**Exhibit C**



**State of Vermont Bidder Response Form**

**Request for Proposal Name: *DOC Electronic Law Library and Legal Research Retrieval System***

**Vendor Instructions:**

Provide the information requested in this form and submit it to the State of Vermont as part of your Request for Proposal (RFP) response. All answers must be provided within the form unless otherwise specified.

**Important: This form must be completed and submitted in response to this RFP for your proposal to be considered valid. The submission must also include the eight (8) additional artifacts requested within this form (denoted by underlined green font).**

## See the RFP for full instructions for submitting a bid. **Bids must be received by the due date and at the location specified on the cover page of the RFP.**

Direct any questions you have concerning this form or the RFP to:

**Carol Callea,** Director of Legal Education

State of Vermont

Agency of Human Services / Department of Corrections

NOB 2 South, 280 State Drive

Waterbury, VT 05671-2000

E-mail Address: **Carol.Callea@vermont.gov**

## **Part 1: VENDOR PROFILE**

1. Complete the table below.

|  |  |
| --- | --- |
| **Item** | **Detail** |
| Company Name:  | [insert the name that you do business under] |
| Physical Address: | [if more than one office – put the address of your head office] |
| Postal Address: | [e.g. P.O Box address] |
| Business Website: | [url address] |
| Type of Entity (Legal Status): | [sole trader/partnership/limited liability company or specify other]  |
| Primary Contact: | [name of the person responsible for communicating with the Buyer] |
| Title: | [job title or position] |
| Email Address: | [email] |
| Phone Number: | [landline] |
| Fax Number: | [fax] |

1. Provide a brief overview of your company including number of years in business, number of employees, nature of business, and description of clients. Identify any parent corporation and/or subsidiaries.

1. Is your organization currently or has it previously provided solutions and/or services to any agency or entity of the Vermont State government? If so, name the State entity, the solution and/or services provided, and the dates.
2. **Provide a Financial Statement\* for your company and** **label it Attachment #1**. A confidentiality statement may be included if this financial information is considered non-public information. This requirement can be filled by:
	* A current Dun and Bradstreet Report that includes a financial analysis of the firm;
	* An Annual Report if it contains (at a minimum) a Compiled Income Statement and Balance Sheet verified by a Certified Public Accounting firm; or
	* Tax returns and financial statements including income statements and balance sheets for the most recent 3 years, and any available credit reports.

*\*Some types of procurements may require bidders to provide additional or specific financial information. Any such additional requirements will be clearly identified and explained within the RFP, and may include supplemental forms in addition to this Bidder Response Form.*

1. Disclose any judgments, pending or expected litigation, or other real potential financial reversals, which might materially affect the viability or stability of your company or indicate below that no such condition is known to exist.

1. Provide a list of three references similar in size and industry (preferably another governmental entity). References shall be clients who have implemented your Solution within the past 48 months.

|  |  |
| --- | --- |
| **Reference 1** | **Detail** |
| Reference Company Name:  | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |
| **Reference 2** | **Detail** |
| Reference Company Name:  | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |

|  |  |
| --- | --- |
| **Reference 3** | **Detail** |
| Reference Company Name:  | [insert the name that you do business under] |
| Company Address: | [address] |
| Type of Industry: | [industry type: e.g., government, telecommunications, etc.] |
| Contact Name: | [if applicable] |
| Contact Phone Number: | [phone] |
| Contact Email Address: | [email] |
| Description of system(s) implemented: | [description] |
| Date of Implementation: | [date] |

## **Part 2: Vendor Proposal/Solution**

1. Provide a description of the technology solution you are proposing.
2. Provide a description of the capabilities of the technology solution you are proposing.
3. If a proprietary software is being proposed, provide a description of the:
	1. Standard features and functions of the software:
	2. The software licensing requirements for the solution:
	3. The standard performance levels:
		* Hours of system availability:
		* System response time:
		* Maximum number of concurrent users:
		* Other relevant performance level information:
4. Give a brief description of the evolution of the system/software solution you are proposing. Include the date of the first installed site and major developments which have occurred (e.g. new versions, new modules, specific features).
5. List the total number of installations in the last 3 years by the year of installation.
6. Provide the total number of current users for the proposed system and indicate what version they are using.
7. Have you implemented the proposed solution for other government entities? If so, tell us who, when, and how that implementation went?
8. **Provide a Road Map that outlines the company’s short term and long term goals for the proposed solution/software and label it Attachment #2.**
9. **Provide a PowerPoint (minimum of 1 slide and maximum of 10 slides) that provides an Executive level summary of your proposal to the State. Label it Attachment #3.**
10. Does your proposed solution include any warranties? If so, describe them and provide the warranty periods.
11. Describe any infrastructure, equipment, network or hardware *required* to implement and/or run the solution.
12. What is your recommended way to host this solution?
13. Describe how your solution can be integrated to other applications and if you offer a standard-based interface to enable integrations.
14. Respond to the following questions about the solution being proposed:

|  |
| --- |
| **Vendor Response/Explanation** |
| **Question** | **Yes or No** |  |
| 1. Does the solution use Service Oriented Architecture for integration?
 |  |  |
| 1. Does the solution use a Rules Engine for business rules?
 |  |  |
| 1. Does the solution use any Master Data Management?
 |  |  |
| 1. Does the solution use any Enterprise Content Management software?
 |  |  |
| 1. Does the solution use any Case Management software?
 |  |  |
| 1. Does the solution use any Business Intelligence software?
 |  |  |
| 1. Does the solution use any Database software?
 |  |  |
| 1. Does the solution use any Business Process Management software?
 |  |  |
| 1. Is this a browser based solution and if so what browsers do you support?
 |  |  |
| 1. Does the solution include an API for integration?
 |  |  |

## **Part 3: Functional Requirements**

The table below lists the State’s Functional Requirements. Indicate the “Availability” for each requirement for your proposed solution. Use the “Vendor Comments” column to provide any additional information or explanations.

**A** - Feature is available in the core (“out-of-the-box”) solution.

**D** - Feature is currently under development (indicate anticipated date of availability in the Vendor comments column).

**C** - Feature is not available in the core solution but can provided with customization.

**N** - Feature is not available.

|  |  |  |  |
| --- | --- | --- | --- |
| **ID #** | **Functional Requirement Description** | **Availability** | **Vendor Comments** |
| **Technical Functionality** |
| 1 | The Solution shall provide a vendor supported network for use by incarcerated individuals in 7 different rooms (total) at the six Department of Corrections (DOC) locations and 1 out of state correctional facility (MS). Devices for access may include workstations, thin clients and tablets depending on the vendors bid. |  |  |
| 2 | The Solution shall be supported by the vendor procuring and maintaining an Internet Service Provider (ISP) for each of the DOC locations. |  |  |
| 3 | The Solution shall allow incarcerated individuals to access a vendor-hosted cloud-based server for file storage, application hosting and active directory services. |  |  |
| 5 | The Solution shall include at least 34 devices with 22” or greater monitor displays and can access applications, support sound, camera and microphone capabilities, and provide limited read/write access of files to incarcerated individuals. |  |  |
| 6 | The Solution shall manage security access to create, manage, and delete profiles, manage folders, and perform password reset functionality. |  |  |
| 7 | The Administrator of the Solution shall be able to perform incarcerated individual password reset functionality, or the solution must allow for the incarcerated individual to be able to reset their own password. |  |  |
| 8 | The Solution shall have ability to terminate or suspend internet access for the Network, as a whole or by location. |  |  |
| 9 | The Solution shall have the ability to add or remove “white-list” web addresses that incarcerated individuals will have access to. The State would provide the web address to the vendor to update as needed. |  |  |
| 10 | The Solution shall utilize Cat 6 cable already installed within the DOC locations to connect vendor devices to other network equipment, or otherwise use vendor provided wireless access points. |  |  |
| **Profile Management** |
| 1 | The Solution shall provide a user category for incarcerated individuals for viewing their own legal & education materials. |  |  |
| 2 | The Solution shall provide a user category for Guidance for viewing all incarcerated individual’s legal education materials.  |  |  |
| 3 | The Solution shall provide a user category for Contractor to support the overall solution. |  |  |
| **Login Functionality** |
| 1 | The Solution shall provide device access through a Contractor supported web-based connection. |  |  |
| 2 | The Solution shall time out and lock after a period of inactivity and allow the user to log back in and continue the function they were in the process of completing. The time out period shall be configurable to the needs of the DOC. |  |  |
| 3 | The Solution shall provide incarcerated individuals login access at any of the DOC locations specified. Additional security may be requested to ensure that incarcerated individuals can only login from the location that they reside to prevent unauthorized access. |  |  |
| 4 | The Solution shall present a login screen after being initiated acknowledging and agreeing to the VTDOC Offender Electronic Equipment Acknowledgement form~~.~~ |  |  |
| **Document Management** |
| 1 | The Solution shall provide a single rate for all space utilization used by the State for all services, or the vendor shall supply a fee for space rate that can be used to determine the overall cost to the State. |  |  |
| 2 | The Solution shall provide single-user incarcerated individual permission to access to password protected designated file folders. |  |  |
| **Software and Applications - Solution shall provide the Incarcerated Individual and DOC Administrator access to the following software:** |
|  | Primary Sources – Legal Research |  |  |
| 1 | Legal Research Software Required Content (Statutory and judicial primary sources of legal authority; rules and forms and published and unpublished judicial opinion, orders, briefs) |  |  |
|  | 1. United States Supreme Court
 |  |  |
|  | 1. United States Second Circuit Court of Appeals
 |  |  |
|  | 1. United States District Court of Vermont
 |  |  |
|  | 1. United States Code
 |  |  |
|  | 1. Federal Court Rules, Procedures, and Forms
 |  |  |
|  | 1. Vermont Supreme Court
 |  |  |
|  | 1. Vermont Superior Court (Civil & Criminal)
 |  |  |
|  | 1. Vermont Statutes
 |  |  |
|  | 1. Vermont Court Rules, Procedures, and Forms
 |  |  |
|  | Secondary Sources – Legal Research |  |  |
|  | 1. Attorney general opinions
 |  |  |
|  | 1. Citation verification and updating service
 |  |  |
|  | 1. Civil Rights & Civil Liberties Litigation
 |  |  |
|  | 1. Constitutional Law
 |  |  |
|  | 1. Criminal Practice & Procedure
 |  |  |
|  | 1. Digests or topic classification system for primary legal sources
 |  |  |
|  | 1. Evidence
 |  |  |
|  | 1. Federal Court of Appeals
 |  |  |
|  | 1. Federal Practice & Procedure
 |  |  |
|  | 1. Habeas Corpus Litigation
 |  |  |
|  | 1. Jailhouse Lawyer/pro se litigant self-help or how to manual
 |  |  |
|  | 1. Law Dictionary & Thesaurus
 |  |  |
|  | 1. Legal drafting, pleading and practice forms
 |  |  |
|  | 1. Legal Encyclopedias
 |  |  |
|  | 1. Legal Research & Writing Guide
 |  |  |
|  | 1. Post-Conviction Remedies & Relief Manual
 |  |  |
|  | 1. Prisoner’s Rights
 |  |  |
|  | 1. Section 1983 Litigation
 |  |  |
|  | 1. Sentencing Guidelines
 |  |  |
|  | 1. Treatises and other information sources about Prisoner’s Rights law published by the Contractor or its subsidiaries or partners
 |  |  |
| 2 | The Legal Research Contractor shall provide access to the contents of its information services utilizing the following search strategies or methods:1. Word or phrase
2. Proximity connectors
3. Field or segment
4. Root expansion and universal character symbols
5. "Natural'' language
6. Boolean or terms and connectors
7. Option of browsing documents page-to-page or search term-to-search term
8. Highlighting of search terms in retrieved results
9. Simultaneous cross searching of primary sources of legal authority
10. Retrieval of documents via citation
11. Ability to print, download or e-mail entire or selected portions of results
12. Citation verification providing history and treatment
13. Ability to extract citations from electronic documents for cite checking
 |  |  |
| 4 | The Legal Research Contractor shall provide a table of contents navigation structure for all sources listed above, whenever practicable |  |  |
| 5 | The Contractor shall provide access to current and future versions of any enhanced navigation platform, which generally offers users the ability to conduct searches across file types and then through results by document type, date, and other characteristics. |  |  |
| 6 | Adobe Reader |  |  |
| 7 | Application that supports .mp3 and .mp4 file formats |  |  |
| 8 | Other software as requested that is reviewed and approved by the Administrator. Any software where a cost for a license is needed would result in a change request.  |  |  |
| **Whitelisted Sites - The Solution shall provide “white-list” functionality. A listing of currently known web locations for access include the following:** |
| 1 | The Vermont Judiciary [Vermont Judiciary](https://www.vermontjudiciary.org/) |  |  |
| 2 | The Vermont Department of Corrections [Home | Department of Corrections (vermont.gov)](https://doc.vermont.gov/) |  |  |

## **Part 4: Non- Functional Requirements**

The tables below list the State’s Non-Functional Requirements. Indicate if your proposed solution complies in the “Comply” column.

**Yes** = the solution complies with the stated requirement.

**No** = the solution does not comply with the stated requirement.

**N/A** = Not applicable to this offering.

Describe how the requirement is met in the “Vendor Description of Compliance” column.

**4.1 Hosting**

|  |  |  |  |
| --- | --- | --- | --- |
| **ID #** | **Non-Functional Requirement Description** | **Comply** | **Vendor’s Description of Compliance**  |
| H1 | Any technical solution must be hosted in a data center. |  |  |
| H2 | Any hosting provider must provide for back-up and disaster recovery models and plans as needed for the solution that meet the State’s minimum requirements.  |  |  |
| H3 | Any hosting provider will abide by ITIL best practices for change requests, incident management, problem management and service desk.  |  |  |

**4.2 Application Solution**

|  |  |  |  |
| --- | --- | --- | --- |
| A1 | Any solutions vendor must provide for the backup/recover, data retention and disaster recovery of a contracted/hosted application solution.  |  |  |
| A2 | Any solutions vendor must provide for application management and design standard of all technology platforms and environments for the application solution (Development, Staging, Productions, DR, etc.)  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **ID #** | **Non-Functional Requirement Description** | **Comply** | **Vendor’s Description of Compliance**  |
| A3 | Any solutions vendor must engage the State of Vermont using Service Level Agreements for system and application performance, incident reporting and maintenance.  |  |  |
| A4 | The State owns any data they enter, migrate, or transmit into the solution and the vendor shall allow the State to pull or copy this data at any time free of charge.  |  |  |
| A5 | As a contract deliverable, the vendor shall supply an up-to-date data dictionary that represents all data respective of the solution it will provide.  The data dictionary must contain the following attributes:1. The technology (RDBMS platform) that hosts the data source, i.e. Oracle, SQL Server, MySQL, DB2, etc.
2. The location where the data source is hosted
3. Thorough descriptions of each table in the data source
4. Thorough descriptions of each column within each table in the data source.  In addition to business definitions, column descriptions must include the following detail: schema names; file group names (if applicable); data types; lengths; primary and foreign key constrains; applied formatting; applied calculations; applied aggregations; NULL-ability; default values.
 |  |  |

**4.3 Security**

As a solution vendor, you must have documented and implemented security practices for the following and have a process to audit/monitor for adherence. Indicate “Yes” or “No” in the “Comply” column or “N/A” if the requirement is not applicable to this offering. Use the “Vendor Description of Applicable Security Processes” column to describe how you meet the requirement and the “Audit/Monitor” column to indicate how you monitor for compliance.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ID #** | **Non-Functional Requirement Description** | **Comply**  | **Vendor’s Description** **of Applicable Security Processes**  | **Audit/Monitor Process** |
| S1 | Input validation |  |  |  |
| S2 | Output encoding |  |  |  |
| S3 | Authentication and password management |  |  |  |
| S4 | Session management |  |  |  |
| S5 | Access control |  |  |  |
| S6 | Cryptographic practices |  |  |  |
| S7 | Error handling and logging |  |  |  |
| S8 | Data protection from unauthorized use, modification, disclosure or destruction (accidental or intentional). |  |  |  |
| S9 | Communication security |  |  |  |
| S10 | System configuration |  |  |  |
| S11 | Database security |  |  |  |
| S12 | File management |  |  |  |
| S13 | Memory management |  |  |  |
| S14 | Fraud detection |  |  |  |
| S15 | General coding practices |  |  |  |
| S16 | POA&M management |  |  |  |
| S17 | Risk Assessment Practices including but not limited to vulnerability assessment and pen testing |  |  |  |
| S18 | Incident response planning and testing |  |  |  |
| S19 | System Security Plan delivery |  |  |  |

**4.4 Other Non-Functional Requirements**

For each requirement listed, indicate if and how you comply or type “N/A” if it is not applicable to your offering.

N/A

**4.5 Data Compliance**

Vendors and their solutions must adhere to applicable State and Federal standards, policies, and laws based on the type of data that will be stored, accessed, transmitted and/or controlled by the solution. If the “Type of Data” column is checked below, respond “Yes” or “No” in the “Comply” column and provide an explanation on how you comply in the “Vendor’s Description of Compliance” column.

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Data** | **Applicable State & Federal** **Standards, Policies, and Laws**  | **Comply** | **Vendor’s Description** **of Compliance** |
| ☒ Publicly available information  | * [NIST 800-171](https://csrc.nist.gov/publications/detail/sp/800-171/rev-1/final)
 |  |  |
| ☒ Confidential Personally Identifiable Information (PII)  | * [State law on Notification of Security Breaches](http://legislature.vermont.gov/statutes/section/09/062/02435)
* [State Law on Social Security Number Protection](http://legislature.vermont.gov/statutes/section/09/062/02440)
* [State law on the Protection of Personal Information](https://legislature.vermont.gov/statutes/fullchapter/09/062)
* National Institute of Standards & Technology:  [NIST SP 800-53](https://nvd.nist.gov/800-53) Revision 4 “Moderate” risk controls
* [Privacy Act of 1974, 5 U.S.C. 552a](https://www.justice.gov/opcl/privacy-act-1974).
 |  |  |
| ☐ Payment Card Information   | * [Payment Card Industry Data Security Standard (PCI DSS)](https://www.pcisecuritystandards.org/document_library?category=pcidss&document=pci_dss) v 3.2
 |  |  |
| [ ]  Federal Tax Information | * Internal Revenue Service Tax Information Security Guidelines for Federal, State and Local Agencies: [IRS Pub 1075](https://www.irs.gov/privacy-disclosure/safeguards-program)
 |  |  |
| [ ]  Personal Health Information  (PHI) | * Health Insurance Portability and Accountability Act of 1996: [HIPAA](https://www.hhs.gov/hipaa/for-professionals/privacy/index.html)
* The Health Information Technology for Economic and Clinical Health Act [HITECH](https://www.hhs.gov/hipaa/for-professionals/special-topics/hitech-act-enforcement-interim-final-rule/index.html)
* [Code of Federal Regulations 45 CFR 95.621](https://www.govinfo.gov/app/collection/cfr/2017/title45)
 |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of Data** | **Applicable State & Federal****Standards, Policies, and Laws** | **Comply** | **Vendor’s Description****of Compliance** |
| [ ]  Affordable Care Act  Personally Identifiable  Information (PII) | * Internal Revenue Service Tax Information Security Guidelines for Federal, State and Local Agencies [IRS Pub 1075](https://www.irs.gov/privacy-disclosure/safeguards-program)
* Minimum Acceptable Risk Standards for Exchanges [MARS-E 2.0](https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/)(Scroll down the page)
 |  |  |
| [ ]  Medicaid Information | * Medicaid Information Technology Architecture [MITA3.0](https://www.medicaid.gov/medicaid/data-and-systems/mita/mita-30/index.html)
* [Code of Federal Regulations 45 CFR 95.621](https://www.govinfo.gov/app/collection/cfr/2017/title45)
 |  |  |
| [ ]  Prescription Information | * [State law on the Confidentiality of Prescription Information](http://legislature.vermont.gov/statutes/section/18/091/04631)
 |  |  |
| [x]  Student Education Data  | * Family Educational Rights and Privacy Act:  [FERPA](http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html)
 |  |  |
| [ ]  Personal Information from  Motor Vehicle Records | * [Driver’s Privacy Protection Act](https://www.congress.gov/bill/103rd-congress/house-bill/3355/text) (Title XXX) (“DPPA”) 18 U.S.C. Chapter 123, §§ 2721 – 2725
 |  |  |
| [x]  Criminal Records | * Criminal Justice Information Security Policy:  [CJIS](https://www.fbi.gov/about-us/cjis/cjis-security-policy-resource-center/view)
 |  |  |

**4.6 State of Vermont Cybersecurity Standard 19-01**

Vendor shall certify by checking the box below the Solution shall not include, incorporate, rely on, utilize or be supported by any products or services subject to the limitations provided under State of Vermont Cybersecurity Standard 19-01, which Contractor acknowledges has been provided to it, and is available on-line at the following URL: <https://digitalservices.vermont.gov/cybersecurity/cybersecurity-standards-and-directives> .

[ ]  Contractor hereby certifies that in connection with the Request for Proposal, **none** of the applicable products or services will be included in or used to support State systems in a manner prohibited under the Standard.

## **Part 5: Implementation/Project Management Approach**

1. Describe the approach you would recommend for project managing this engagement.
2. Provide a list of the standard project management deliverables that you would normally produce for this type of engagement.
3. Provide a proposed list of project phases, major milestones, and an implementation timeline. Label this Attachment #4.
4. What types of difficulties have other clients experienced with implementation of the proposed solution?
5. Describe the experience and qualifications of the Project Manager you would offer as the resource for this engagement. Provide a copy of their resume and label it Attachment #5.

**Part 6: Technical Services**

1. Describe the technical services included in your proposal (e.g., business analysis, configuration, testing, implementation, etc.).
2. Provide a list of the standard deliverables for the technical services described above.
3. Provide a description of the roles/services/tasks the State will be expected to cover as part of this engagement. Describe any additional roles/services/tasks that are optional, but would be beneficial for the State to provide.
4. Describe your typical conversion plan to convert data from existing systems to your proposed solution (if applicable).
5. Describe and attach your typical Implementation Plan (label it Attachment #6), which shall include planning for the transition to maintenance and operations.
6. Describe the experience and qualifications of the technical resources proposed for this engagement. Provide their resume(s) and label them Attachment #7.
7. Describe the training that is included in your proposal.
8. Describe the system, administrator, and/or user documentation that is included in your proposal.

**Part 7: Maintenance and Support Services**

1. Provide answers to the questions below regarding your company’s Maintenance and Support Services:

|  |  |
| --- | --- |
| **Questions** | **Vendor Response** |
| **Service:  Customer Phone &/or Email Support** |
| What is the method for contacting technical support? |  |
| What are the hours of operation for support? |  |
| What is the turnaround time for responses? |  |
| What is the escalation process for support issues? |  |
| Who comprises the support team and what are their qualifications? |  |
| Define your response resolution metrics and how you capture and report them. |  |
| **Service:  Incident/Security Breach Notification and Process** |
| Describe your identification and notification process for security breaches. |  |
| **Service:  Data Management** |
| Describe how data is stored, retained and backed-up (including frequency). |  |
| **Service:  Hosting** |
| Describe the hosting service and associated service levels. |  |

|  |  |
| --- | --- |
| **Questions** | **Vendor Response** |
| **Service:  Scheduled Maintenance/Downtime** |
| What is the frequency of scheduled maintenance and downtime? |  |
| What is the notification process for scheduled maintenance and downtime? |  |
| Describe how “maintenance” updates are tested with customers prior to installing them in their live environments.  |  |
| **Service:  System Upgrades** |
| Are software upgrades provided as part of the software support contract?  |  |
| Describe your software upgrade process. |  |
| How often are new versions released? |  |
| Is documentation and training provided for system upgrades?  |  |
| Are there additional costs for upgrades and/or new releases? |  |
| Describe how and when the State will have an opportunity to test system upgrades/releases prior to live installation. |  |
| Describe how the State will validate post installation and how changes will be backed out in the event that a problem is encountered. |  |

|  |  |
| --- | --- |
| **Questions** | **Vendor Response** |
| **Service:  Bug Fixes and Minor Enhancements** |
| Describe the frequency and process for providing, testing, and installing bug fixes and minor enhancements. |  |
| **Service:  Disaster Recovery** |
| Describe the disaster recovery services included in this proposal for any non-state hosted services. |  |
| What is your standard RPO and RTO? |  |
| Describe the plan your company has in place for its own disaster recovery of any sites that may be involved in support of this proposal. |  |

1. Describe any other services not mentioned in the above list that are included in your standard Service Level Agreement (SLA) and include a copy of your SLA with your response to this RFP. Label the SLA Attachment #8.
2. Describe how adherence to your service levels is measured and what remedies you would provide the State when performance doesn’t meet the standard?

## **Part 8: Pricing**

1. Submit pricing for your proposed solution in the table below. Fill in only the lines that are applicable to your proposal. **Insert lines for additional costs, but do not delete or rename any lines in the Table**. **Total each column and provide a total of all columns in the “Total Implementation, plus 5 Year Costs” box on the next page.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Cost Type** | **One Time (Implementation)** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
| **Software** |   |  |  |  |  |  |
| Enterprise Application: License Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Maintenance &/or License Fee Add-Ons  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Subscription cost | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Storage Limitations and/or Additional Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Database Software: License Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Middleware Tools: License Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Operating System Software: License Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Upgrade Costs for Later Years | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Support and Maintenance Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Implementation Services** |  |  |  |  |  |  |
| Project Management | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Requirements  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Design (Architect Solution) | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Development (Build, Configure or Aggregate)/Testing | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| System Testing | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Defect Removal | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Implement/Deploy or Integrate | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Quality Management | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Cost Type** | **One Time (Implementation)** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** |
| **Implementation Services Continued** |  |  |  |  |  |  |
| Training  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Telecom** |   |  |  |  |  | $0.00 |
| Bandwidth | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Hardware** |   |  |  |  |  | $0.00 |
| Computing Hardware  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Storage and Backup Hardware | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Network Hardware | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| Facilities/Data Center | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Hosting** |   |  |  |  |  | $0.00 |
| Hosting Fees | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
|  | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| **Total Base Costs** | **$0.00** |  |  |  |  |  |

|  |  |
| --- | --- |
| **Total Implementation plus Five Year Costs** | **$ 0.00** |

1. Describe any assumptions you have made in relation to the above cost and pricing information.
2. Provide pricing information for any volume discounts that are available based on the number of software licenses purchased or support years purchased.
3. Provide pricing for any Functional Requirements marked as “C” (feature is not available in the core solution, but can be provided with customization).

**Part 9: Terms and Conditions**

In deciding which Respondent/s to shortlist the State will take into consideration each Respondent’s willingness to meet the State’s terms and conditions. Indicate any objections or concerns to our stated terms and conditions in the RFP or any of the exhibits, addendums or attachments including **Attachment C**. Add lines to the table below as needed.

**Important:** Bidder will be bound to all terms and conditions stated in the State’s RFP, exhibits, attachments, and/or addendums except and then only to the extent specifically set forth in the table below, and only if and to the extent expressly agreed and incorporated in writing in a resulting contract. Note that exceptions to contract terms may cause rejection of the proposal.

|  |  |  |
| --- | --- | --- |
| **Clause Location** | **Concern** | **Proposed Verbiage** |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |
| [indicate RFP, exhibit, attachment or addendum, section & page number] | [briefly describe your concern about this clause] | [describe your suggested alternative wording for the clause or your solution] |
|  |  |  |
|  |  |  |

**Part 10: Authorized Company Signature**

I am authorized to submit a proposal to the State of Vermont in response to this RFP on behalf of my organization. The information provided as part of my organization’s response is a true and accurate representation of my organization’s ability to meet the State of Vermont’s business needs as expressed in this RFP.

|  |  |
| --- | --- |
| **Signature:** |  |
| **Full name:** |  |
| **Title:** |  |
| **Company:** |  |
| **Date:** |  |