CMSS CDC Award: Specialty Societies Advancing Adult Immunization

Learning Management System Request for Proposals (RFP):

Bidder Questions and Responses

Updated November 8, 2022

Question Number	Question	Response
1	Should we assume that the deadline for submissions is 11.59p CT on the specific day?	Yes, proposals should be submitted by 11:59 p.m. CT on November 18, 2022. Proposals should be submitted via e-mail.
2	The RFP listed 7 subspeciality societies that are partnering with the project. Can you confirm if the final LMS needs to have Single-Sign-On with each of the 7 subspeciality societies, or only with CMSS' SSO?	Single sign on is meant to be for the end users. Initially, that will be the members of the seven partner specialty societies and the staff from the societies working on the project. In the not-too-distant future, we will open the content to members of all of the societies of CMSS, although we doubt all will access the content. If single sign on would be a problem in this scenario, please describe the user experience you can provide without single sign on. Further, if single sign on is not implemented initially, can it be built in at a later date if requested by CMSS?
3	Based on the description for "Activity 3", should I assume that CMSS is looking for a vendor that will also provide end-user support? In other words, does CMSS needs us to provide direct support to both its	Bidders should assume that end-user support will be required for staff and consultants of CMSS and its society partners. We do not anticipate that the vendor will need to provide direct support to the individual learners, who

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	7 partner subspeciality societies, its learners, in addition to provide the LMS platform?	will be members of the specialty societies and physicians and other staff in participating health systems.
4	Can you confirm that, the data migration requirement (3rd last bullet item) is about importing and exporting data post-launch? And it is not about migrating existing content from an existing LMS?	The content on the LMS will be posted from CMSS and from its partner specialty societies. There is no expectation of migrating from an existing LMS or of importing or exporting data. CMSS is interested in the capacity to import data visualizations (e.g., charts and graphs) from a data management vendor, which has not yet been selected, however, there will not be a need to import data at this time.
5	I know that it is impossible to accurately estimate the number of users for a brand new initiative, but does CMSS have any rough projections, so we can provide pricing based on range of user count?	We can only provide a rough projection at this stage, but we estimate that the LMS will have 3,000 unique visitors monthly. We recommend that bidders use this figure for the purpose of pricing. And, please include a scale showing how higher usage would affect the price.
6	We would appreciate more details regarding "Capable of integrating with other software (e.g. data management, membership, etc.)" – what specific systems are you referring to?	CMSS would like an LMS that can integrate with: • YourMembership (YM), which is CMSS' membership management software. Ideally, we would like SSO integration between YM and the LMS. • CMSS Connect, a networking platform using HigherLogic. • Authorize.net for financial transactions. • CMSS website, which is a WordPress site.
7	What other vendors are participating in the RFP request?	This is an open procurement process. All qualified bidders are welcome to submit proposals.
8	Have you had demos before presenting this RFP, and if so, with who?	CMSS has not invited any organizations to provide demonstrations as part of this procurement process.
9	What is the timeline and go-live date?	CMSS prefers a vendor that can ramp up quickly. We would like bidders to define a development and implementation timeline in their bids.

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10	What type of users are in the system, and how many?	The primary users of the system will be physicians and other health care providers. See answer to Question 5 for an estimate of the expected number of users.
11	What is the award date?	CMSS anticipates making awards in January 2023.
12	What is the budget?	This is CMSS' first foray into establishing an LMS to serve its members. We look to vendors to provide proposals that require minimum adaptation to their existing offerings, thus minimizing costs where possible.
13	What is the buying process after RFP?	Proposals will be reviewed by CMSS staff, consultants, and invited experts who have expertise in education, curriculum design, management of learning networks, and professional society operations. CMSS will invite top bidders to provide demos. We expect those demos to take place in mid-December. Final selection and award will take place in January 2023.
14	Though the RFP mentions, will both societies and the health system enter the LMS through an SSO integration, or will the LMS need to provide stand-alone access to the LMS directly? Similarly, will the health system access the LMS directly? Is there a consideration for each health system[s] to have its branding or cobranding with the project logo available on the LMS?	Single sign on is meant to be available to all who utilize the LMS - primarily the end users (learners). CMSS staff and consultants will build new content and edit content on the LMS. Please describe how you would recommend the specialty societies upload content that they are willing to share on the LMS (can they do it directly or do they need to go through CMSS staff?). Specialty societies and health systems will not be able to edit content from other entities. We do not anticipate special branding for the health systems, however we would like to have separate landing pages for the seven specialty societies so that we can clearly delineate content from the individual specialties and their health systems. If a separate landing page does not make sense, please describe how you would recommend differentiating the societies' content.

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15	Can you share the merchant account used for integration with the eCommerce feature? Or will there be an integration with your AMS, where we can use the AMS eCommerce?	Our current payment processor is authorize.net. If needed, we could connect to another processor. Our merchant account is through Chase Payment Tech.
16	Regarding gamification capabilities, are there any specific features you are considering? Leaderboards or will the content also be "gamified"?	We are in the very beginning of our process to develop new content, so our instructional design has not yet been established. Please describe your capability to support gamification in educational content being developed. We do not anticipate needing gamification in the first year of implementation of the LMS.
17	Our LMS is built on Drupal, an open-source software. However, our team has added several custom modules on top of "core Drupal" to ensure we can efficiently meet the requirements of our customers offering CME/CE credits to their learners. Are there any concerns about this aspect?	Please explain the value of using open source versus a commercially available product. If there is a specific benefit to utilizing Drupal - please explain. Also please explain if you develop custom modules for other customers, whether those automatically become available to your clients and whether there is a fee for these additional modules once added.
18	We understand that there needs to be access levels at CMSS and other parties. Is there any document that explains what content each party can and cannot access?	As we are in the very beginning of our process, there is no document as requested. That said, CMSS staff and consultants would have full access to the LMS with the ability to build content, edit content and remove content across the entire LMS. We would like the specialty societies to be able to add their own content and/or links to their content and to edit what they have added if possible but not to be able to add content or edit content posted by either CMSS or other specialty societies. Since the number of health systems will be rather large, we would likely just ask the specialty societies to post health system content on their behalf.
19	Knowing that this could be a guestimate, how many learners and courses will the LMS need to support? We understand that SCORM needs to be supported.	We don't know all the formats that education will come in. We would like to have capacity for interactive formats. As we are not the experts in

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	Other than this format, what other activity formats are critical for CMSS?	regard to available formats beyond SCORM, please give examples of what might be possible that CMSS could utilize and how we would utilize them.
20	Is member/non-member determination happening via an Association Management System (AMS)? If so which AMS is CMSS currently using?	CMSS' association management system (AMS) is YourMembership (YM), where we have both member- and non-member categories and may create other categories.
21	Are there any reporting requirements to ACCME, MOC, CE Broker or any other accreditation body?	CMSS is not accredited to provide CME/CE credit at this time. We are likely to jointly sponsor content with accredited providers, which will mean that we will need to report data to the accredited provider so that they can report it to their accreditor (e.g., ACCME). We would want to be able to provide this data to the accredited provider that would be simple for them to submit to the accrediting body.
22	Related to Federal requirements, we see a list of standard regulations that require compliance. However, it's not clear if the contract will be between the Vendor and the Federal Government, or CMSS? Are there other government requirements that must be complied to (for example, FISMA security requirements for the Federal Government are often significant)?	CMSS will issue the contract directly to the vendor. We will investigate whether FISMA security requirements apply to this contract.
23	How does the relationship between CMSS, the publishing partners, the health system partners, and the vendor work? Would the vendor need to directly support all of the partners, or would the vendor support CMSS who in turn would support the partners?	See response to Question 3.

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24	We note a January kickoff, but is there a desired timeline/launch date to get into full operation with partners?	See response to Question 9.
25	Has content already been generated for the LMS, and if so, would it be possible to get a sample? Once fully operational, is there an estimate of how many content objects, quizzes and/or programs will be supported?	CMSS anticipates building up the content on the LMS over time. At the start, we will have links to content that exists on partner society's LMSs and other external sites. For the purposes of budgeting, we suggest that bidders estimate the LMS will host two live events per month. Other content will be posted to the LMS over the coming months and years.
26	What is your best estimate as to how many Monthly Active Users there will be?	See response to Question 5.
27	Because the funding is coming from the CDC, is there any expiration date on this funding we need to be aware of?	CMSS anticipates that the CMSS will eventually support other CMSS programs and activities in the near future and after the CDC-funded program has ended.
28	Do we need to be FedRAMP authorized?	As the contract will be with CMSS, FedRAMP authorization is not required.
29	How many total users should offerors price?	See response to Question 5.
30	Does this require FEDRAMP?	See response to Question 28.
31	Would this be AWS.gov?	No, the LMS will not be hosted on Federal government cloud service providers.
32	Question withdrawn	N/A
33	Will separate landing pages be required for each of the seven specialty societies and 50-70 health systems partnering with CMSS in the implementation	We would prefer for there to be separate landing pages within the LMS for the seven specialty societies in this grant so that they can upload their specialty-specific education and quality content. They will also be able to upload health system content that they believe is valuable to share. There will not be a need for separate landing pages for each health system. If

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	of the SSAAI project, and other CMSS member societies.?	you have an alternative suggestion from the individual landing pages, please elaborate. For instance, we are also likely wanting to post CDC-specific content but likely will not want a separate landing page for that content.
34	Will CMSS staff and consultants need to upload content on behalf of all those subsidiary organisations whilst enabling those organisations to create content that is only available to them?	CMSS staff and consultants should be able to build content as well as upload content it creates or is shared with CMSS. As noted in response to Question 33, we would like the specialty societies to be able to upload their education and quality content as well as to edit and delete their own content. They should not be able to edit or delete content CMSS has posted or other specialty societies have posted. No content is anticipated to be restricted to only the organization posting the content.
35	Please provide more detail on the types of interactive tools referred to in " educational and quality materials in various formats".	We are in the very beginning stages at this time. Most quality content will come in the form of clinical guidelines, white papers and position papers. We anticipate developing webinars that will be hosted on the LMS and are in the beginning stages of developing a Vaccine Champion train-the-trainer program that will likely have some live and some activity-based components on the LMS. We also anticipate that some specialty societies will simply provide links to their educational content on the CMSS LMS. Gamification and the use of social media is also anticipated.
36	Will you be looking to integrate with external simulators or Virtual/Augmented Reality applications?	We have not explored that thus far, but if you can explain how their system could accommodate that, the review committee will be interested to understand their capacity. For instance, if CMSS wanted to develop modules that allow clinicians to practice having various types of discussions with patients regarding immunizations, how would your system using virtual/augmented reality be used?

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37	a) Please confirm which software systems you wish to integrate with.
	b) Please confirm the nature of these integrations:
	    i. Do you require passing learning data from the LMS to these systems?
	    ii. Do you want to receive user data from these systems?
	    iii. Please specify any other data you wish to receive in the LMS from other systems.
	c) Please provide more details on what integration with "project data management platform" means.
		a) See response to Question 6.
		
		b) See responses below.
		    i. In the first year, we will not require passing learning data from the LMS to other systems, but this is a capacity that we would like the LMS to offer because in the future, we may want to transfer learning data to the member database so that we can track program completion and credits earned.
		    ii. Likewise, it is not a requirement in the first year for the LMS to be able to receive user data from other systems, but that is a feature we may want to add in the future.
		    iii. At this time, we do not anticipate needing to receive any other data.
		
		c) As mentioned in response to Question 4, there is no expectation of migrating from an existing LMS or of importing or exporting data. CMSS is interested in the capacity to import data visualizations (e.g., charts and graphs) from a data management vendor, which has not yet been selected, however, there will not be a need to import data.

38	Please confirm how you plan to use a CMS: Is the CMS used to manage learning assets as part of the course development process? Is the CMS also required to store and manage learning assets that do not form part of a course or eLearning module? Who will access the CMS? Is it just administrators or will learners require access to consume informal learning content?	The content management system will be utilized to manage learning assets as part of the course development and updating process. We seek to be able to utilize the CMS to store or manage learning assets that do not yet form part of a course or e-learning module unless there is a convenient way to do so within the LMS at large. For CMSS LMS, we anticipate only CMSS staff and consultants accessing the CMSS CMS.

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39	Do "Topic Libraries" include content just from the LMS or does this include informal learning assets stored in the CMS?	We will want content from the LMS and the CMS included in the topic libraries as well as the capacity to link to other content on the CMSS website.
40	Can you confirm if monitoring of use of courses or informal learning assets by individuals is a requirement?

If so, can you expand on the use case for Auto Access without enrolment? | Yes, we need to know usage information. This could include who accessed the content, how long they accessed the content and whether or not they completed going through all of the content. We would hope that people who sign on can be tracked as they would have had to sign in and this will likely be the only "registration" to use much of our content at this time. Non-members will have to create an account, which is something we are working on at this time. |
| 41 | What is meant by content outside of the LMS:

Do you have specific external providers that you wish to integrate with such as LinkedIn Learning/Skillsoft?

Does this include other content curated from the internet? | We would like our search engine within our LMS to search not only the CMSS website but all of the WWW. We would need to explore how that might allow searches on CDC, NIH and other health care public facing pages. We would like for the search engine to allow for searches that would pull content from specialty society and other medical scientific journals. |
| 42 | How do you plan to use social learning tools (Facebook, Tic Toc, Instagram, etc.)" Is this just the ability to share content outside of the LMS or do you plan to use them within learning initiatives? | Although some organizations have utilized social media for learning, we have not yet formalized plans for how we will do this. We hope that vendors submitting proposals can recommend how social media can be utilized with their LMS product. |
| 43 | "Status of your organization as a minority- or woman-owned business or a business in a Labor Surplus Area. " - are such vendors receiving priority in the selection process? | Minority- and woman-owned businesses and businesses in Labor Surplus areas are encouraged to submit proposals and we are actively soliciting across these. Business status will be disclosed to the review committee for consideration during the selection process. Selection will ultimately be based on responsiveness to the RFP, technical quality and price. |

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44	How do you plan to use xAPI: Can you tell us what data you want to collect? Does this apply to the informal content as well as courses?	We may want to use xAPI to collect what users are doing across systems in terms of accessing content, completing an activity and detailed responses within the activity, time spent, time to completion, and items left to complete. Each program/activity may have different needs to track the user experience across systems and collect the data in a central repository. xAPI tracks what we want including informal content.
45	Can you provide indications of the budget available for this project?	See response to Question 12.
46	What is the anticipated number of learners per month	See response to Question 5.
47	How many administrators/course creators will access the platform per month	We estimate that five administrators will access the platform on a monthly basis.
48	Is the requirement for one platform or a multitenant system? If multitenant, then how many tenants?	We envision one platform with CMSS having administrative control. That said, we would like representatives from the seven partner societies to have the ability to upload, edit, and delete their own content - possibly on their own landing page if possible.
49	Estimate for the number of courses to be hosted yearly?	It is too early to report on this at this time. While specialty societies will likely link to educational content they have created, it is unlikely that they will host that content on this LMS. CMSS is creating a train-the-trainer program and will likely offer webinars throughout the year. Possibly in the second year of the LMS, CMSS may begin developing educational content for the broader medical profession.
50	What is the estimated yearly budget?	See response to Question 12.

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51	Are there any certification deadlines? If yes how many people must complete by that deadline?	CMSS is not aware of any required certifications.
52	How do you envision TikTok, Facebook, and Instagram to be used as part of the learning platform?	See the answer to Question 42.
53	Please provide more information about your anticipated auto-enroll workflow?	At this time, we anticipate that anyone who logs into the CMSS website as a member of CMSS (staff or physician) will have access to all content and hence auto enrolled. We would like to know if their use can be tracked.
54	The RFP document states, the ability to integrate with other software. Can you specify which third-party software or how many?	See response to Question 6.
55	Please list all required integrations with external systems (databases, web sites, &etc.).	See response to Question 6.
56	For SSO can you use SAML or OAuth? If not, what SSO methodology can you support?	We can use OAuth. Details on SSO options are available here: https://www.yourmembership.com/api/
57	Please confirm this LMS solution does NOT require FedRAMP.	See response to Question 28.
58	Please confirm that NO HIPAA information (health records, social security info, &etc.) is to be stored in the LMS.	There will be no HIPAA-protected information hosted on the LMS.
59	Please confirm that there will be a single set of CMSS LMS administrators to be trained and supported? Or will there be separate LMS administrators from each society or health system?	Yes, a small group of CMSS staff and consultants should have administrator access to the LMS. CMSS's partner specialty societies should be able to upload content to the LMS, but will not need administrator access. However, if administrator access is needed to upload or edit the content

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		specialty societies need to upload, we may need to reconsider our workflow internally.
60	Regarding *"Activity 1. Define Platform Requirements. The vendor will support CMSS in defining the platform requirements and features."* We assume you are not proposing a custom LMS solution.	CMSS is seeking a solution that will best meet our needs most efficiently. We do not have a preference for a custom LMS solution.
61	Regarding *"Learning portals, which may be handled by establishing levels of access so that different audiences have different access."* Please provide more information and specific uses cases so we can more clearly understand this requirement.	Currently, we anticipate all members (staff and medical professionals) will have access to the LMS. We will likely limit content access depending on program participation (i.e., only paid registrants of a particular program can access this content). Other segmentation of audiences is likely but not known at this time
62	Regarding the requirements "Gamification capabilities" and "Ability to incorporate social learning tools (Facebook, Tic Toc, Instagram, etc.)." Please provide more information and specific uses cases so we can more clearly understand these requirements.	We need to understand what your platform can do for us. The utilization of social media and gamification is aspirational at this point - although we believe this will be invaluable for not only medical professionals, but also should CMSS decide to create content for the public.
63	To estimate your subscription and one-time setup fees, we need to understand: Specific integration requirements. Monthly usage estimates Monthly webinar and other virtual event estimates	See response to Question 6 about integration requirements. See response to Question 5 about monthly usage estimates. For the purposes of budgeting, assume 2 webinars/month and add information about the price to add additional events. In pricing, please indicate whether pricing varies for live events versus recorded events posted to the LMS.

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64	Regarding your request for *"Client References (2)."* We would be pleased to provide medical society references as a final step in the select process, not in our initial LMS response. We receive a great number of reference requests and limit them in this way to protect the time and responsiveness of our client references.	You may submit a proposal without client references. We will request that the bidders that make it to the final selection provide references.
65	Is the User Feedback Tool related to feedback and/or rating of the activities the user has participated in only or feedback on something else, like the overall experience of the user within the LMS?	We would like our users to be able to provide feedback on activities but also the ability to provide feedback on their experience with the LMS (e.g., this worked well, this was clunky, this didn't work when I tried it).
66	Are you indicating there will be multiple LMS portals or just 1? Also can you help us to understand the 'different' access types, do you have a use case?	See the answer to Question 61.
67	Do you have a use case for an auto enroll feature?	See response to Question 53.
68	Where would the content outside the LMS sit? Is this an integrated search with the CMSS website?	See response to Question 41.
69	Would the LMS be integrating with a 3rd party live event registration system? OR having that live event set-up in the LMS, where in also handling payments, wait lists, etc.?	For virtual events, we would like the registration feature to be set up in the LMS.

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70	Regarding gamification capabilities, is this the ability to support activities where the user earns points/rewards for participating in? Or is this supporting interactive activities?	See response to Question 62.
71	Regarding ability to incorporate social learning tools, can you help me to understand, would this be launching the Learner into the 'groups/pages' on those sites? Or the ability to post content, feedback, etc. onto those sites?	See response to Question 42. At minimum we would use these sites to communicate information to groups that we would set up.
72	The team has requested an estimate of the project's expected annual user count within the LMS.	See response to Question 5.
73	As we are a global Software as a Service company, will the Federal Contractor Requirements listed in the RFP be mandatory? We may not be able to comply with all items listed under this section.	Yes, the Federal contract requirements are mandatory.