June 30, 2020

New Mexico (NM) Statewide Price Agreement (SWPA) Contractors
Santa Fe, New Mexico 87507

Subject: Request for Quote (RFQ) – System Integrator (SI) Services

The New Mexico (NM) Human Services Department (HSD) is procuring SI services related to its current Medicaid Management Information System Replacement (MMISR) Project, and Health and Human Services 2020 (HHS2020) initiative. The HSD is requesting quotes from contractors who hold a current State-Wide Price Agreement (SWPA) for the provision of Information Technology (IT) Professional Services – Application Services or other applicable price agreement categories.

The instructions and information below are intended to assist the contractors in pricing a quote for HSD evaluation.

1.0 Distribution of this Request for Quote

In order to accomplish the HSD purpose of this initiative, this RFQ is distributed to contractors who currently hold an agreement with the State under the SWPA. The SWPA procurement categories used for distribution include:

- Application Development Services
- Database Management and Business Intelligence Services
- Systems Administration Services
- Network Services
- IT Professional Services (SWPA based on GSA rate)

2.0 Purpose of this Request for Quote

The purpose of this RFQ is to obtain quotes from qualified contractors to provide fixed price work products to complete the implementation of an integration platform and shared services applications in order to interconnect multiple services. The work products will help meet HSD’s need for a MMISR with extensions to other state, federal, and private systems to deliver integrated health and human services to enterprise clients. The work products are pre-defined to build upon critical investments in the current HHS2020 infrastructure, operating systems, databases, and applications generally comprising an enterprise integration platform.
2.1 Introduction, Intent and Objectives of this Engagement

HSD intends, through this RFQ and an associated contract, to partner with an industry leader in systems integration. This partnership is critical to the successful integration of many software applications that must seamlessly interoperate to create a Centers for Medicare and Medicaid Services (CMS) certified MMIS and serve similar processes across the broader State enterprise.

HSD is following the CMS recommendation that the historically monolithic MMIS be decomposed into smaller modules bounded by like functionality and centers of excellence. Software applications to support this modular decomposition can be found in the market place from industry leaders each specialized within an area of expertise. The challenge posed to the HSD and its integration partner is to integrate these modules, sometimes comprised of multiple Commercial off-the Shelf (COTS) products, into a unified and interoperating enterprise.

The integrated enterprise must execute end-to-end business processes that span one or many of the modules seamlessly and in high performance real-time. Of particular importance is the routing of Medicaid claims transactions and other standardized electronic transactions between legacy modules, new modules, State agencies and external partners such as clients, providers, managed care organizations, employers, and CMS.

The integration also includes legacy applications that must interoperate with the new MMIS modules and shared services. The primary legacy applications include:

- ASPEN for enrollment and eligibility management of many State benefit programs
- Child Support Enforcement System (CSES) for management of child support programs
- Department of Health (DOH):
  - Children’s Medical Services Integration
  - Client Data Management System (CDMS)
  - Families First Case Management System
  - Facilities Licensing Exchange (FELIX) Replacement
  - Incident Management System

Most HSD Divisions and many State agencies will utilize the integration platform and the applications connected to it. Primary divisions and agencies to have systems integrated include:

- HSD Medical Assistance Division (MAD)
- HSD Child Support Enforcement Division (CSED)
- HSD Income Support Division (ISD)
- HSD Administrative Services Division (ASD)
- HSD Behavioral Health Services Division (BHSD)
- Children, Youth, and Families Department (CYFD)
- Aging and Long-Term Services Department (ALTSD)
- Department of Health (DOH)
- New Mexico Health Insurance Exchange
- Other agencies to be determined

This RFQ details ten (10) areas of technological and management expertise that are needed to accomplish the design, development, and implementation of this integration objective. An eleventh section addresses ongoing maintenance and operations. Contractors are required to present their qualifications in each of these areas or the qualifications of a subcontractor that meets the specific requirements. Corresponding work products for each area are detailed in an accompanying document.
titled RFQ Vendor Qualifications. Contractors are required to submit fixed price quotes for each of the work products.

The ten (10) areas of design, development and implementation are introduced below.

2.1.1 Service Orientation

Orchestration Implementation Plan

The SI will conduct business analysis, develop, and implement the rules for Service Orchestration. Service Orchestration will leverage the Oracle Fusion Middle Ware (OFMW) and other technology services to communicate between modules. The OFMW includes an Enterprise Service Bus (ESB), a Rules Engine, and numerous other components to enable this work.

Interfaces Implementation Plan

System integration requires the creation of and/or access to interfaces across modules and systems. In addition to the OFMW suite, Application Programing Interfaces (APIs) as well as potentially unknown (at this time) interfaces will need to be created and or accessed.

Oracle IDM Service

The State’s current Oracle Identity Management (IDM) implementation is in a state of partial completion. The SI must complete this critical component for the modular MMIS as well as enable it to be available to partner agencies.

Enablement of Master Data Management (MDM)

MDM exists in a state of partial completion using a Not Only Structured Query Language (NoSQL) system based on the Mark Logic tool set. The SI must fully implement the MDM as both a service and a data set.

Address Standardization, Validation, and Verification (ASVV)

ASVV exists in a state of partial completion. The SI must successfully complete this critical item and make it available to the enterprise.

Implement Hyland OnBase Enterprise Document Management System and Content Composer

Hyland OnBase and Content Composer are actively being implemented and scheduled to exist in a start of partial completion. The SI must successfully complete instantiating these critical systems and make them available to the enterprise.

2.1.2 Infrastructure

The state’s infrastructure for the IP is in a state of partial completion. Among other technology pieces it is built upon the Dell/EMC VxRack Flex system leveraging VMware, Linux, Windows Server software. The SI must complete the installation and configurations of the infrastructure, bringing it to a successful state of industry best practices and requirements of the enterprise.

2.1.3 Security

The SI is responsible for following state, federal, and industry standards of security. The unique nature of the IP at the center of the MMIS puts it in a critical path for all security.
2.1.4 **Canonical Message Models**

The SI must enable the successful communication of data between MMIS modules and partner agencies systems using the HSD approved Canonical Message Models.

2.1.5 **Identity and Access Management (IdAM) System**

An enterprise IdAM exists in a state of partial readiness. The SI must implement the functionalities of IdAM using the Oracle Identity Management (IdM) solution across all enterprise users and systems.

2.1.6 **Master Data Management (MDM)**

The state’s MDM system exists in a state of partial completion. The SI must complete the service enablement of MDM, the database and functionality of MDM using a combination of JAVA (or similar) and the Mark Logic database technology.

2.1.7 **Data Migration/System Migration Repository (SMR), Operational Data Store (ODS)/Raw Data Lake (RDL), Data Models and Reference Data**

The SI contractor must plan, develop, and implement the migration of data solution from Medicaid Systems and partner systems to our ODS and Data Warehouse. The SI will play a critical role in development and implementation of the ODS and in implementing best practices for Data Model and Reference Data.

2.1.8 **Testing**

The SI contractor must provide an integrated solution that demonstrates a deep understanding of System Integration processes and technologies with proven expertise in solving the unique challenges as well as verifying and validating their solution end to end across the enterprise.

The SI contractor is responsible for executing all test types and test phases in scope, producing the prescribed deliverables for each type/phase. The SI contractor must coordinate for needed testing work products & tools.

The SI must coordinate testing across all modules and systems for Quality Assurance Testing and System Integration Testing.

The SI must coordinate with the HSD’s testing lead, module contractors and legacy systems administrators for testing across all modules in User Acceptance Testing.

2.1.9 **Project Management**

For the SI to successfully complete its role within the Health and Human Services 2020 (HHS2020) they will need strong project management skills. Experience in a similarly large and complex project and environment is a must. The contractor project management team will work closely with the Enterprise Project Management Office (EPMO).

2.1.10 **CMS Certification**

While the SI effort will deliver vital functionality across NM HHS constituencies, a central stakeholder in the work is New Mexico’s Medicaid entity. The HHS2020 initiative will provide new functionality across
HSD and benefit enterprise partners, including Aging and Long-Term Services Department (ALTSD), Children, Youth, and Families Department (CYFD), and Department of Health (DOH). A critical outcome of MMISR and the SI effort is CMS certification. The certification effort will require a great deal of time and resources to accomplish. All module contractors are required to fully and carefully plan for CMS certification and to appropriately dedicate staff to certification. Responses to this RFQ must acknowledge an understanding of the importance of certification and provide a quote that demonstrates readiness to effectively take on this critically important activity.

See the CMS web site to review the Medicaid Enterprise Certification Checklist. Also see HSD’s cross reference of Medicaid Enterprise Certification Toolkit (MECT) items to MMISR modules on HSD’s Procurement web site. Many of the Addendum 18 MITA Business Area requirements (found in the procurement library) apply to the SI Contractor, including module integration, interfaces, security, orchestration, and data integrity. The selected contractor, in conjunction with the HSD Business Certification team, will ensure the requirements are met and evidence is provided to the State for CMS reviews. Because of the critical role of the SI, the selected contractor must work in close collaboration with State staff and other module contractors to assure successful integration and completion of each module’s certification requirements. Successful integration includes the completion of end to end testing of all requirements. Contractors must budget for resources to allocate their time working to ensure the certification checklist items have been satisfied and evidence is provided to the State for CMS certification reviews. CMS certification is a must-have outcome of the SI and its crucial role on the project.

The SI Contractor will support CMS certification through the R2 Operational Milestone review and the R3 Final Certification review. Once the R3 review is completed, the SI contractor will be responsible for ensuring ongoing operational functionality of the entire HHS2020 enterprise in a state comparable to the R3 certified state.

CMS is beginning to utilize Outcomes Based Certification (OBC), which may replace the MECT System Review Criteria. The Contractor must be prepared to meet all current, as well as future, assigned certification requirements, regardless of the criteria set used. OBC is now the required approach for certification of Electronic Visit Verification Certification and the guidelines are available for review.

### 2.2 Current Integration Platform Status

The existing integration platform is in a state of partial completion. This system integration engagement will complete the installation, configure the platform for integrating many interoperating applications. The integration will be continuous to include several simultaneous development tracks that will converge on the integration platform into combined release packages. Each new application integration will prompt changes to previous integrations as the new application begins to exchange data with the others and further completes complex end-to-end business processes.

### 2.3 Existing Technology Investments

The HSD has made a sizable investment in the following systems and technology in order to complete the development of this project. The new system integration engagement must build upon the following infrastructure components recently acquired and in various stages of instantiation:

- Oracle Fusion Middleware
- Dell VxRack Flex HCI
- VmWare Hypervisor
- Redhat Linux and MS Windows operating systems
2.4 Existing Module Systems
The HSD has contracted with three (3) other contractors to provide several BPO services. These efforts are in process (see below for detail). They are:
- Data Services (DS) for data warehouse, business analytics, and business intelligence;
- Quality Assurance (QA) for Medicaid Program Integrity, Fraud Waste and Abuse, and Third-Party Liability (TPL) including the coordination of benefits;
- Consolidated Customer Service Center (CCSC), part of the Unified Public Interface, for call center support and contact management

2.5 Future Module Systems
The HSD is in the process of procuring four (4) other modules to be integrated into the enterprise. They are:
- Benefit Management Services (BMS), described below
- Care and Case Management Solution (C/CMS), described below
- Financial Services (FS), described below
- Unified Public Interface (UPI), described below

3.0 Enterprise Overview and Background
This engagement resulting from this RFQ will form the central integrating component of the larger MMISR project and the HHS2020 Enterprise initiative. Contractors should inform themselves regarding these projects by reading the overview approach below and consulting the procurement library of related procurements and supporting documentation.

The NM Procurement Library link is https://webapp.hsd.state.nm.us/Procurement/

3.1 MMISR Approach
The MMISR Project is part of NM HSD’s HHS2020 initiative. HHS2020 is an Enterprise vision for transforming the way HHS services and programs are delivered to New Mexicans. HHS2020 is not limited to technology; it encompasses a reevaluation of processes and organizational structures used to manage and deliver program services, and efforts to work across organizational boundaries to more effectively manage and deliver all HHS services in the State and transition from current operating models to outcomes-based focus for the work. The goal of the MMISR solution is to move away from a monolithic system approach and instead to implement a modular MMISR solution with the information, infrastructure, tools, and services necessary to efficiently administer NM Medicaid and HHS programs. The MMISR solution will use a combination of technology and Business Process Outsourcing (BPO) service procurements as the foundation for the HHS2020 Framework. Due to MMISR certification and auditing requirements, the State will retain oversight and will require Contractor’s adherence to Service Level Agreements (SLAs) for BPO processes and services. The services and processes performed by the Contractor must meet the CMS Certification requirements and increase the Enterprise’s Medicaid Information Technology Architecture (MITA) Maturity Level.
HSD plans to achieve this vision via a series of procurements. Each procurement will require that the selected Contractor comply with accepted standards that promote interoperability across the HHS2020 Framework and that support successful Service Oriented Architecture (SOA) compliant integration with other MMISR modules and services. To that end, the State requires an SI Contractor to provide a unifying role across these procurements. The SI Contractor will complete the instantiation, fully configure, continuously develop, continuously integrate, and maintain the core infrastructure used to transfer and enable storage of data from all the Contractors continuing throughout the MMISR solution. Additionally, the SI Contractor is responsible for planning, testing, migrating, and managing successful integration across modules and services, and for setting interoperability standards.

HSD intends for the BPO modules to function as “black boxes”, in that the inner workings of the Contractor’s enabling technology are not specified by the State, but the module is viewed in terms of functionality, business process efficiency, performance against SLAs, and data inputs and outputs, enabling the State to take advantage of commodity services in the marketplace to achieve rapid use of key services needed to support the enterprise. The HSD BPO procurement strategy encompasses SLAs and associated Liquidated Damages (LDs), in compliance with CMS, State, and other requirements, including those associated with the SI Solution and the MMISR solution as a whole and on exchange of data in agreed-upon formats and frequencies.

The MMISR Process Flows found in the Procurement Library present flow diagrams that illustrate, at a high level, the interactions, and relationships among the MMISR modules and services.

### 3.2 The MMISR Modules and Services Procurements

**System Integrator (SI)** – The HSD will utilize an experienced SI contractor to complete the implementation of the integration platform and shared services applications in order to integrate both current and future module services. The SI will also lead the integration of other modules to create a modular MMIS that meets the needs of the HSD and its partners.

Major components of the SI responsibilities include:

- SOA enablement, ESB, schema management, data quality management (DQM), policy enforcement, security implementation, management, and governance;
- Core shared services including Electronic Document Management (EDM), address verification, client information verification, notification engine, MDM which includes Master Client Index (MCI) and Master Provider Index (MPI) and others depending upon Contractors’ recommendations, and SOA tooling to support business process automation (e.g., Workflow, Business Rules and Business Process Management/Orchestration including ODS);
- Reusable and repeatable system migration capability (including data conversion as required to migrate from legacy systems to HHS2020 ecosystem);
- Security implementation and management, identity proofing, system integrity, system fraud prevention, and Single Sign-on; and
- Integration Governance (e.g., security, monitoring, management, and platform administration).

**Data Services (DS)** – Through the DS procurement, HSD acquired a Contractor and services focused on designing, implementing, operating, and continually improving the structures, processes and data needed to support HHS2020 current and future reporting and analytic requirements. The DS Contractor will develop data structures (e.g., multiple linked data stores, data marts, data lakes, an Enterprise Data Warehouse (EDW) or equivalent) while leveraging the infrastructure and tools provided by the SI Contractor. The DS procurement resulted in a Contractor to design, implement, operate, and continually
improve Business Intelligence (BI) as part of a set of SOA services needed to support current and future reporting and analytics requirements for the State.

**Quality Assurance (QA)** – HSD has contracted with a BPO Contractor to provide the following QA Business Services using a CMS-compliant platform and processes:

1. Program Integrity (PI) support, including TPL, Fraud and Abuse Detection Services (FADS), audit coordination and compliance;
2. Recovery Audit Contractor (RAC) - Management of Recovery and Audit responsibilities;
3. Quality Reporting; and
4. Coordination of efforts and projects with the HSD Office of Inspector General (OIG) and the Medicaid Fraud Control Unit (MFCU) of the Office of the Attorney General (OAG).

**Financial Services (FS)** – Through the FS procurement, HSD will contract with a BPO Contractor to provide comprehensive financial services (e.g., accounting, payment, billing); Enterprise claims processing (including pharmacy claims, non-medical claims and other payment types), Self-Directed Home and Community Based Services (HCBS); Pharmacy Benefit Management (PBM); Drug Rebate; Data Exchange and Reporting; and General Requirements, using a CMS-compliant platform and processes for multiple Enterprise programs. The FS Contractor also will provide services necessary for managing the FS contract, for interacting with the State and other HHS2020 Contractors to effectively support HHS2020 and MMISR and for providing to the SI and DS Contractors the data elements essential to Federal reporting requirements.

**Benefit Management Services (BMS)** – Through the BMS procurement, HSD will contract with a BPO Contractor to provide the following services for BMS using a CMS compliant platform and processes:

1. Member Management;
2. Utilization Management/Utilization Review including Prior Authorization (and other authorizations, Referrals, Budget Management, Individual Support Plans and Services);
3. Provider Management, including enrollment; and

**Care and Case Management Solution (CCMS)** – Through the C/CMS procurement, HSD will contract with a BPO Contractor to provide the following services for C/CMS using a CMS compliant platform and processes for several State agencies and many programs

1. Case Initiation
2. Case Monitoring and Management
3. Establishment
4. Enforcement
5. Critical Incident Management
6. Pre-Admission Screening
7. Complaint, Grievance and Appeal Management
8. Fair Hearings tracking and Management
9. Contract Management
10. Community Reintegration
11. Customer Service
12. Financial Management

**Unified Public Interface (UPI)** – A key element of the HHS2020 Framework is a unified interface serving all Stakeholders, in keeping with the vision of presenting a more customer-centric view of HHS services and processes. HSD seeks to develop, implement, and operate a UPI serving New Mexicans,
Providers, State agencies and employees, and other Stakeholders. The goal of the UPI is to offer a “one-stop shop” that embraces a “no wrong door” approach to customer service.

To achieve this goal the UPI will consist of three (3) principal parts:

1. Consolidated Customer Service Center (CCSC) – The goal for the CCSC is to provide a single, integrated contact center serving all HSD programs, to increase efficiency and to make it easier for our customers and providers to obtain needed information and/or actions. As noted above HSD has executed a contract for these services.

2. Unified Web Portal and Mobile Technology – The goal for the Unified Web Portal and Mobile Technology encompasses both a unified web portal and the use of social media, mobile technology and other user-friendly technologies to improve User ease of access and to enhance the State’s ability to readily and effectively reach customers, Providers and other Stakeholders.

3. Internal Portal – The internal portal will serve all State employees providing access to enterprise end-to-end automated business processes and to the HHS2020 applications individually. The internal portal will also contain its own automation of commonly used queries, informational retrieval, summary reporting and general information.

A single RFQ for development of these portal services was issued on May 29, 2020.

3.3 Integration Testing

HSD expects the system integration contractor to provide an integrated solution that demonstrates a deep understanding of System Integration processes and technologies with proven expertise in solving the unique challenges as well as verifying and validating their solution end to end.

The varied sources of data that require consolidation, the high level of data sensitivity, and the critical need for data integrity and quality in the HHS2020 project make it imperative that the system integration contractor verifiably adheres to MITA 3.0 Best Practices, the CMS IT expedited Life Cycle (XLC) as well as established and documented HHS2020 Security Management and Quality Management processes.

The system integration contractor is responsible for executing all test phases of CMS XLC and HHS2020 Testing Framework and producing the prescribed deliverables for each phase. This is of particular importance for Requirements Management, Quality and Test Management, and Requirements Traceability for CMS certification. The established and documented HHS2020 Review and Approval processes apply to all Quality Activity deliverables.

4.0 Request for Quote Overview

This RFQ is comprised of four (4) documents and supported by an on-line library of previously released public reference information. The four documents described below are specific to helping contractors respond to this RFQ. The online library contains reference material for this and several related procurements. The vendors are encouraged to review this library in preparation for responding to this RFQ.

1. Invitation to Quote – this document.
2. Contractor Qualifications and Work Product Quotes – Contains specific contractor qualifications. Also contains descriptions of work products for which the contractors must provide a fixed price quote.
3. Instructions for Responding to this RFQ – Contains the RFQ schedule, format for responses, specifications for responses, evaluation process overview and other instructions.
4. Draft Contract – Draft of the contract vendors should be prepared to sign if selected for this engagement.

5.0 Request for Quote Guidelines

This request for quote is issued under the following guidelines:

1. This notice is being distributed to Contractors holding current NM SWPA with the appropriate category of expertise.
2. The HSD will review quotes and intends to award one contract to acquire the specified work products.
3. The HSD expects the awarded contractor will use internal staff or subcontractors to meet contract requirements. Regardless, the HSD will require the contractors to maintain or coordinate staffing to cover turnover to prevent interruption of services.
4. Work is conducted at State offices in Santa Fe. Contractor’s staff and subcontractors must agree to HSD security standards related to building, network, or system access. Working from remote or other non-State office must be approved in advance.
5. The HSD may amend the contract for other related services in the future based on strategic needs of the project.
6. A draft state approved contract is included. The terms and conditions are consistent with state procurement codes and include several terms related to federal funding requirements.
7. Any contract awarded will be reviewed by the Department of Finance and Administration, the Department of Information Technology and the Center for Medicare and Medicaid Systems. Their review may result in requests for changes to the terms and conditions or statement of work. The HSD will review requested changes with the Contactor prior to acceptance.
8. Upon review of the quotes, the HSD will contact initial qualifying contractors. Not all quotes will develop into contracts.
9. The selected contractor will be considered the prime contractor with any major subcontractors identified by name. All subcontractors must comply with the HSD security, privacy, policies, and codes of conduct. Required online HSD training will be provided at no charge and must be completed annually per federal or state regulations.
10. The pricing must be firm for 120 calendar days after the due date for receipt of quotes.
11. Per state transparency laws, quotes will be considered public record.
12. This Request for Quote may be canceled at any time and any and all quotes may be rejected in whole or in part if in the best interest of the HSD.
13. Any contract awarded as a result of this RFQ process may be terminated or adjusted if sufficient appropriations or authorizations do not exist or are reduced.
14. The HSD may accept all or a portion of the quote.
15. All submitted documents shall become the property of the HSD.

6.0 Contract Considerations

The quotes will be reviewed based on HSD determination and need; the HSD intends to award one (1) contract. The following should be considered:

1. The attached contract is a standard HSD IT contract. Contract articles will not be amended. Please review the contract before submitting quotes to confirm the terms are acceptable.
2. Although retainage is set to 20%, the HSD may adjust or waive retainage based on risk or experience levels of quote presented.
3. The contract states “fixed price deliverables” as the basis for reimbursement.
4. A warranty of six (6) months for work performed or deliverables submitted is included. This will address possible situations in which faulty work is not discovered at submission. Work found faulty after submission will be corrected at no charge to the HSD.
5. HSD may extend contract terms beyond four years per HSD procurement options for Medicaid systems. The term of the contract will not extend beyond the statute limit.

7.0 Appendix

7.1 Appendix A: List of Acronyms

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<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>ALTSD</td>
<td>Aging and Long-Term Services Department</td>
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<td>ASVV</td>
<td>Address Standardization, Validation, and Verification</td>
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<td>BI</td>
<td>Business Intelligence</td>
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<td>BMS</td>
<td>Benefit Management Services</td>
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<td>BPO</td>
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<td>DS</td>
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<td>DQM</td>
<td>Data Quality Management</td>
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<td>EDM</td>
<td>Electronic Document Management</td>
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<td>EDW</td>
<td>Enterprise Data Warehouse</td>
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<td>EPMO</td>
<td>Enterprise Project Management Office</td>
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<td>ESB</td>
<td>Enterprise Service Bus</td>
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<td>FADS</td>
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<td>FS</td>
<td>Financial Services</td>
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<td>GSA</td>
<td>General Services Agreement</td>
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<td>HCBS</td>
<td>Home and Community Based Services</td>
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<td>HCI</td>
<td>Hyper Converged Infrastructure</td>
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<td>Health and Human Services</td>
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<td>Human Services Department</td>
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<td>IdAM</td>
<td>Identity and Access Management</td>
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<td>Medicaid Fraud Control Unit</td>
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<td>MITA</td>
<td>Medicaid Information Technology Architecture</td>
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<td>MMIS</td>
<td>Medicaid Management Information System</td>
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<td>Medicaid Management Information System Replacement</td>
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<td>MPI</td>
<td>Master Provider Index</td>
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<td>NM</td>
<td>New Mexico</td>
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<td>NoSQL</td>
<td>Not Only Structured Query Language</td>
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<td>Office of Attorney General</td>
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<td>OFMW</td>
<td>Oracle Fusion Middle Ware</td>
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<td>XLC</td>
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Sincerely,

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James Lilly
Deputy CIO, HHS2020 Chief Technology Officer

Attachments – RFQ