DEPARTMENT OF HEALTH
GOVERNMENT OF PUERTO RICO
MEDICAID PROGRAM

AWARD NOTIFICATION
HEALTH INFORMATION EXCHANGE (HIE)
2025-PRMP-MES-HIE-001

Pursuant to Executive Order No. OE-2021-029[1], Circular Letter 013-2021[2], Administrative Order No. OA-581/586/603/614[3], Act No. 38/2017[4], as amended, and 45 CFR 74.327-329, the Puerto Rico Medicaid Program (PRMP) issued the Request for Proposals (RFP) No. 2025-PRMP-MES-HIE-001 to solicit proposals for procuring the professional services of a qualified vendor to provide Health Information Exchange (HIE) operational services and oversee and/or manage the provision of technical services. Thus, the PRMP aimed to contract with a vendor that would be capable of successfully providing HIE services to the Commonwealth's healthcare system and the Puerto Rico Department of Health (PRDoH).

In response to the RFP, PRMP received proposals from five (5) vendors. Submitted proposals were prescreened by the Solicitation Coordinator (SC) to determine if they complied with the mandatory specifications listed in *Attachment E*. Furthermore, in accordance with sections 5.1 and 5.2 of the RFP, proposals were evaluated by PRDoH appointed committees[5] [from here on, Technical Committee (TC)[6] & Evaluation Committee (EC)] in two parts using a weight/score methodology with a maximum overall total of 1,000 points. The first evaluation phase focused on the technical component of proposals and the second on their cost. Section 5.1 of the RFP established in part that *[t]he evaluation committee will recommend contract award to the vendor that receives the highest overall point score of all eligible vendors and demonstrates it meets all mandatory specifications, meets at least the minimum acceptable technical score, and was selected to move forward to cost proposal evaluations.*

The professional services acquired through this RFP will be based on two (2) base year contract and two (2) optional two (2)-year extensions with a potential for six (6) years total. Contract award is contingent upon Centers for Medicare & Medicaid Services (CMS), PRDoH, and other Commonwealth agencies' approval, to the formalization of an agreement between the PRDoH and selected vendor, and associated funding in place for the contract term. Prior to the formation of the contract, this *Award Notification* and the awarded vendor's proposal must be verified by CMS. Once approved, the awarded vendor shall submit all required documentation to the PRMP contract office, including a summarized proposal. The awarded vendor must be registered with *Registro Único de Proveedores de Servicios Profesionales (RUP)* of the Puerto Rico General Services Administration.[7] Moreover, no services shall be provided by the awarded vendor until a copy of the official contract is filed with the Puerto Rico Office of the Comptroller.

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[1] Issued by the Governor of Puerto Rico, Hon. Pedro R. Pierluisi.
[2] Issued by the Office of Management and Budget of the Government of Puerto Rico.
[3] Issued by the Department of Health of Puerto Rico.
[4] Known as the Government of Puerto Rico Uniform Administrative Procedure Act.
[5] In accordance with Administrative Orders No. OA-581 and OA-586.
[6] Due to the technical matter of the procured services, a technical committee was appointed to evaluate the proposals.
[7] *See:* Reglamento 9302E *Sole Registry of Professional Service Providers*, available in asg.pr.gov/publicacionesreglamentos.

I. PROCEDURAL BACKGROUND

On March 26, 2025, PRMP published on several websites[8] the RFP to solicit vendor proposals for HIE operational and technical services. The RFP defined the detailed response and minimum contract requirements. In addition, it outlined PRMP's process for evaluating responses and selecting a vendor that demonstrated experience providing HIE services, understood Puerto Rico's healthcare community, and provided systems and services that aligned with PRMP's HIE goals and the interoperability efforts targeted nationwide. Through this RFP, PRMP would seek to procure necessary services at the most favorable and competitive price and give all qualified vendors an opportunity to do business with PRMP.

Interested vendors had the opportunity to present questions and receive corresponding answers that helped clarify instances of the RFP. PRMP received a total of fifty-one (51) questions. Question responses were published by April 11, 2025, for the benefit of all participating vendors at https://medicaid.pr.gov/Home/NotificacionServiciosProfesionales/.

PRMP received proposals from five (5) vendors, KONZA National Network (from here on, KONZA), CyncHealth Advisors, Inc. (from here on, CyncHealth), Velatura HIE Corporation (from here on, Velatura), Intervoice Communication of Puerto Rico, Inc. (from here on, Intervoice), and Secure Health Information Technology Corp. (from here on, Secure HIT). The proposal submission deadline, in accordance with section 1.3 of the RFP, was April 25, 2025, at 3:00 pm Atlantic Standard Time (AST). KONZA's proposal was received on April 24, 2025, at 2:28 pm, CyncHealth's proposal was received on April 25, 2025, at 11:45 am, Velatura's proposal was received on April 25, 2025, at 2:02 pm, Intervoice's proposal was received on April 25, 2025, at 2:20 pm, and Secure HIT's proposal was received on April 25, 2025, at 2:50 pm. Therefore, all proposals submitted by the vendors mentioned above were received on time.

Furthermore, section 3.7 *Proposal Submission* of the RFP clearly states that *[a] vendor must ensure that PRMP receives a response no later than the submission deadline time and date detailed in Section 1.3 RFP Timeline. PRMP will not accept late responses, and a vendor's failure to submit a response before the deadline will result in disqualification of the response as outlined in Section 3.10 PRMP Right of Rejection. It is the responsibility of the vendor to determine any additional security requirements with respect to packaging and delivery to PRMP. Vendors should be mindful of any potential delays due to security screening, weather, mail delays, and orders of stay or other filing delays whether foreseeable or unforeseeable.*

In accordance with sections 1.3 and 3.7, the proposal of Abartys Health LLC, since it was submitted on April 25, 2025, after the established time in the RFP, with authorized representatives signing the facility *Visitor's Log* at 4:08 pm and 4:09 pm and then turning in their proposal directly to the SC, this proposal was disqualified for vendor's failure to submit the response before the deadline. All proposal materials submitted by the vendor were kept sealed and securely archived.

[8] Medicaid website, Puerto Rico Department of Health website, and Puerto Rico General Services Administration website.

A – PRE-SCREENING EVALUATION PHASE

Proposals were evaluated based on the criteria stated in the RFP and information contained in the submitted responses of participating vendors. Furthermore, proposals were initially screened to assess whether they met or exceeded the mandatory specifications listed in the RFP.

If the SC determines that a proposal does not meet all the mandatory specifications, the proposal will be flagged for the EC members to review prior conducting individual reviews. Proposals failing to meet one or more mandatory specifications of the RFP will be disqualified and may not have the remainder of their technical or cost proposals components evaluated. However, proposals passing the pre-screening will then be eligible to be evaluated and scored across six (6) global criteria as listed in the RFP in section 5.2 *Evaluation Criteria*.

As stated above, the PRMP received five (5) proposals on time. One other proposal, as mentioned above, was disqualified because of vendor's failure to comply with the timeliness criteria of the RFP. The rest of the proposals were pre-screened by the SC. The pre-screening performed was focused on the compliance of the proponents with the mandatory specifications as they are presented in *Attachment E: Mandatory Specifications* on *Table 18: Mandatory Requirements* and *Table 19: Mandatory Qualifications* of the RFP. The method for the pre-screening consists of an evaluation of the Yes or No responses from vendors and the requested brief narrative that vendors must provide next to their response.

Out of the thirty (30) mandatory requirements, all vendors fulfilled the requirements by attesting Yes or "Y" to all of them and providing a brief narrative to demonstrate understanding and fulfillment of the requirements. Once the pre-screening was completed and the answers to the *Mandatory Requirements* were evaluated, the SC evaluated the fulfillment of the *Mandatory Qualifications*. All participating vendors also complied with the four (4) qualification requirements, by answering Yes or "Y" and providing the necessary narrative response. The SC deemed all proposals responsive, consequently the proposals were submitted for evaluation to the TC.

B – TECHNICAL PROPOSALS EVALUATION PHASE, ORAL PRESENTATIONS AND IMPORTANT UPDATE

The TC then proceeded with their analysis of the technical proposals over a period of five (5) weeks during the months of September and October 2025. Members of the TC evaluated each proposal at an individual level, followed by multiple group sessions where they discussed individual scores and reached a group consensus on each evaluation criteria. At the end of the technical proposals analysis, the TC acknowledged which proposals were to move forward to oral presentations and cost proposal analysis according to the 70% threshold indicated in the RFP. In this RFP, the 70% threshold was equivalent to scoring 525 points. KONZA obtained a technical score of 610 points, CyncHealth, 541, Velatura, 541, Intervoice, 612, and Secure HIT, 506. This meant that almost all participating vendors passed the threshold, would engage in oral presentations, and pass on to the cost evaluation phase, except for one. Secure HIT did not manage to reach the 70% threshold thus it was disqualified and would not pass onto oral presentation and cost proposal evaluation phases.

After the evaluation of the technical component of proposals and before oral presentations, PRMP issued one (1) *Important Update* on October 17, 2025, with the purpose of informing participating vendors of established oral presentation guidelines and the specific applicable criteria for evaluating oral presentations, which was published at https://medicaid.pr.gov/home/NotificacionServiciosProfesionales/.

Such events were followed by oral presentations from four (4) of the participating vendors. Up to that point, cost proposals remained sealed. Oral presentations were held on October 23, 2025, and scored accordingly by the EC. The final stage of the evaluation process was also held on October 23, 2025, which consisted of opening, evaluating, scoring and adding scores of cost proposals to determine the overall best-ranked vendor.

II. SUMMARIES OF EVALUATED PROPOSALS (listed in order of submission)

A – KONZA NATIONAL NETWORK

1 – Company Overview

KONZA National Network (KONZA), is a 501(c)3 not-for-profit organization established in 2010. The company's mission is to connect healthcare providers, patients, health plans, and technology partners to organize healthcare data and drive transformation. It operates under the governance of a Board of Directors, comprised of providers and stakeholders who use KONZA's services.

KONZA describes itself as one of the largest and most successful Health Information Exchanges (HIEs) in the nation, with a 15-year proven track record of successful project delivery. It currently operates nine wholly owned and functional HIEs across multiple states, including Kansas, Missouri, New Jersey, Connecticut, South Carolina, Mississippi, Louisiana, and Texas, and provides technology and management services to exchanges in Northern California and Oregon.

A key organizational achievement is its December 2023 designation as one of the first Qualified Health Information Networks (QHINs) under the federal Trusted Exchange Framework and Common Agreement (TEFCA). This status enables its members to access medical records across the nation, supporting compliance with federal mandates. The organization is explicitly focused on equity and access, providing no-cost products and services to safety net providers, Federally Qualified Health Centers (FQHCs), and state/local public health departments. The company does not use subcontractors for its work. The size of the organization consists of 33 full-time employees.

2 – Technical Expertise

KONZA's core technical expertise lies in building, operating, and managing secure, high-quality, and scalable HIE and national data exchange infrastructure.

Key areas of technical capability include:

- ***Interoperability and Exchange:*** The proposed architecture is modular and built on a best-of-breed technology stack that utilizes a Corepoint Integration Engine (Rhapsody) to manage all interfaces, including HL7 v2/v3, CDA, XCA/XDS.b, DIRECT, and FHIR protocols. This supports bi-directional data exchange and seamless connection to external networks. The organization is an active member of both the TEFCA QHIN and the eHealth Exchange (under Data Use and Reciprocal Support Agreement or DURSA).

- ***Data Quality and Analytics:*** The organization emphasizes data quality and completeness. It achieved the National Council for Quality Assurance (NCQA) Data Aggregator Validation (DAV) accreditation, making its data suitable as standard supplemental data for HEDIS reporting. Data is managed through an Azure Cloud-Based Enterprise Data Warehouse that powers the proprietary HQ Insights analytics platform. HQ Insights provides dashboards for high-risk patients, readmissions, quality metrics, and public health surveillance.

- ***Master Data Management (MDM):*** KONZA employs three Enterprise Master Patient Index (EMPI) solutions and a Record Locator Service (RLS) to address patient matching complexities. The primary longitudinal record EMPI uses a matching algorithm from a strategic partner, Availity, and leverages over 100 data variables for patient matching in the analytic environment.

- ***Security and Compliance:*** The technical infrastructure is secured by multiple third-party accreditations, including HITRUST r2 certification (which includes NIST 800 standards), MARS-E certification, and EHNAC HIEAC through DIRECT Trust accreditation. It employs a security team led by a Chief Information Security Officer (CISO), who sits on the national TEFCA Security Council, and conducts annual internal and external penetration testing. All data is encrypted both at rest and in transit.

3 – Administrative Capabilities

KONZA demonstrates robust administrative capabilities, emphasizing collaborative, compliant, and stakeholder-driven operations:

- ***Staffing and Structure:*** The proposal outlines an initial team of 35 professionals, including four full-time, dedicated, local staff members to support Puerto Rico. Key roles, such as the Executive Director, are initially filled by existing Leadership Team members, with plans for additional local hiring to ensure bilingual (English and Spanish) and culturally appropriate service delivery, which extends to all materials, training, and documentation.

- ***Governance and Policy:*** The organization has a highly mature governance structure supported by its national Board of Directors, the Designated Network Governance Body (DNGB). It proposes to support and participate in a new local PRHIE Advisory Council to ensure local priorities drive policy, technical enhancements, and oversight. It maintains an extensive suite of over 50 standardized, federally compliant policies aligned with HIPAA, HITECH, 42 CFR Part 2, and MARS-E.

- ***Customer Relations and Support:*** KONZA uses a suite of integrated platforms for comprehensive operations, including Salesforce CRM to manage over 8,000 active customer accounts and Salesforce Service Cloud for multilingual, SLA-based technical and operational support. The technical assistance model is tiered and available 24/7, managed by roles like the Customer Success Lead and HIE Workflow Specialist, a Nursing Informaticist with two decades of clinical experience.

- ***Compliance and Reporting:*** KONZA has formally attested to meeting all mandatory RFP specifications, including the right of access for PRMP audits, complying with federal and Commonwealth regulations, providing a drug-free workplace, and performing all work within the continental U.S. or U.S. Territories. It commits to delivering detailed monthly operational reports and meeting all mutually agreed-upon Service Level Agreements (SLAs).

4 – Relevant Experience

KONZA has 15 years of experience operating and managing HIE solutions of similar size and scope. Specific, validated experience relevant to this proposal includes:

- ***Multi-State HIE Operation:*** Currently operates nine wholly owned HIEs across the nation, providing full-scope HIE business operations and technology management, consistently maintaining federal and state compliance.

- ***National Interoperability Leadership:*** Was designated as one of the first QHINs under TEFCA in December 2023. A key staff member, the Chief Operating Officer, served as the Operational Lead guiding the organization through the rigorous application and technical onboarding process for the QHIN designation.

- ***Existing Puerto Rico Engagement:*** KONZA has significant and sustained engagement in Puerto Rico's health IT ecosystem. A key team member, the proposed Executive Director, is a former executive for Puerto Rico's federally funded Regional Extension Center (REC) and Health Center Controlled Network (HCCN). This experience includes advancing Electronic Health Record (EHR) adoption and Meaningful Use in rural communities, leading to major improvements in digital health like enabling millions of electronic prescriptions annually. The company is an approved HIE Software-as-a-Service (SaaS) vendor by the Puerto Rico Innovation and Technology Service (PRITS).

- ***Public Health and Health Data Utility (HDU):*** KONZA has worked closely with the State of Missouri to implement their Health Data Utility (HDU) model. Additionally, the organization developed a nationwide first project with the Kansas Department of Health and Environment to provide real-time alerting for Multi-Drug-Resistant Organisms (MDROs), supporting administrative burden reduction and patient safety. The Director of Public Health Services has 27 years of experience in public health, including a role as Deputy Director for a State Vital Statistics division.

- ***Customer Reference Projects:*** Verified experience includes providing HIE services and analytics to the Medical Society of New Jersey (OneHealth New Jersey), technical infrastructure support, analytics, and data quality (NCQA DAV accreditation) to SacValley MedShare in California, and establishing a statewide HIE with advanced analytics for CTHealthlink in Connecticut.

B – CYNCHEALTH ADVISORS, INC.

1 – Company Overview

CyncHealth Advisors, Inc. (CyncHealth) is the primary vendor proposing a complete Health Information Exchange (HIE) solution to the Puerto Rico Medicaid Program (PRMP). The company operates under a nonprofit, public-private governance model and is a wholly owned subsidiary of Nebraska Health Information Initiative, Inc. dba CyncHealth Nebraska. The organization's core mission is to make comprehensive health data accessible when and where needed to support better decisions and outcomes.

CyncHealth Advisors was formally established in 2019 as a strategic effort to formalize and expand the CyncHealth enterprise's management infrastructure. The organization, however, inherited the personnel and over 16 years of institutional experience from the Nebraska statewide HIE, originally founded in 2008. The CyncHealth enterprise manages a nonprofit HIE in Nebraska and a nonprofit HIE in Iowa. It currently employs 85 full-time employees. A significant portion of its revenue, 99%, comes from state and local government clients in the United States and its Territories.

CyncHealth plans to partner with 3500 Square, LLC as a subcontractor for local, bilingual staffing support in areas like Help Desk, training, onboarding, and governance. 3500 Square, LLC is headquartered in Puerto Rico, and while its entity is relatively new, its executive team members possess over a decade of experience in HIE at the federal and state level. CyncHealth is proposing a solution built on its innovative provider portal technology and hosted in Amazon Web Services (AWS) Cloud. The company is prepared to establish a dedicated nonprofit entity in Puerto Rico and complete all necessary registrations upon contract award.

2 – Technical Expertise

CyncHealth positions its solution as an innovative, vendor-agnostic, seamless, and cost-effective health data exchange, with deep technical expertise in operating a "health data utility model".

Key technical capabilities include:

- ***Core Infrastructure and Interoperability:*** The platform is a comprehensive technical solution utilizing an Enterprise Data Warehouse (EDW) on the AWS Cloud infrastructure. It relies on Rhapsody Identity (Enterprise Master Patient Index) and Rhapsody Integration Engine for data handling, standardization, and master patient index functions. It uses modern data management to support the third version of the United States Core Data for Interoperability

(USCDI v3) standards and Fast Healthcare Interoperability Resources (FHIR) Application Programming Interfaces (APIs).

- ***Data Management and Quality:*** The approach uses deterministic and probabilistic matching logic in its EMPI to minimize errors. Data integration and standardization are core functions, including cleaning and normalizing incoming data to industry-accepted standards. The company is committed to data quality, which is audited and measured against National Committee for Quality Assurance (NCQA) standards as part of a continuous quality monitoring program.

- ***Provider Access and Services:*** The solution includes a secure, mobile-ready web-based Provider Portal that supports a patient's longitudinal health record, single sign-on (SSO) authentication via SAML, and event notification services (ENS). ENS notifications for events like admission/discharge/transfer (ADT) are delivered in real-time or near real-time.

- ***Security and Compliance:*** The platform is designed with robust, industry-standard security guidelines, including end-to-end encryption of data in-transit and at-rest, role-based access control, extensive auditing, and targeted awareness training. The security program undergoes annual external audits for HITRUST and SOC 2 Type II certifications. CyncHealth affirms its systems are designed in alignment with the NIST SP 800-53A framework.

- ***Public Health:*** The system supports public health reporting for Syndromic Surveillance, Electronic Lab Reporting (ELR), and Immunization Registry reporting, adhering to CDC standards and protocols.

3 – Administrative Capabilities

CyncHealth's administrative model is centered on its experience in public-private partnerships, comprehensive governance, and committed local support:

- ***Executive Leadership and Staffing:*** The proposed team consists of highly experienced leaders with over 130 years of collective health and HIE experience. The Executive Director has over 20 years of experience and is responsible for overall project delivery and PRMP liaison. The staff includes specialized roles such as Operations Manager (a retired Colonel and Registered Nurse with over 20 years in healthcare informatics), an Operations Lead, a Technical Lead (with international HIE CEO experience), a Customer Success Lead, and a dedicated Security Expert/CISO.

- ***Local and Bilingual Support:*** The collaboration with local subcontractor 3500 Square, LLC ensures on-island, bilingual support for the Help Desk, training, project management, and governance activities. The solution is committed to producing all materials and external-facing deliverables in both English and Spanish.

- ***Governance and Policy Management:*** The company operates HIEs under a public-private governance model where a public-private governing body is responsible for overseeing HIE operations. CyncHealth has established business processes and tools aligned with IT Infrastructure Library v4 (ITIL v4) standards for continuous service improvement.

- ***PRMP Staff Engagement:*** The proposed model is streamlined, emphasizing a Strategic Oversight Committee of senior PRMP officials who meet quarterly for governance, thereby minimizing the operational burden on PRMP staff.

- ***Contract and Financial Compliance:*** CyncHealth commits to compliance with all mandatory government contracting requirements, including providing the right of access for PRMP audits, complying with federal and Commonwealth regulations, performing work within the continental U.S. or U.S. Territories, and submitting detailed monthly invoice packages with required certifications. The company agrees that PRMP retains ownership of all data, applications, licenses, and materials procured or developed during the contract period.

4 – Relevant Experience

CyncHealth brings extensive, validated experience, particularly in successfully managing and transforming state-level HIEs under public-private partnerships:

- ***State HIE Operation and Transformation (Iowa):*** CyncHealth currently operates the Iowa HIE, transforming it from minimal investment and low value to a "top-tier health data exchange" within three years. This engagement involved full HIE operations, implementation of a comprehensive public health reporting suite (Syndromic Surveillance, ELR, eCR, Immunizations), and migrating the entire legacy platform. This transformation was cited by the CDC as a national model for Syndromic Surveillance deployment and data quality.

- ***State HIE and PDMP Operation (Nebraska):*** CyncHealth has been providing contracted HIE services for the Nebraska Department of Health and Human Services (DHHS) since 2015 and has served as the designated HIE in the state since 2008. The services include all HIE infrastructure, hosting, provider access, quality reporting, image exchange, Direct Secure Messaging (HISP services), Prescription Drug Monitoring Program (PDMP) operations, and event notification services.

- ***Experience in Medicaid IT Transitions:*** The company has experience taking over Medicaid IT solutions already in production, as demonstrated by their assumption of the Iowa HIE management. They emphasize the ability to repurpose existing participant investments and conduct a full restart of onboarding if necessary.

- ***Subcontractor Local Expertise (3500 Square):*** The subcontractor, 3500 Square, has recent experience providing high-quality bilingual customer service support for TRICARE beneficiaries, handling sensitive health information, and operating within strict HIPAA and federal security protocols. Additionally, 3500 Square is currently subcontracted for the U.S. Department of Veterans Affairs (VA) NextGen PACS initiative, providing project management

and a 24/7/365 Service Desk for a complex federal health IT system, ensuring rapid issue resolution and system uptime.

- ***Interoperability Expertise:*** The company has successfully onboarded healthcare delivery sites utilizing a wide range of Certified Health IT (CEHRT) suppliers, demonstrating vendor-agnostic interoperability.

C – VELATURA HIE CORPORATION

1 – Company Overview

Velatura HIE Corporation (VHIEC) is a 501(c)(3) nonprofit organization and a subsidiary of Velatura Public Benefit Corporation. It operates as a national multi-state HIE network and a Trusted Data Sharing Organization (TDSO), serving as the "interoperability home" for a broad range of healthcare stakeholders, including providers, payers, community-based organizations, and other HIEs. The organization's vision is to transform, enhance, and inspire healthcare by serving as a TDSO for all health and social care data utilizers.

Velatura's business model involves functioning as a technology service provider and HIE operator for other HIE organizations, leveraging a centralized cloud-native infrastructure for economies of scale while maintaining localized stakeholder alignment. It currently has affiliations with other HIE organizations, including Midwest Health Connection (MHC), which includes over 28 million electronic patient health records, and Georgia Regional Academic Community Health Information Exchange (GRAChIE). Velatura has 16 full-time employees and a total operating history spanning 10+ years for the type of services specified in the RFP.

Velatura is proposing to transition the Puerto Rico HIE (PRHIE) to its network over a two-year timeframe. The proposal includes a key subcontract with the National Health IT Collaborative for the Underserved, Inc. (NHIT), a 501(c)(3) nonprofit with over 17 years of experience, to handle outreach, engagement, training, and policy matters, leveraging its deep understanding of underserved populations and previous work in Puerto Rico and the U.S. Virgin Islands.

2 – Technical Expertise

Velatura's technical proposal centers on its proprietary Velatura Integrated Technology Platform (VITP), described as a third-generation, best-of-breed, cloud-based data interoperability platform hosted on Amazon Web Services (AWS) in the us-east-1 region.

Key technical capabilities include:

- ***Integrated Technology Platform (VITP):*** The platform uses reusable microservices for data processing, storage, routing, and monitoring, creating a highly scalable and agile HIE/Health Data Utility (HDU) solution. It employs third-party core systems, including:
  - Master Person Index (MPI) and Clinical Viewer provided by 4medica.

- Health Data Fabric (HDF) and Clinical Data Repository (CDR) provided by Smile Digital Health, which implements the HL7 FHIR standard.

- ***Master Data Management (MDM) and Record Locator Services:*** MDM is supported by the Common Key Service (CKS), an infrastructure service that communicates with the MPI to match patients and assign common keys. The Intelligent Query Broker (IQB) uses the Active Care Relationship Service (ACRS) (Velatura's patient-provider and patient-payer attribution service) as a Record Locator Service to find patient records across multiple institutions. The reported MPI match rate is 99% on a total population of over 13 million unique patients.

- ***Interoperability and Data Exchange:*** The platform handles over 40 million transactions weekly. It supports a wide range of standards, including HL7 v2.7 (with backward compatibility to v2.5.1), HL7 v3 consolidated Clinical Document Architecture (C-CDA), FHIR APIs (aligning with USCDI v3), and Direct Secure Messaging (DSM). It is a long-time participant in the eHealth Exchange and supports IHE Cross-Community Access (XCA) transactions.

- ***Security, Privacy, and Compliance:*** The security framework adheres to the HITRUST Common Security Framework (CSF), which is seen as more stringent than other frameworks for comparable work and includes compliance with HIPAA and NIST standards. The assigned Technical Lead and CISO has over 15 years of information security experience. The platform implements role-based access control, encryption in transit and at rest, and uses Consent Manager+ to manage patient consent.

3 – Administrative Capabilities

Velatura's administrative strength comes from its experienced leadership team and its collaborative operational model, notably with its key subcontractor:

- ***Organizational and Staffing Structure:*** A comprehensive staffing plan is based on a leadership and task order advisory structure. The core HIE Operator Team roles include an Executive Director, Chief Technology Officer (CTO), Chief Information and Security Officer (CISO), Operations Manager, and various specialists. The executive leadership team has a proven track record of growing and sustaining statewide HIE operations.

- ***Local Support and Bilingual Operations:*** Velatura is fully committed to delivering all services in both Spanish and English. Subcontractor National Health IT Collaborative for the Underserved (NHIT) is responsible for local support, including launching a comprehensive HIT Training, Onboarding and Community Engagement Program. The proposed Program Lead, NHIT, was born in Puerto Rico and maintains a deep connection to the community. The plan details the use of a dedicated Technical Support Team and a help desk, with 24/7 staffing for Severity 1 and 2 incidents.

- ***Governance and Policy:*** Velatura proposes an organizational governance framework to support the evolution from HIE to TDSO capabilities, working closely with the PRHIE Advisory Council to provide progress updates and incorporate community needs. The policy framework includes a formal Data Sharing Participation Agreement and associated Policies & Procedures for quick adaptation to market changes and adherence to federal/local laws.

- ***Project Management and Reporting:*** Management practices include the Use Case Factory process to accelerate new business cases from concept-to-pilot-to-adoption. The company commits to delivering comprehensive operational reports by the 15th of each month, tracking data source connections, MPI performance, data quality, and SLA compliance. A formal Change Management Process is in place to handle changes to scope, product, implementation, and budget transparently.

4 – Relevant Experience

Velatura and its team have extensive, direct experience in managing, operating, and transitioning complex HIEs, with specific local and federal credentials:

- ***Statewide HIE Management:*** Velatura has managed HIEs of similar or larger size for more than eight years. As prime contractor, Velatura and its staff have successfully implemented, onboarded, and supported the Michigan Integrated Technology Platform (MiHIN), assisting a "Network-of-Networks" that connects over 45,000 organizations. Velatura has also served as a trusted technology partner to the Missouri Department of Social Services, MO HealthNet Division for over 9 years, improving the efficiency of the Medicaid Program through data exchange.

- ***Transition Experience:*** The proposed approach is specifically informed by Velatura's first-hand knowledge of the incumbent vendor's platform (Health Gorilla) and previous success transitioning another HIE to a new technology platform.

- ***Local and Social Determinants of Health (SDOH) Expertise:*** Subcontractor NHIT has a history of addressing health disparities and equity in the U.S. Territories. NHIT previously worked in Puerto Rico and the U.S. Virgin Islands to restore the health safety net following Hurricanes Irma and Maria. NHIT was contracted by the U.S. Army Telemedicine & Advanced Technology Research Center (TATRC) to evaluate a tele-critical care network's reach into medically underserved communities, noting that 92% of Puerto Rico's municipalities are medically underserved. NHIT utilizes a Data Fusion Center to create precise SDOH maps for community-driven programs.

D – INTERVOICE COMMUNICATION OF PUERTO RICO, INC.

1 – Company Overview

Intervoice Communication of Puerto Rico, Inc. is the prime contractor leading "Team Intervoice." It is a local, certified minority-owned business providing IT, project management, and consulting services with over sixteen years in business. The company has a 100% percentage of revenue from state and local government clients in the United States and its Territories. The team is committed to advancing health information systems, particularly supporting Medicaid reform and interoperability. Intervoice leverages a fully integrated delivery model by partnering with two subcontractors:

- ***CRISP Shared Services, Inc. (CSS):*** A national, mission-driven, nonprofit 501(c)(3) corporation that provides HIE technical infrastructure and operational services. CSS operates under a shared services model across over ten jurisdictions (including CRISP MD, CRISP DC, and US Virgin Islands) to create economies of scale, reuse innovations, and spread fixed costs. CSS's non-profit status encourages trust among participants and enables innovation based on public health priorities rather than investor returns.

- ***Editorial Mundo, Inc.:*** A Puerto Rico-based corporation focused on bilingual outreach, provider education, and multimedia communication strategies.

The collective team proposes a three-phased, six-year implementation to move the PRHIE from Phase 1: Foundation (Governance and Policy, Core Infrastructure, Initial Connectivity) to Phase 2: Expansion (Provider Expansion, Advanced Services, Patient Engagement), and finally, to Phase 3: Health Data Utility (Population Health, Emergency Response, Research Platform).

2 – Technical Expertise

The core of the technical solution is delivered by CSS using an API-first, cloud-native HIE architecture hosted primarily on Microsoft Azure.

Key technical capabilities include:

- ***HIE Infrastructure:*** The system leverages IBM's probabilistic Master Patient Index (MPI), optimized for Puerto Rico's demographic patterns. It utilizes Rhapsody integration engines to support multiple standards including HL7, FHIR, CDA, XDS, and custom formats.

- ***Interoperability and Standards:*** CSS actively supports HL7v2, HL7v3, FHIR (all versions), and encourages USCDI submissions. The infrastructure is built on standards and facilitates integration with numerous EHR vendors like Epic, Cerner, and eClinicalWorks. CSS actively participates in national interoperability efforts, including CareQuality, CommonWell, and is a planned participant in TEFCA via the eHealth Exchange QHIN.

- ***Security and Privacy:*** The technical infrastructure maintains rigorous certifications, including HITRUST CSF (v9.6.3), EHNAC HIEAP, and SOC 2 Type II attestations. Security protocols include Transparent Data Encryption (TDE) AES256-level encryption, phishing-resistant two-factor authentication for all services, weekly vulnerability scans, and bi-annual penetration tests. The architecture includes a specialized API Gateway to control traffic and intelligently throttle access.

- ***Key Services:*** The system provides real-time Electronic Notification Services (ENS/CEND) for ADT and lab results, and full support for Direct Secure Messaging (DSM) through a leading partner. The CEND platform is highly configurable and currently supports real-time alerting for public health (e.g., regional overdose tracking).

3 – Administrative Capabilities

Intervoice emphasizes local presence, a disciplined project management methodology, and a high level of accountability.

- ***Leadership and Local Staffing:*** The team is led by a locally based Executive Director and a Project Director (both with extensive Puerto Rico experience). The staffing model prioritizes Puerto Rico-based resources for all customer-facing roles, ensuring bilingual fluency (Spanish and English) and cultural competency. Roles include a Privacy and Policy Officer and Public Health and Clinical Liaison with deep local expertise.

- ***Project and Operations Management:*** Intervoice employs a Disciplined Project Management (DPM) methodology, integrating global frameworks (PMI, PRINCE2, etc.) to manage implementation and operations. The project schedule is phased over six years with a detailed Work Breakdown Structure (WBS). Operations management (led by the Operations Lead) is aligned under a formal Operations Management Plan (OMP) that includes continuous improvement cycles.

- ***Outreach and Engagement:*** Subcontractor Editorial Mundo, Inc. leads outreach efforts, leveraging its history of successful campaigns with the Puerto Rico Department of Health (PRDOH) and PRMP. The strategy includes one-on-one provider visits (2,000 providers), online training modules, HIE guides, and multi-channel campaigns to accelerate adoption.

- ***Accountability and Compliance:*** The team is self-sufficient and designed for minimal dependency on PRMP staff, although advisory participation is encouraged. Intervoice complies with all mandatory requirements, including operating within the U.S. and its Territories, abiding by agreed-upon SLAs, and maintaining a drug-free workplace. The company agrees that PRMP retains ownership of all developed applications, licenses, and documentation procured with federal funds.

4 – Relevant Experience

Intervoice's collective experience spans numerous successful projects with local government and national HIE initiatives.

- ***Local PRMP Partnership:*** Intervoice has been a continuous partner to PRMP for over a decade across six administrations. Key engagements include serving as the Enterprise Project Management Office (ePMO) for all PRMP projects since 2021, managing the PRMMIS Phase III Project to centralize financial functions, and overseeing the Provider Enrollment Portal (PEP) operations since 2020, which involved processing over 28,000 provider applications.

- ***National HIE and CMS Certification:*** CSS has a proven track record in achieving CMS compliance, having provided HIE infrastructure to six clients that attained certification for Medicaid 75% FFP federal funding participation in Maintenance and Operations. CSS has managed complex technology replacements in multiple states and territories. Notable projects include operating the WVHIN (West Virginia) and CRISP DC HIE infrastructures on its shared services platform. CSS was also selected for the CDC Public Health Infrastructure Grant (PHIG) to modernize reporting in over ten jurisdictions.

- ***Territorial and Disaster Response Experience:*** CSS is currently implementing HIE services for the U.S. Virgin Islands (USVI) and has supported health systems during emergency situations (natural disasters and pandemics), enabling rapid telehealth expansion and school-based data capture during the COVID-19 crisis.

- ***Provider Engagement and Training:*** Editorial Mundo has extensive experience executing large-scale, local outreach and training for PRDOH, including coordinating the "Encuentro por la Salud" educational workshops for nurses and overseeing the Medicaid recertification campaign for over 800,000 beneficiaries across community settings.

E – <u>SECURE HEALTH INFORMATION TECHNOLOGY CORP.</u>

1 – Company Overview

Secure Health Information Technology Corp. (Secure HIT) is the prime vendor, established in Toa Alta, Puerto Rico, in 2018. It is a Domestic Corporation for Profit entity and a privately held Puerto Rican company specializing in Health Information Service Provider (HISP) services. Secure HIT's core belief is that the health information of Puerto Ricans should be fully under the control of the Department of Health. The company's strategic goal is to transform the PRHIE into Puerto Rico's designated HIE and accredit it as a Qualified Health Information Network (QHIN) within the national eHealth Exchange framework.

Secure HIT is leading a comprehensive team of subcontractors:

- ***Ellipsis LLC.:*** A domestic for-profit corporation that handles business operations, customer service, legal management of consents, and cybersecurity, including the Security

Operations Center (SOC). Ellipsis generates 100% of its revenue from state and local government clients in the U.S. and its Territories.

- ***Rhapsody Health:*** A leading vendor for Enterprise Master Patient Index (EMPI) functionality and interoperability.

- ***Amazon Web Services (AWS):*** The hosting platform, leveraging AWS HealthLake as the longitudinal Electronic Health Record (EHR) backbone.

- ***Scientia, Inc.:*** A private corporation focusing on local provider engagement, outreach, and adoption. Scientia has significant local experience as the premier implementer of Meditech in over 75% of Puerto Rico's hospitals.

Secure HIT itself is accredited by Direct Trust. The proposal outlines a phased approach with key certifications targeted within the first year, including HiTrust, QHIN, eHealth Exchange, and ONC Certification.

2 – Technical Expertise

The core technical architecture is a modular, cloud-based solution that leverages industry-leading tools and advanced data technologies.

- ***Core Platform:*** The infrastructure is deployed on AWS HealthLake, which functions as the longitudinal EHR and data warehouse, supporting FHIR REST API operations. It is designed to meet ONC compliance and CMS requirements.

- ***Master Data Management (MDM):*** The Master Patient Index (MPI) functionality is managed by Rhapsody Health, implementing deterministic and probabilistic algorithms for high patient match rates. The Record Locator Service (RLS) is designed to function as a National Record Locator Service within the QHIN/eHealth Exchange framework.

- ***Interoperability and APIs:*** The architecture employs a robust enterprise interoperability engine (Rhapsody Health) to facilitate HL7 connections and communication among stakeholders. The platform embraces an API-first mindset, supporting HL7 v2, v3, and FHIR R4 API.

- ***Electronic Notification Services (ENS):*** A robust Event Notification System (ENS) is implemented using Direct Secure Messaging (DSM) and FHIR API to provide real-time alerts for ADTs, diagnostic updates, and emergency department use. The system supports CMS Conditions of Participation for notifications.

- ***Security and Data Privacy:*** The infrastructure aims for HiTrust, QHIN, and eHealth Exchange certifications. Security includes strict access controls and continuous monitoring to prevent unauthorized access to sensitive data (PHI, PII, FTI). Data at rest and in transit is protected by encryption technologies. The proposal includes full compliance with the NIST SP

800-53A framework. The proposal ensures consent management to empower Medicaid beneficiaries to control access to their health data.

3 – Administrative Capabilities

Secure HIT emphasizes a local, experienced, and highly certified team operating within a disciplined project framework.

- ***Staffing and Structure:*** The proposal details a self-sufficient operational structure with thirteen key staff roles and several supporting personnel divisions. All customer-facing roles will operate bilingually in Spanish and English. Key roles include a Project Director (with over 20 years of health IT experience and accreditation expertise), Information Systems Security Officer (ISSO), Cybersecurity Officer, and a Quality Assurance and Technical Lead.

- ***Governance and Policy:*** Secure HIT, as the PRHIE operator, will be an active member of the PRHIE Advisory Council and provide a dedicated Project Director to serve as a liaison. The company will establish and assume responsibility for all operational policies, starting with a draft Security Awareness Program and procedures for documentation and operations. All policies and participation agreements will be transparently communicated and made publicly accessible.

- ***Customer Service and Technical Assistance:*** Customer service is delivered through a tiered model: Ellipsis manages the 24/7 Ellipsis Call Center (Tier 1), which escalates complex issues to Secure HIT's Technical Support Division (Tier 2/3), and ultimately to the Development and Infrastructure Division (Tier 4 for high-impact issues). Scientia focuses specifically on providing on-site onboarding and manual training.

- ***Compliance and Reporting:*** The company commits to meeting all agreed-upon SLAs, providing monthly operational reports (including real-time dashboards) on data source connections, data quality, security audits, and compliance activities. The plan includes the cost of annual independent security assessments within operating costs. PRMP retains ownership of all data and applicable applications procured or developed during the contract period.

4 – Relevant Experience

Secure HIT and its team members possess significant, specialized experience in both local Puerto Rico health IT and complex national HIE transformations.

- ***Accreditation and Interoperability Leadership:*** The proposed Project Director has extensive experience in successfully attaining multiple federal accreditations within short timeframes, including the Privacy and Security Accreditation Program, Trusted Network Accreditation Program, and HISP Direct Trust certifications. Secure HIT has been Direct Trust accredited since 2018.

- ***Local Health IT Implementation (Secure HIT):*** Secure HIT led EHR implementations for "Administración de Servicios Médicos" (ASEM), Federally Qualified Health Centers (FQHC), and the Universidad de Puerto Rico (UPR) Comprehensive Cancer Center (2021), achieving Stage 6 (the highest level) in implementation of EHR technology adoption in Puerto Rico. The Project Director also worked on the planning and partial implementation of the PRHIN (2010-2013).

- ***Public Health Integration in Puerto Rico (Scientia):*** Subcontractor Scientia, Inc. was the first organization to successfully connect hospital systems to critical public health programs in Puerto Rico, including the Puerto Rico Immunization Registry, Electronic Laboratory Reporting (ELR), and Syndromic Surveillance initiatives. Scientia also has local experience with Meditech EHR implementation in over 75% of the island's hospitals.

- ***National and International Interoperability (Rhapsody):*** Subcontractor Rhapsody Health is relied upon by nearly all states and the CDC for vital public health activities such as ELR, immunization registries, and cancer registries. Rhapsody serves as the enterprise interoperability engine for the Washington State Department of Health and is deployed by major HIEs such as KeyHIE (Geisinger's HIE), CyncHealth, and UHIN.

- ***Federal and Local Cyber Security Expertise:*** The Cybersecurity CISO has forensic certifications from the FBI and experience handling ransomware attacks and vulnerability testing. The Information Systems Security Officer (ISSO) previously oversaw security and privacy posture for the UPR Comprehensive Cancer Center and is an AWS Certified Architect. The proposed Network and Information Systems Lead have years of experience in federal IT, managing Enterprise Resource Planning (ERP) implementation projects for a $1+ Billion-dollar distributor, including successful warehouse relocation and SAP implementation. The local Project Manager led the PRHIE Planning Project (2020) and expedited clinical data exchange for COVID-19 lab results between PRDOH and hospitals.

- ***Sistema de Salud Menonita:*** Secure HIT successfully implemented an Event Notification Service (ENS) via secure Direct Messaging for the "Sistema de Salud Menonita" in Puerto Rico for electronic case reporting to the CDC.

- ***Local Business Operations (Ellipsis):*** Subcontractor Ellipsis has over 20 years of experience in the local healthcare industry, contributing to projects like PRHIE Integration, Electronic Lab (ELab) development, and supporting STARS program initiatives with major local payers such as Triple-S, Medicare, and MMM. Ellipsis's resources worked on the development of EHRs, billing systems, Laboratory Information System (LIS), and hospital applications.

III. PROPOSAL EVALUATION

A – METHODOLOGY AND ANALYSIS OF TECHNICAL PROPOSALS

The purpose of this RFP was to solicit proposals from qualified vendors to provide Health Information Exchange (HIE) operational services and oversee and/or manage the provision of HIE technical services.

According to OA-586, proposals were scored by a TC appointed by the PRDoH secretary. Section 3.11.5 of the RFP instructed vendors to submit proposals in two distinct parts sealed in separate envelopes: technical proposal and cost proposal. Prior to the opening of the cost proposals, technical proposals were evaluated by each member of the TC at an individual level, followed by multiple group sessions where members discussed their personal analysis and reached a consensus score for each evaluation criteria. Members of the TC had no access to cost proposals. Not until all proposals were group-scored by the TC and oral presentations conducted, would the EC evaluate and score cost proposals.

TC members were to assign a value from a scale of 1 through 5 to each item -described throughout the RFP- of the evaluation categories according to the following rubric:

5: Excellent – exceeds the specifications
Likelihood of Success: Very High
4: Good – fully addresses the specifications
Likelihood of Success: High
3: Marginal – addresses the specifications, but has some substantial deficiencies
Likelihood of Success: Low
2: Deficient – partially addresses the specifications or is very limited
Likelihood of Success: Very Low
1: Unacceptable – fails to address the specifications
Likelihood of Success: None

The following evaluation criteria was stated in the RFP:

Evaluation Category	Points Allocated
Mandatory Specifications	Pass/Fail
Global Criterion 1: Vendor Qualifications and Experience	100 Points Possible
Global Criterion 2: Vendor Organization and Staffing	100 Points Possible
Global Criterion 3: Approach to SOW and Outcomes	500 Points Possible
Global Criterion 4: Initial Project Schedule	50 Points Possible
Global Criterion 5: Cost Proposal	200 Points Possible
Global Criterion 6: Oral Presentation	50 Points Possible
Total Points Possible	**1,000 Points**

To come up with the *Points Allocated* in the RFP, a weight/score formula was implemented. With regards to each evaluation category, throughout the RFP, vendors were solicited specific information. Proposals were evaluated based on their submitted responses. Each item had an assigned weight, which had to be multiplied by the consensus score given by the TC. The weights assigned to each *technical* criterion multiplied by a score of 5 would give 750, the maximum available points for the technical proposals.

The following table portraits the TC's consensus scores for each vendors' *technical* category item and the corresponding allotted points:

Evaluation Category	Weight	KONZA		CyncHealth		Velatura	
		Score	Points	Score	Points	Score	Points
Vendor Qualifications and Experience	---	---	*(100)*	---	*(100)*	---	*(100)*
Overview	30	4	24	3	18	3	18
Existing Business Relationships with Puerto Rico	20	5	20	3	12	1	4
Business Disputes	10	4	8	3	6	4	8
References	40	4	32	4	32	4	32
Subtotal	---	---	**84**	---	**68**	---	**62**
Vendor Organization and Staffing	---	---	*(100)*	---	*(100)*	---	*(100)*
Initial Staffing Plan	30	4	24	4	24	4	24
Use of PRMP Staff	35	4	28	3	21	4	28
Collaboration with Incumbent Vendor Staff	5	4	4	4	4	3	3
Key Staff and Resumes	30	4	24	4	24	4	24
Subtotal	---	---	**80**	---	**73**	---	**79**
Approach to Scope of Work (SOW) and Outcomes	---	---	*(500)*	---	*(500)*	---	*(500)*
Governance	30	4	24	4	24	4	24
Business Operations	30	4	24	4	24	4	24
Data Governance	40	4	32	3	24	4	32
Policy	30	4	24	3	18	3	18
Technical Assistance	30	5	30	4	24	3	18
Operational Reporting and SLAs	30	4	24	3	18	3	18
Technology Architecture and Vendor Partnerships	30	4	24	4	24	3	18
Master Data Management	30	4	24	4	24	4	24
Interface Specifications, Configuration, and Management	30	4	24	4	24	4	24
Health Record Access	30	4	24	3	18	4	24
Electronic Notification Services (e.g., ENS, Alerts, Notifications, etc.)	30	4	24	3	18	4	24
Data Quality and Reporting Services	30	4	24	4	24	2	12
Application Programming Interface (API) Services	20	4	16	2	8	4	16
Public Health Reporting	30	4	24	4	24	4	24
Payer Services	20	4	16	4	16	4	16

Analytic, Reporting, and Measurement Services	20	4	16	4	16	4	16
Direct Secure Messaging	20	4	16	4	16	3	12
Emergency Response Services	20	4	16	4	16	4	16
Subtotal	---	---	**406**	---	**360**	---	**360**
Initial Project Schedule	---	---	*(50)*	---	*(50)*	---	*(50)*
Initial Project Schedule	50	4	40	4	40	4	40
Subtotal	---	---	**40**	---	**40**	---	**40**
Technical Total	---	---	**610**	---	**541**	---	**541**

Evaluation Category	Weight	Intervoice		Secure HIT	
		Score	Points	Score	Points
Vendor Qualifications and Experience	---	---	*(100)*	---	*(100)*
Overview	30	4	24	3	18
Existing Business Relationships with Puerto Rico	20	5	20	3	12
Business Disputes	10	4	8	4	8
References	40	4	32	4	32
Subtotal	---	---	**84**	---	**70**
Vendor Organization and Staffing	---	---	*(100)*	---	*(100)*
Initial Staffing Plan	30	5	30	3	18
Use of PRMP Staff	35	5	35	3	21
Collaboration with Incumbent Vendor Staff	5	3	3	1	1
Key Staff and Resumes	30	4	24	4	24
Subtotal	---	---	**92**	---	**64**
Approach to Scope of Work (SOW) and Outcomes	---	---	*(500)*	---	*(500)*
Governance	30	4	24	2	12
Business Operations	30	4	24	2	12
Data Governance	40	4	32	3	24
Policy	30	4	24	2	12
Technical Assistance	30	4	24	3	18
Operational Reporting and SLAs	30	4	24	4	24
Technology Architecture and Vendor Partnerships	30	4	24	3	18
Master Data Management	30	4	24	4	24
Interface Specifications, Configuration, and Management	30	4	24	2	12
Health Record Access	30	4	24	4	24
Electronic Notification Services (e.g., ENS, Alerts, Notifications, etc.)	30	4	24	4	24
Data Quality and Reporting Services	30	4	24	4	24
Application Programming Interface (API) Services	20	3	12	4	16
Public Health Reporting	30	4	24	4	24
Payer Services	20	4	16	4	16

Analytic, Reporting, and Measurement Services	20	4	16	4	16
Direct Secure Messaging	20	4	16	4	16
Emergency Response Services	20	4	16	4	16
Subtotal	---	---	**396**	---	**332**
Initial Project Schedule	---	---	*(50)*	---	*(50)*
Initial Project Schedule	50	4	40	4	40
Subtotal	---	---	**40**	---	**40**
Technical Total	---	---	**612**	---	**506**

As stated in section 5.1 *Evaluation Process* of the RFP, *[o]nly proposals that receive the minimum acceptable technical score (70% of applicable technical evaluation points) will be eligible to move forward to cost proposal evaluations.* That is, a proposal must achieve a score of **525 points** or more in the technical evaluation process to move to the respective cost analysis.

Vendors' total technical scores considering all focus areas and criteria are as follows (listed in order of submission):

Vendor	Technical Proposal Points
KONZA	610
CyncHealth	541
Velatura	541
Intervoice	612
Secure HIT	506

Almost all vendors that participated and submitted their proposals for evaluation were able to reach the corresponding threshold, except for one (Secure HIT) for the reasons mentioned above, meaning the rest presented acceptable proposals, and they seemed capable of offering the required services.

The above table positioned **Intervoice** as the vendor with the highest overall technical score while **KONZA** positioned in second place, and both, **CyncHealth** and **Velatura**, in third place. Since these vendors were able to reach the 70% threshold, by meeting at least the minimum acceptable technical score, they were selected to move forward to oral presentations and cost proposal evaluations.

1 – KONZA National Network

Some notable scores regarding the vendor's technical proposal include:

KONZA's score of four (4) in the *Policy* category. The TC's comments and rationale focused on acknowledging that the vendor provided a good explanation of specifications required by the RFP. The vendor has over fifty (50) policies created that would govern the full scope of the HIE and such policies have been refined through their years of experience.

KONZA's score of five (5) in the *Technical Assistance* category. The TC's comments and rationale focused on acknowledging that the vendor addressed the RFP specifications. The vendor mentioned the availability of technical assistance 24/7. Also mentioned the use of a scalable, bilingual work force, and technical assistance model. Moreover, the vendor mentioned the use of cloud to manage tickets and perform tickets analytics, onboard and training activities, and the provision of Key Performance Indicators (KPIs).

KONZA's score of four (4) in the *Master Data Management* category. The TC's comments and rationale focused on acknowledging that the vendor's offerings and explanation addressed RFP specifications. Regarding this category, the vendor did mention having multiple security certifications and one of the lead companies regarding a Qualified Health Information Network (QHIN) certification. The vendor requires that providers be on the whitelist of IPs when connecting (communication protocol), a security measure, and implements multiple layers of security. Moreover, the Master Patient Index (MPI), which is medullar, the vendor did emphasize on this aspect which has the probabilistic and deterministic algorithm.

KONZA's score of four (4) in the *Emergency Response Services* category. The TC's comments and rationale focused on establishing that the vendor's response observed RFP specifications The vendor aligns with Patient Unified Lookup System for Emergencies (PULSE) and other national efforts to arrange a nationwide emergency response service. Moreover, the vendor is connected to eHealth Exchange to provide connectivity to hospitals and provider practices.

2 – CyncHealth Advisors, Inc.

Some notable scores regarding the vendor's technical proposal include:

CyncHealth's score of three (3) in the *Policy* category. The TC's comments and rationale focused on noticing that the vendor did not cover or explain the RFP requirement of including and in fact publishing policies governing the HIE on a public website.

CyncHealth's score of four (4) in the *Technical Assistance* category. The TC's comments and rationale focused on acknowledging that the vendor provided a good explanation as required of the RFP specifications. The vendor mentioned the capability of been able to provide technical assistance services 24/7 and related reports.

CyncHealth's score of four (4) in the *Master Data Management* category. The TC's comments and rationale focused on acknowledging that the vendor's explanation addressed RFP specifications. Regarding this category, vendor did mention details about matching and the use of Rhapsody, including probabilistic and deterministic Master Patient Index (MPI) algorithms.

CyncHealth's score of two (2) in the *Application Programming Interface (API) Services* category. The TC's comments and rationale focused on noticing how the response regarding this category was vague and incomplete, not addressing RFP specifications. Moreover, the vendor expressed that some information would be available upon request and was not directly submitted nor included in the proposal.

3 – Velatura HIE Corporation

Some notable scores regarding the vendor's technical proposal include:

Velatura's score of three (3) in the *Policy* category. The TC's comments and rationale focused on noticing the lack of information regarding policies. The vendor did not go into details regarding the creation of policies that would govern the HIE. Moreover, the vendor referred to a compliance team but does not go into details on how policies will be managed besides the fact that it would comply, and the assurance provided.

Velatura's score of three (3) in the *Technical Assistance* category. The TC's comments and rationale focused on noticing that the vendor had no specification on 24/7 technical assistance services or bilingual capabilities. Moreover, vendor's response lacked information regarding other RFP specifications, how to manage or process tickets, how to elevate tickets, and how change of tiers would occur.

Velatura's score of four (4) in the *Master Data Management* category. The TC's comments and rationale focused on acknowledging that the vendor's explanation addressed RFP specifications. Regarding this category, the vendor expressed using the Common Key Service (CKS) infrastructure for matching providing a ninety-nine percent (99%) matching rate.

Velatura's score of two (2) in the *Data Quality and Reporting Services* category. The TC's comments and rationale focused on noticing that the vendor's response did not properly address RFP specifications. The vendor did not state how they would handle Spanish within the HL7 terminology. The vendor mentioned that they would perform data normalization, however they did not explain how they would ensure the quality of the data. In this category, the TC considered that the vendor's response was very general in the information provided.

4 – Intervoice Communication of Puerto Rico, Inc.

Some notable scores regarding the vendor's technical proposal include:

Intervoice's score of four (4) in the *Policy* category. The TC's comments and rationale focused on acknowledging that the vendor provided a good explanation of specifications required by the RFP. The vendor expressed developing all policies governing the HIE from the ground up. Moreover, the TC saw this as a positive aspect since such policies would be specifically adapted for HIE purposes.

Intervoice's score of four (4) in the *Technical Assistance* category. The TC's comments and rationale focused on acknowledging that the vendor addressed the RFP specifications. The vendor mentioned the availability of technical assistance 24/7, bilingual capabilities and the inclusion of certified integration engineers with experience on HL7, FHIR, and EHR systems. The vendor specified that the onboarding and comprehensive training goes hand to hand with not only provider network participants but government stakeholders. Moreover, besides specifying 24/7-365 days a year services, the vendor also noted a bilingual help desk and explained processes by email, telephone, live chat, and a web portal.

Intervoice's score of four (4) in the *Master Data Management* category. The TC's comments and rationale focused on acknowledging that the vendor's offerings and explanation addressed RFP specifications. Regarding this category, the vendor mentioned that CSS's Master Patient Index (MPI) would be the base of the HIE infrastructure. The MPI will leverage probabilistic and deterministic algorithms regarding specific use cases, prioritizing low duplication for clinical applications and broader inclusion for population health analytics, enhanced match accuracy. CSS would provide accessible MPI performance dashboards that display match rates, unresolved records, and data quality metrics. Moreover, the vendor provided an explanation in how to attend to the necessities of the local community such as custom address normalization and demographic weighting to address Puerto Rico's distinct naming conventions and address patterns.

Intervoice's score of five (5) in the *Use of PRMP Staff* category. The TC's comments and rationale focused on acknowledging that the vendor fully addressed RFP specifications regarding this category in a complete and detailed manner. Moreover, the vendor provided a contingency plan in case the PRMP is either not willing or unable to provide the necessary identified staff.

5 – Secure Health Information Technology Corp.

Some notable scores regarding the vendor's technical proposal include:

Secure HIT's score of two (2) in the *Policy* category. The TC's comments and rationale focused on noticing that the vendor had no policies but mentioned that they would be established. The TC considered that vendor's explanation was deficient in how policies to be used would be created and implemented. Finally, the TC considered vendor's response lacking essential information as required by the RFP.

Secure HIT's score of three (3) in the *Technical Assistance* category. The TC's comments and rationale focused on noticing how brief and lacking was the information provided regarding this category. The TC noticed too much dependency on subcontractors. Nevertheless, the vendor would provide statistics on technical assistance as required by the RFP.

Secure HIT's score of four (4) in the *Master Data Management* category. The TC's comments and rationale focused on acknowledging that the vendor's explanation addressed RFP specifications. Regarding this category, the vendor explained details about matching and the use of Rhapsody, including probabilistic and deterministic Master Patient Index (MPI) algorithms.

Secure HIT's score of two (2) in the *Interface Specifications, Configuration, and Management* category. The TC's comments and rationale focused on acknowledging that the vendor's response did not properly address RFP specifications. The vendor's response was limited and lacked crucial information. That said, the vendor did not provide the current specifications and data quality onboarding protocols.

B – METHODOLOGY AND ANALYSIS OF ORAL PRESENTATIONS

In accordance with section 5.7 of the RFP, oral presentations were mandatory and all participating vendors passing the 70% threshold were to comply with this requirement as part of the evaluation process. To come up with the *Points Allocated* for oral presentations, a weight/score formula was implemented. With regards to each evaluation category listed below, those constituted the evaluation criteria established for oral presentation purposes and vendors were evaluated based on their performance. Each item had an assigned weight, which had to be multiplied by the consensus score given by the EC. The weights assigned to each criterion multiplied by a score of 5 would give 50, the maximum available points for oral presentations.

The following table portraits the EC's consensus score for each vendor's oral presentation category item and the corresponding allotted points:

Evaluation Category	Weight	KONZA		CyncHealth	
		Score	Points	Score	Points
Oral Presentations	---	---	*(50)*	---	*(50)*
1. Did the vendor's presentation demonstrate extensive knowledge of managing the services required by the RFP?	10	4	8	4	8
2. Did the vendor's presentation demonstrate a clear understanding of the specifications of the RFP?	10	4	8	5	10
3. Did the vendor professionally present and manage their presentation, including time management?	10	4	8	4	8
4. Did the vendor fully respond questions asked by the Evaluation Committee in a direct and applicable manner?	10	4	8	4	8
5. Was the overall impression of the strength and quality of the vendor's presentation positive?	10	4	8	4	8
Subtotal	---	---	**40**	---	**42**
Total	---	---	**40**	---	**42**

Evaluation Category	Weight	Velatura		Intervoice	
		Score	Points	Score	Points
Oral Presentations	---	---	*(50)*	---	*(50)*
1. Did the vendor's presentation demonstrate extensive knowledge of managing the services required by the RFP?	10	4	8	5	10
2. Did the vendor's presentation demonstrate a clear understanding of the specifications of the RFP?	10	4	8	5	10
3. Did the vendor professionally present and manage their presentation, including time management?	10	4	8	4	8

4. Did the vendor fully respond questions asked by the Evaluation Committee in a direct and applicable manner?	10	4	8	4	8
5. Was the overall impression of the strength and quality of the vendor's presentation positive?	10	4	8	4	8
Subtotal	---	---	**40**	---	**44**
Total	---	---	**40**	---	**44**

Regarding oral presentations, the EC members concluded that all vendors, as well as subcontractors, displayed understanding of the services required in the RFP. The vendors' projection during presentations demonstrated professionalism and knowledge and were able to adequately manage the allotted time. The EC members also noted that vendors' overall experience (inclusive of subcontractors' experience) in previous projects of similar nature in other jurisdictions showed understanding and knowledge of required services. Finally, the general impression of the quality of the vendors' presentations was positive and some vendors were considered capable of providing the services specified in the RFP, hence the scores provided in the corresponding categories.

C – METHODOLOGY AND ANALYSIS OF COST PROPOSALS

After the technical evaluation phase ended, the EC proceeded to add the cost proposals criteria to the equation. The highest possible score, 200 points, were automatically given to the proposal with the lowest cost. The cost proposal scores provided were calculated using the following formula:

$$\frac{\text{lowest offeror's cost}}{\text{the offeror's cost being scored}} \times \text{the maximum number of cost points available}$$

According to vendors' cost proposals, scores are as follows (rounded up and listed in descending order by cost score obtained):

Intervoice
($29,822,816.45 / **$29,822,816.45**) = 1 X 200 = **200**

KONZA
($29,822,816.45 / **$42,710,618.21**) = .6982… X 200 = **140**

Velatura
($29,822,816.45 / **$66,849,827.92**) = .4461… X 200 = **89**

CyncHealth
($29,822,816.45 / **$73,336,330.50**) = .4066… X 200 = **81**

The following table portraits the EC's overall final points (not inclusive of oral presentation scores and listed in descending order by total score obtained):

Vendor	Technical	Cost	Total
Maximum Response Points	*750*	*200*	*950*
Intervoice	612	200	**812**
KONZA	610	140	**750**
Velatura	541	89	**630**
CyncHealth	541	81	**622**

In this final phase of evaluation, where cost proposals were examined and scored accordingly with the aforementioned methodology, Intervoice's proposal was the one with the lowest cost and consequently, received a score of two hundred (200) points.

IV. EVALUATION COMMITTEE RECOMMENDATION

First, for the reasons stated, since Intervoice obtained a technical score of 612, KONZA, 610, Velatura 541, and CyncHelath, 541, all mentioned vendors managed to move on to the oral presentations and cost analysis evaluation phases. In the oral presentation phase, Intervoice received 44 points, KONZA, 40, Velatura, 40, and CyncHealth, 42. Moreover, in the final phase of evaluation, costs, Intervoice received 200 points, KONZA, 140, Velatura, 89, and CyncHealth, 81. After the culmination of all evaluation phases, Intervoice scored the highest point percentage among all vendors with an overall score of 856 points while KONZA obtained a 790, Velatura, 670, and CyncHealth, 664.

Second, the recommendation is that considering all factors such as evaluated proposals, information submitted and presented, technical aspects, economic value, overall point percentages, and conclusions presented here, PRMP should award the *Buena Pro* to Intervoice, whose proposal is determined to be the most advantageous to the program.[9]

Lastly, the procedural reality reflected through this *Award Notification* guarantees transparency, equity and due process in the procurement of professional services for the benefit of the Government of Puerto Rico and Medicaid Program.

[9] 45 CFR §75.329 (d) (4) Contracts must be awarded to the responsible firm whose proposal is most advantageous to the program, with price and other factors considered; ...

V. PRMP DETERMINATION

Hereby it is notified that the PRMP accepts the EC's recommendation to award the *Buena Pro* and subsequent contract to **Intervoice Communication of Puerto Rico, Inc.**, highest overall scoring vendor. All things considered, PRMP feels confident that this award is given to a responsible vendor whose proposal is advantageous to the program. This award is given in conformity with Executive Order 2021-029 and Administrative Orders No. OA-581, 586, 603, and 614.

Prior to the formation of the contract, this *Award Notification* and Intervoice's proposal must be verified by CMS. Once approved, Intervoice shall submit all required documentation to the PRMP contract office, particularly a summarized proposal.

Be advised that the awarded vendor must be registered with the *Registro Único de Proveedores de Servicios Profesionales (RUP)* of the Puerto Rico General Services Administration. Furthermore, no services shall be provided until an official copy of the contract is filed with the Puerto Rico Office of the Comptroller.

On October 30, 2025, in San Juan, Puerto Rico.

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VI. RECONSIDERATION / JUDICIAL REVIEW – TERMS

According to 3 L.P.R.A. § 9655, the party adversely affected by a partial or final resolution or order may, within twenty (20) days from the date of filing in the records of the notification of the resolution or order, file a motion for reconsideration of the resolution or order. The agency must consider it within fifteen (15) days of the filing of said motion. If it rejects it outright or does not act within fifteen (15) days, the term to request judicial review will begin to count again from the date of notification of said denial or from the expiration of those fifteen (15) days, as the case may be. If a determination is made in its consideration, the term to request judicial review will begin to count from the date on which a copy of the notification of the agency's resolution definitively resolving the motion for reconsideration is filed in the records. Such resolution must be issued and filed in the records within ninety (90) days following the filing of the motion for reconsideration. If the agency grants the motion for reconsideration but fails to take any action in relation to the motion within ninety (90) days of its filing, it will lose jurisdiction over it and the term to request judicial review will begin to count from the expiration of said ninety (90) day term unless the agency, for just cause and within said ninety (90) days, extends the term to resolve for a period that will not exceed thirty (30) additional days.

If the filing date in the records of the copy of the notification of the order or resolution is different from the one submitted through ordinary mail or sent by electronic means of said notification, the term will be calculated from the date of submission through ordinary mail or by electronic means, as appropriate.

The party filing a motion for reconsideration must submit the original motion and two (2) copies either in person or by certified mail with return receipt to the Division of Administrative Hearings within the Legal Advisory Office of the Department of Health. The requesting party must also notify all other involved parties within the designated timeframe and include proof of this notification in the motion.

Submissions must be made as follows:

- **For personal delivery:** Monday through Friday (excluding holidays), between 8:00 a.m. and 4:30 p.m., at the following address:
  Department of Health, Legal Advisory Office - Division of Administrative Hearings
  1575 Avenida Ponce de León, Carr. 838, Km. 6.3,
  Bo. Monacillos, San Juan, Puerto Rico 00926.
- **Alternatively, by certified mail with return receipt, to the following postal address:**
  Legal Advisory Office - Division of Administrative Hearings
  Department of Health
  PO Box 70184
  San Juan, Puerto Rico 00936-8184.

According to 3 L.P.R.A. § 9672, a party adversely affected by an agency's final order or resolution, and who has exhausted all remedies provided by the agency or the appropriate appellate administrative body, may file a request for judicial review with the Court of Appeals within thirty (30) days. This period begins from either the date the notification of the agency's final order or resolution is

filed in the records or the applicable date provided under 3 L.P.R.A. § 9655, when the time limit for requesting judicial review has been interrupted by the timely filing of a motion for reconsideration.

The party requesting judicial review must notify the agency and all other involved parties of the filing simultaneously or immediately after submitting the request to the Court of Appeals. Notification to the agency must be sent to the same addresses designated for the filing of motions for reconsideration. The notification of the filing submitted to the Court of Appeals must include all annexes.

If the filing date of the copy of the notification of the agency's final order or resolution in the records differs from the date it was deposited in the mail, the time period for requesting judicial review will be calculated from the date of deposit in the mail.

The judicial review provided herein shall be the exclusive remedy for reviewing the merits of an administrative decision, whether it is of an adjudicative nature or of an informal nature issued under 3 L.P.R.A. § 9601 *et al.*

The mere presentation of a motion for reconsideration or request for judicial review does not have the effect of preventing the Puerto Rico Medicaid Program (PRMP) from continuing with the procurement process within this request for proposals, unless otherwise determined by a court of law.

Finally, any party adversely affected by this *Award Notification* that decides to file a motion for reconsideration according to 3 L.P.R.A. § 9655 and eventually files a request for judicial review according to 3 L.P.R.A. § 9672, must comply with a *Notice Requirement* meaning that they have the obligation to inform other participating parties to ensure transparency, fairness, and due process.

VII. CERTIFICATION OF NOTIFICATION

I hereby certify that on November 3, 2025, copy of this *Award Notification* has been sent via electronic mail to all participating vendors of the **Request for Proposals (RFP) No. 2025-PRMP-MES-HIE-001** to the addresses provided for legal notices or notification purposes in the submitted proposals:

KONZA National Network
Att. Laura McCrary (President & CEO)
623 SW 10th Avenue
Topeka, Kansas 66612
Tel: (800) 435-2104
E-mail: lmccrary@konza.org

CyncHealth Advisors, Inc.
Att. Jaime Bland (President & CEO)
PO Box 27842
Omaha, NE 68127
Tel: (402) 955-9504
Fax: (402) 972-8224
E-mail: legal@cynchealth.org

Velatura HIE Corporation
Att. Bharat Gandhi (Chief Legal Counsel)
120 N. Washington Square, Suite 316
Lansing, MI 49866
Tel: (248) 797-2536
E-mail: Bharat.gandhi@velatura.org

Intervoice Communication of Puerto Rico, Inc.
Att. Carlos Ortiz (President)
1250 Ponce de León Avenue
San Juan, PR 00907
Tel: (787) 302-1030
E-mail: COrtiz@IntervoicePR.com

Secure Health Information Technology Corp.
Att. Diego Loinaz Martin (Legal Advisor)
1353 Luis Vigoreaux Avenue PMB 486
Guaynabo, PR 00966
Tel: (787) 294-5551
E-mail: dloinaz@loinazmartin.com

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