



Request for Application (RFA)

Medicolegal Death Investigation FHIR Implementation
Collaborative (MDI FIC)

Date Issued: January 11, 2023

Date Response Due: February 6, 2023, by 11:59pm ET

CDC FOUNDATION CONTACT

Gina Wiser, Project Manager

ABOUT THE CDC FOUNDATION

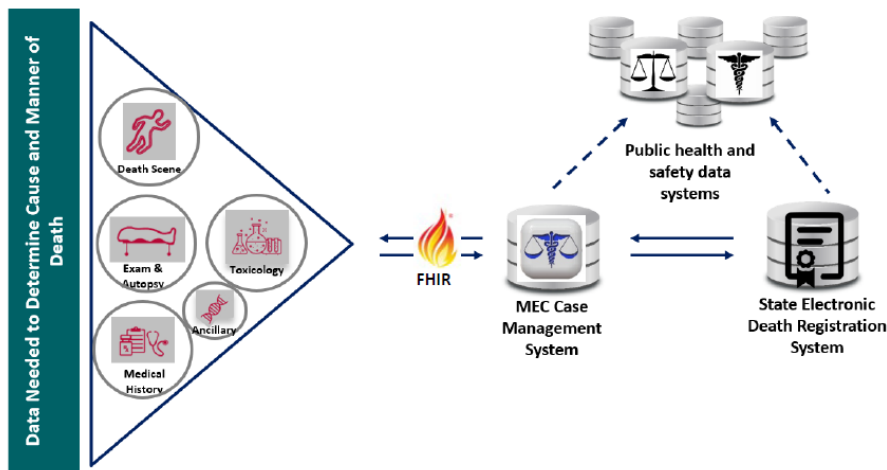
The CDC Foundation helps the Centers for Disease Control and Prevention (CDC) save and improve lives by unleashing the power of collaboration between CDC, philanthropies, corporations, organizations and individuals to protect the health, safety and security of America and the world. The CDC Foundation is the go-to nonprofit authorized by Congress to mobilize philanthropic partners and private-sector resources to support CDC's critical health protection mission. Since 1995, the CDC Foundation has raised over \$1.6 billion and launched more than 1,200 programs impacting a variety of health threats from chronic disease conditions including cardiovascular disease and cancer to infectious diseases like rotavirus and HIV, to emergency responses, including COVID-19 and Ebola. The CDC Foundation managed hundreds of CDC-led programs in the United States and in more than 160 countries last year. Visit www.cdcfoundation.org to learn more.

PURPOSE

Information obtained through the course of medicolegal death investigations (MDIs) is crucial to understanding causes of deaths, monitoring evolving health challenges and ultimately saving lives. In order to improve the timeliness and accuracy of medicolegal death investigation data, CDC is prioritizing data modernization. It is not just about technology, but about putting the right people, processes and policies in place. The goal is to move from siloed data systems to connected, resilient, adoptable and sustainable systems.

Fast Healthcare Interoperability Resources (FHIR) is a standard that was created for health care data exchange. These FHIR standards can be used to achieve bi-directional exchange of data between MDI systems and data sharing partners, such as jurisdictional electronic death registration system (EDRS), toxicology and other laboratory information management systems (LIMS) and ancillary workflows whose systems have the capability of utilizing FHIR. FHIR will not only improve data exchange but will also reduce the burden of data entry. For more background, visit: <https://www.cdc.gov/nchs/comec/modernizing-mec-data-systems.htm>. For more information on HL7 and FHIR, visit: <https://hl7.org/fhir/>. For implementation guidance on the exchange of information to and from medicolegal death investigation (MDI) information systems, visit: <http://hl7.org/fhir/us/mdi/>.

The purpose of this initiative is for MDI offices to work collaboratively with other MDI offices, data sharing partners and FHIR subject matter experts to pilot the use of FHIR to improve the efficiency of data transmission between MDI offices and other data sharing partners. The diagram below illustrates one example flow of data that could see improvements in timeliness and quality through the use of the MDI FHIR standards.



PROJECT DESCRIPTION

The CDC Foundation is issuing a Request for Application (RFA) to identify MDI offices to participate in a five-month Medicolegal Death Investigation FHIR Implementation Collaborative (MDI FIC). A medicolegal death investigation authority is a person or persons or office whose duty it is to perform medicolegal death investigations for a designated jurisdiction, and ensure certification of cause and manner of death; duties vary based on local enabling statutes. This is usually a medical examiner or coroner office.

The CDC Foundation will award \$100,000 to up to 10 MDI offices to support their participation in this five-month MDI FIC to test and pilot FHIR-based, Application Programming Interface (API) enabled data exchange with an identified data sharing partner such as: state vital records offices, toxicology labs and/or other entities. Enhancements will be built to existing MDI electronic case management systems (CMS) in accordance with HL7's FHIR open standards to facilitate innovation and capability to be replicated in other MDI offices. In previous pilots, these technical solutions have enhanced the efficiency and timeliness of data exchange and improved data quality.

The CDC's Collaborating Office of Medical Examiners and Coroners (COMEC), CDC Foundation, Georgia Technical Research Institute (GTRI) and other technical partners will provide support for project development, implementation and documentation. The MDI FIC will be developed and led by a consultant being sought concurrently with this RFA.

PROJECT EXPECTATIONS

Selected MDI offices will be required to collaborate with:

- 1) At least one data sharing partner with whom MDI data is currently being exchanged (such as jurisdictional electronic death registration system (EDRS), toxicology and other laboratory information management systems (LIMS) and ancillary workflows whose systems are willing to explore use of FHIR.
 - a. Please note: If FHIR is already enabled by the applicant MDI office, for the purpose of this project, data exchange must be enhanced (e.g. bi-directional data flow, additional flows such as amendments) or be established with a partner for which data sharing through FHIR has not yet been established.
- 2) Software vendors of MDI electronic CMS commercial off-the-shelf products or information technology/IT staff of internally developed CMS.

Selected MDI offices will be expected to:

1. Identify a minimum of two people for the project who can support: 1) award administration/operations/implementation, and 2) information technology/IT (can be a vendor).
2. Participate in monthly 90 minute virtual meetings with all selected MDI offices and monthly 30-60 minute check-in calls for each site. During meetings, share progress made to date, challenges and lessons learned. Must attend at least 80 percent of virtual meetings and check-in calls.
3. Utilize office hours with technical assistance provider for additional real-time support as needed.
4. Attend a two-day, in-person meeting in Atlanta, GA in Spring 2023 (dates TBD).
5. Test various approaches to data modernization in real-world settings in a collaborative environment. Continuously iterate, modify and build toward FHIR interoperability.
6. Work with the project's technical contractor Georgia Tech Research Institute (GTRI) to define the first/priority use case for FHIR. Provide detailed use case information and collaboratively create a process map of dataflows.
7. Submit timely project deliverables and invoices to the CDC Foundation.

See Project Activities below for further details.

AT-A-GLANCE: ACTIVITIES AND DELIVERABLES TIMELINE

The timeline below is subject to change at the sole discretion of the CDC Foundation:

Project Start and Virtual Kickoff Meeting	March 2023
Virtual Meeting, Office Hours, Check-in Calls	April 2023
In-Person, 2-Day Learning Group Meeting, Atlanta, GA Office Hours, Check-in Calls	Spring 2023 (Dates TBD)
Virtual Meeting, Office Hours, Check-in Calls	June 2023
Project End and Virtual Closing Meeting Final report and documentation submitted	July 2023

PROJECT ACTIVITIES

From March 1, 2023 through July 31, 2023, participants will be expected to:

Participate in the Medicolegal Death Investigation FHIR Implementation Collaborative (MDI FIC)

- a. Attend monthly synchronous virtual meetings, of approximately 90 minutes, led by technical assistance provider, GTRI, with the other selected MDI offices.
- b. Attend monthly virtual check-in meetings and/or office hours of approximately 30-60 minutes with technical assistance provider, GTRI, to verbally report on progress and challenges.
- c. Present learnings/accomplishments to peer MDI offices participating in MDI FIC.
- d. Utilize office hours with technical assistance provider for additional real-time support as needed.

Attend an In-Person Meeting for MDI FIC

- a. Designate at least two, and up to five people to attend a two-day, in-person meeting in Spring 2023 in Atlanta, GA for all selected MDI offices to be convened by a consultant in collaboration with CDC Foundation, CDC and the technical assistance provider, GTRI.

Provide Use Cases to Develop Data Flow Process Maps

- a. Provide site specific use cases and work with GTRI and/or other technical assistance provider to

identify and describe the current data flow process and identifying gaps to reaching the desired state.

Develop and Test FHIR and enhanced data sharing (API-enabled) for your MDI Office

- a. Spend at least 10 hours per month, on average, iteratively designing and testing FHIR and API based approaches to data sharing in real-world settings in a collaborative environment.
- b. Continuously modify, test and build data integration pathways in preparation for FHIR interoperability between MDI case management systems and identified data sharing partner and their data system (e.g. jurisdictional electronic death registration system (EDRS), toxicology and other laboratory information management systems (LIMS), and ancillary workflows whose systems have the capability of utilizing FHIR);
- c. Conduct testing and implementation of [MDI FHIR Implementation Guide](#).

PROJECT DELIVERABLES

1. Submit project documentation

- a. Provide use case(s) to support creation of process maps for data flows between MDI offices and data share partners.
- b. Create a six-month action plan for future sustainability upon funding sunset. This may list partners, roles, activities, timelines and benchmarks.

2. Complete reporting and dissemination activities

- a. Provide feedback on the structure, activities and technical assistance provided in MDI FIC to improve format and effectiveness for future efforts (template to be provided).
- b. Document accomplishments, barriers and lessons learned in a final report (template to be provided).

SKILLS AND QUALIFICATIONS

Eligibility Criteria

- Confirmation of being headquartered in US
- Confirmation of being in good financial standing/having sustainable operations
- Governmental entity
- MDI affiliation (e.g. Agency with the authority to perform medicolegal death investigations (MDIs) or is a public agency/organization that provides regionalized integration of C/ME Offices)
- Use of MDI electronic CMS, either commercial or internally developed (For background see: <https://forensiccoe.org/electronic-case-management-system-mdi/>).

Respondents to this Request for Applications (RFA) that are found to be technically capable will be evaluated and scored according to the evaluation criteria listed in the RFA. Up to 10 sites will be invited to contract.

RFA TIMELINE

The timeline below is subject to change at the sole discretion of the CDC Foundation:

RFA Released	January 11, 2023
Deadline for Respondents' Inquiries	January 19, 2023, 11:59 pm ET
Release of Responses to Respondents' Inquiries via Supplement	January 26, 2023
Proposal Submission Deadline	February 6, 2023, 11:59 pm ET

Selection Notification	February 13, 2023
Effective Date of Resulting Agreement	March 15, 2023

MAXIMUM PAYABLE AMOUNT

CDC Foundation will pay the contractor a fee not to exceed a Maximum Payable Amount (MPA) of \$100,000 or the ceiling price. The MPA will be based on the fee proposed and awarded and will be negotiated as part of the resulting contract.

Selected sites may use the funding for staff, consultants, MDI electronic CMS enhancements, funding support of data sharing partner, other data infrastructure modernization needs, training and travel and accommodations required to participate in the project activities. A sample budget/budget template is provided.

TYPE OF CONTRACT

The CDC Foundation anticipates awarding a Fixed Price/Deliverables agreement with a payment schedule. CDC Foundation reserves the right to change the method of payment. An invoice template will be provided after the contract is awarded.

REQUESTED INFORMATION

Applicants will be required to submit an online application, using the following URL: [Application](#). **Please note, the SmartSheet online form and attachments must be completed in one session.**

The application will request the following information:

- Confirmation of being headquartered in US and a government entity
- Confirmation of being in good financial standing/having sustainable operations
- MDI affiliation
- Description of MDI electronic CMS which can be either a commercial off-the-shelf product or internally developed
- Legal Organization Name
- Abbreviated Name, if applicable
- Street Address, City, State, Zip Code
- Year Established
- Primary Point of Contact: Name, Title, Organization, Email address, Phone number
- Data Universal Number System (DUNS) number (if applicable)
- Federal Tax Identification (ID) Number/Employer Identification Number (EIN)
- Number of Employees

Required Attachments

Applicants should upload the following required attachments to the online form.

- Appendix A – Application
- Appendix B – Budget and Budget Narrative
 - See the enclosed required template.
- Appendix C – Letters of Support
 - Authorized letter of organizational support for participation in the project. This should be from the Chief of the Office.
 - Letter from electronic CMS commercial vendor or IT staff of internally developed

CMS.

- Appendix D – List of Key Personnel; Curriculum Vitae (CV) or Resumes
 - List the names and titles of staff/consultants participating in the project activities.
 - Resume/CV for project personnel.
- Appendix E – Financial Statements
 - Audited financial statements or most recent balance sheet or any other documentation available to assess your financial standing.
- Optional Appendices –
 - Letters of support from data sharing partner
 - Demonstration of existing readiness and capacity e.g. data flow maps or sample work products of previous data integration efforts

INSTRUCTIONS

Applications should be submitted to the CDC Foundation online, using the following URL: [Application](#) by **11:59 pm ET on February 6, 2023**. Submissions will be evaluated based on the criteria listed below.

EVALUATION CRITERIA

The MDI FIC is designed for MDI offices that have the capacity, infrastructure and data systems to begin the project immediately. The CDC Foundation will select a diverse group of MDI offices including medical examiner and coroner offices that use different electronic CMS. Each response will be evaluated and given a rating of *Technically Capable* or *Not Technically Capable* with consideration for the following factors:

Domain	Selection Criteria
Technical	<ul style="list-style-type: none">• Appropriate CMS support demonstrated• Ability to accept and administer funding
Weight: 30%	
Organizational Capacity	<ul style="list-style-type: none">• Authorized Letters of Support• Appropriate staffing plan• Commitment to attend in-person and virtual meetings
Weight: 40%	
Budget	<ul style="list-style-type: none">• Cost Effective and detailed budget of costs related to FHIR implementation
Weight: 10%	
Readiness/Previous Experience	<ul style="list-style-type: none">• Well-articulated use case• Demonstrated willingness to support FHIR from selected data sharing partner and/or Previous FHIR or data modernization experience
Weights: 20%	

COMMUNICATIONS DURING THE RFA PERIOD

The CDC Foundation will accept questions regarding the RFA until **January 19, 2023, 11:59 pm ET**, upon which time responses will be prepared for all applicants. Responses will be provided by January 27 2023, 11:59 pm ET. Please submit questions by, using the following URL: [Questions](#). Please contact

mdi_datasystems@cdcfoundation.org if you have trouble accessing or submitting. The CDC Foundation will notify the candidate directly if they are selected by February 13, 2023.

**The CDC Foundation will not provide debrief sessions for those not awarded.*

PERFORMANCE MONITORING

The performance will be monitored in line with the agreed project plan. Contract deliverables will be monitored by the project manager via monthly check-ins at the program outset until a decreased or change in cadence is warranted. Mutually agreed upon timelines, expectations and estimated costs will be established at the outset with the contractor. The contractor will be expected to collaborate closely with the CDC Foundation, the CDC and other CDC Foundation contractors working on this project. Furthermore, regular reviews/coordination, as agreed, will be undertaken, as work progresses.

FUNDING SOURCE

The resulting award will be supported, entirely or in part, by Federal funding through a Cooperative Agreement between the CDC Foundation and the Centers for Disease Control and Prevention (CDC-RFA-OT18-18020501SUPP22). The CDC Foundation anticipates the award will meet the criteria of "contractor" as defined by 2 CFR 200.331. A final determination will be made at the time of award.