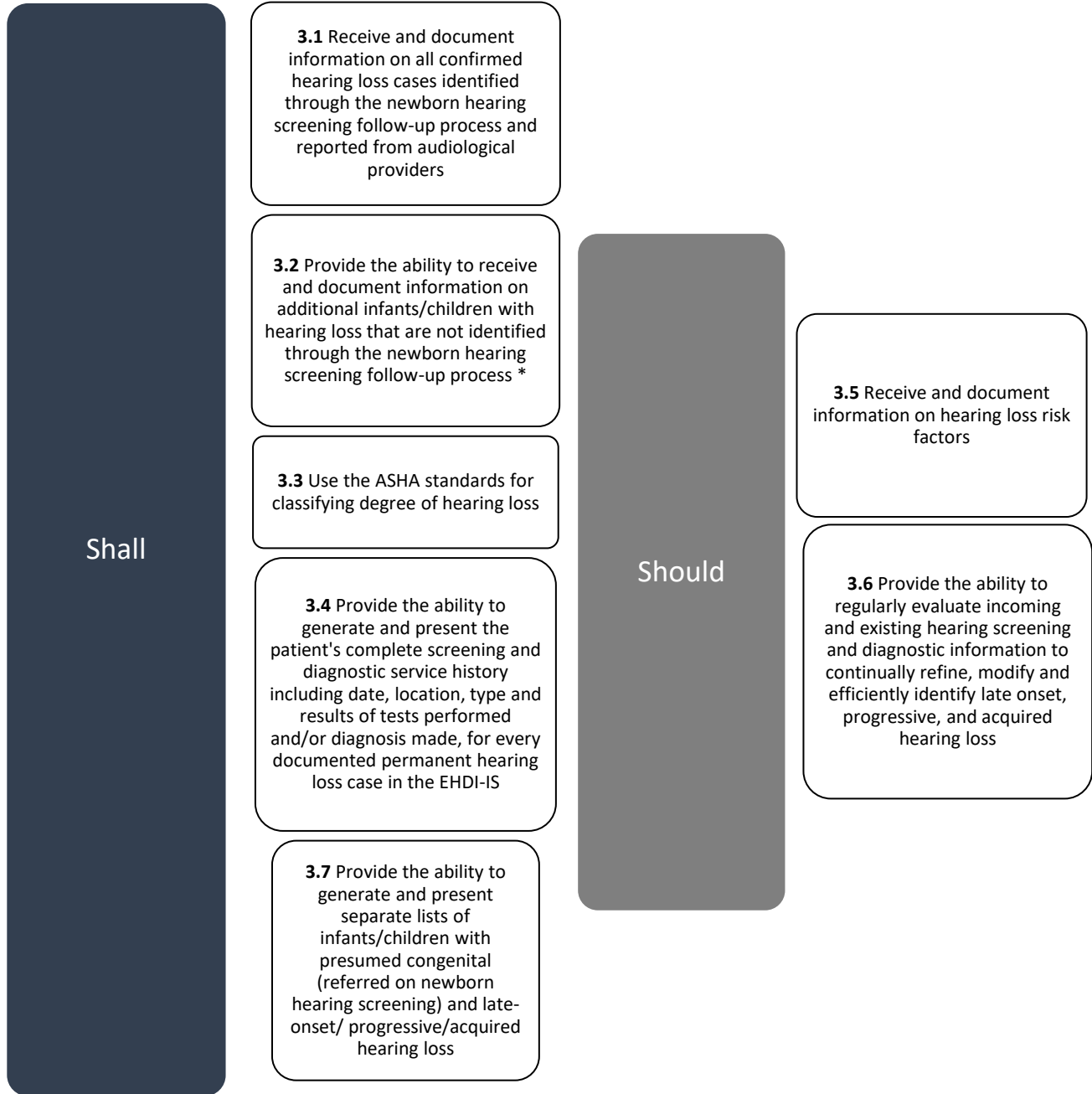
* In accordance with scope of practice, organizational policy and jurisdictional law

Goal 2: Support tracking and documentation of the delivery of follow-up services for every infant/child who did not receive, complete or pass newborn hearing screening



* In accordance with scope of practice, organizational policy and jurisdictional law

Goal 3: Document ALL cases of permanent hearing loss, including congenital, late-onset, progressive, and acquired cases for infants/children <3 years old

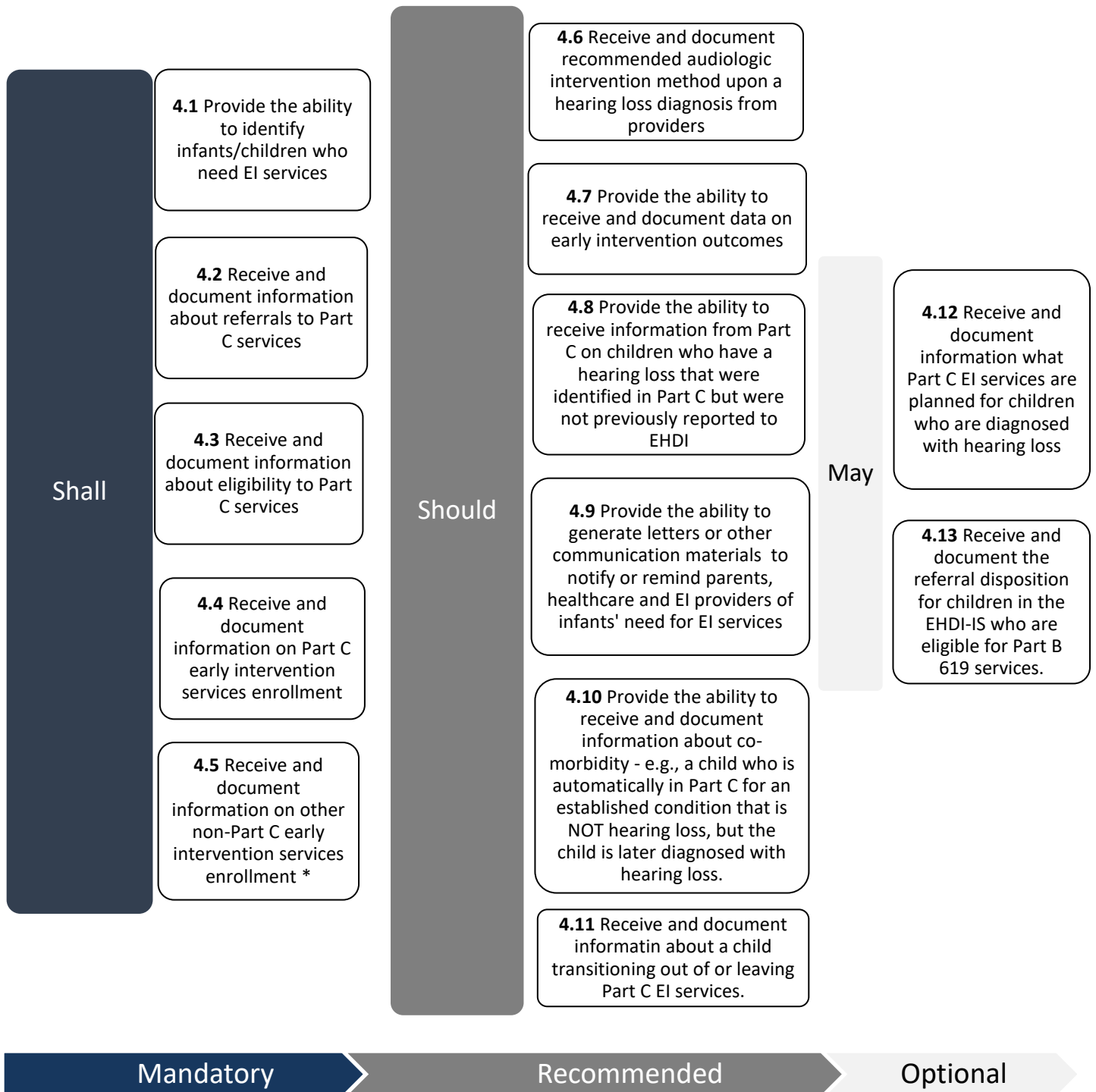


Mandatory

Recommended

* In accordance with scope of practice, organizational policy and jurisdictional law

Goal 4: Document the enrollment status, delivery and outcome of early intervention (EI) services for infants and children with hearing loss <3 years old



* In accordance with scope of practice, organizational policy and jurisdictional law

Goal 5: Maintain data quality (accurate, complete, timely data) of individual newborn hearing screening, follow-up and diagnosis, early intervention and demographic information in the EHDI-IS

Shall

5.1 Provide the ability to regularly evaluate incoming and existing patient records to identify, prevent, and resolve duplicate and fragmented records

5.2 Store all EHDI-IS minimum Data Elements (Appendix A)

5.3 Provide the ability to obtain other Core Data Elements

5.5 Provide the ability to analyze information with respect to data quality *

5.6 Retain all patient data in the system until the patient reaches at least 3 years old, except where prohibited by law, regulation, or policy

Should

5.4 Provide the ability to obtain Extended Data Elements

5.7 Allow re-activation of a case when new information has arrived that illuminates the disposition of a case

5.8 Provide the ability for staff to record notes on phone interactions with the public under each child's file

5.9 Provide the users with easy access to metadata, system documentation and a user guide

Mandatory

Recommended

* In accordance with scope of practice, organizational policy and jurisdictional law

Goal 6: Preserve the integrity, security, availability and privacy of all personally-identifiable health and demographic data in the EHDI-IS

Shall

6.1 Have written confidentiality privacy practices and policies based on applicable law or regulation that protect all individuals whose data are contained in the system

6.2 Have written data sharing and confidentiality/privacy agreement with any other information systems which the system links to and/or shares data with

6.3 Have user access controls and logging, including distinct credentials for each user, least-privilege access, and routine maintenance of access privileges

6.4 Operated or hosted on secure hardware and software in accordance with industry standards for protected health information, including standards for security/encryption, uptime and disaster recovery

Mandatory

Goal 7: Enable evaluation and data analysis activities

Shall

7.1 Provide the ability for authorized users to extract and use data to assess program progress towards achieving national/jurisdictional benchmarks

Should

7.2 Provide the ability to generate performance measurement reports, as defined by the jurisdictional system evaluation plan

7.3 Provide the ability for authorized users to export data to other data management and analytical software tools such as MS Excel, SAS, SPSS, etc

Mandatory

Recommended

Goal 8: Support dissemination of EHDl information to authorized stakeholders

Shall

8.1 Provide the ability to generate, present and transmit standard and/or custom-defined reports for authorized users without assistance from system vendor or IT personnel

Should

8.2 Provide the ability for authorized healthcare providers to electronically access newborn hearing screening and follow-up service information of their patients

Mandatory

Recommended