

RFI Section/Topic	RFI Question	DDS Response
1. General	Can DDS clarify whether information provided by vendors may be redacted and/or marked as confidential / proprietary? That will help us understand the level of detail we can provide within our response.	Everything included in your submission is subject to disclosure in Public Records Act requests. For example, even if redacted information or information marked confidential or proprietary is included along unredacted or unmarked information, the unredacted or unmarked information will still be included in Public Records Act requests. Therefore, how much you want to share is at your discretion.
2. Application Architecture ID 4, Workbook	Please clarify what is meant by "under load". What is the expected "under load"?	"Under load" refers to the system response time based on specific workload, peak users, concurrent processes, user requests, etc., showing the performance metric and how it scales without degradation. The design needs to be discussed how to scale with options, such as managed streaming services, event-driven architecture, data lakes, etc. Load capacities will be defined in the Request for Proposal (RFP).
3. Security & Compliance ID 1, Workbook	Data encryption: is the expectation to encrypt data sent between integrated systems (e.g. to/from SANDIS, to/from UFS) and/or when communicated to front-end user and/or when shared with your consumers, providers, regional centers?	Yes, we expect a secure environment. PMs to review Non-functional requirements for security requirements and will add that language here, if it answers the questions.
4. Security & Compliance ID 1, Workbook	Data deidentification: is the expectation to restrict access/visibility to records and/or data within records for front end users based on their business role? Please give some common examples.	Yes, the expectation is to restrict access/visibility to records and/or data with records for front end users based on their business role. The solution must provide configurable role-based data visibility for full view, masked view, no view, and temporary "click-to-reveal" access. Additionally, expectation is for the solution to provide similar role-based access/visibility to records and data in analytical and reporting features. Ex: a user is viewing a client record's identifiers. The system should mask the social security numbers from view unless the user specifically clicks-to-reveal.
5. Existing System Overview, RFI	Is DDS looking to off-board from any of the existing systems (e.g. SANDIS, UFS, eBilling)?	Yes, DDS is looking at replacing all existing systems outlined in the RFI.
6. LOIS Project Future Conceptual Functional Overview, RFI	Is the expectation that the future system will provide new internal and external user interfaces suited for each user type?	Yes.
7. LOIS Project Future Conceptual Functional Overview, RFI	What is the preferred future system: cloud vs on-premise vs hybrid?	The preference is cloud.

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8. Purpose of this Request for Information (RFI)	How does DDS view the role of LLM and AI in improving service outcomes and operational efficiency for the user types specified?	The DDS core infrastructure should be flexible and able to use LLM as needed and according to different personas. The application and data layer should be decoupled to design Agentic AI and Model Context Protocol (MCP).
9. Purpose of this Request for Information (RFI)	What accessibility and equity considerations are most important for DDS in selecting a solution (multi-lingual support, compliance with WCAG/Section 508, or inclusive design for individuals and families, etc.)?	DDS is considering all the examples mentioned with equal importance.
10. Existing System Overview, RFI	What is the expected Data retention policy?	Data retention policies have not been determined and will be outlined in the RFP.
11. Architecture Diagrams, RFI	Is DDS expecting any Document Processing to be implemented?	Yes. Document processing is an important component to case and financial management to decrease staff workload. DDS would like to see all options available.
12. Existing System Overview, RFI	In the referenced webpage, https://www.dds.ca.gov/general/hipaa/ , the ICD codes are ICD-9-CM. Is DDS planning to move to the latest ICD version? ICD-11	Yes, DDS will need to migrate to the most current version but will need a crosswalk to the older ICD versions.
13. General	We are appreciative of the questions defined by DDS in the RFI and have limited questions in response but would appreciate it if the state open to a redacted version of the RFI response for PRA requests? This is in addition to an unredacted version for DDS's internal review.	Everything included in your submission is subject to disclosure in Public Records Act requests. For example, even if redacted information or information marked confidential or proprietary is included along unredacted or unmarked information, the unredacted or unmarked information will still be included in Public Records Act requests. Therefore, how much you want to share is at your discretion.
14. Trust Account Management Page 8 of 17 (SOF)	Does the trust account management described apply to self-directed services? Can the state provide some additional clarification where and how those are managed? Will this be part of LOIS?	Yes, the trust account management described applies to self-directed services and all individuals with trust accounts.
15. General	Is there a Budget that has been set for the LOIS Project? If so, has this already gone through the BCP project yet? Or when does DDS expect to get the Legislative budget approval for this?	No implementation budget has been set at this point. The LOIS project has approved planning BCPs through the current State Fiscal Year.
16. General	Would DDS please provide the current annual costs for each of the modules being replaced through LOIS?	No.

RFI Section/Topic	RFI Question	DDS Response
17. Table 4, Page 13	<p>The cloud bubble notes that multiple products would be rolled out iteratively.</p> <p>Does DDS expect that LOIS would be made up of multiple vendors with best-in-class products that would integrate with each other?</p> <p>Or does DDS expect to have one vendor provide all solutions for the project?</p>	DDS intends to release a single RFP with a single prime vendor that may include sub-vendors, based on the needs of the prime. DDS acknowledges that more than one solution may be needed to meet the scope of LOIS. DDS is looking for best of breed solution(s) with the least amount of customization.
18. Table 4, Page 13	<p>If DDS is looking for a single vendor, are you open to companies creating partnerships and providing the State an integrated platform?</p> <p>Do you expect this partnership to be presented in our response to this RFI?</p>	This information is not being requested in this RFI. DDS does not expect the partnership to be presented in the response in this RFI. However, if the vendor has industry insights to share regarding partnerships and what is technologically feasible, please include that information.
19. Table 4, Page 13	Would DDS please provide a list of bidders who responded to the 2023 RFI for CERMS/UFSM with a note which of the solutions they responded to?	This information is not applicable to the RFI.
20. Tables 2 and 4, Page 11 and 13	<p>Will the RC's be expected to utilize LOIS for all aspects of their business (case management, etc.)?</p> <p>Or will they only use certain aspects of LOIS, what will those be? What integration would need to occur with the RC's current systems?</p>	Utilization will be defined through the functional and non-functional requirements in the Request for Proposal (RFP).
21. Table 4, Page 13	Would DDS confirm that CRS will be replaced during the LOIS project?	The expectation is that the DDS use of CRS will be replaced during the LOIS.
22. Section 10, Existing Systems, pages 15-17	<p>Would DDS please further define what "Active Users" and "Active Individuals in the System" refer to?</p> <p>For budgetary estimates we would need to know both the number of total system users and the estimated number of concurrent users.</p>	<p>Active Users: Number of users in the system concurrently.</p> <p>Active Individuals in the System: Number of active records in the system.</p> <p>Note: All user and individual counts are approximate and provided for planning and estimation purposes. More details will be provided in the RFP.</p>
23. HCBS Overview, Page 8	<p>Can DDS share the expected data migration requirements for LOIS, as there are many legacy systems?</p> <p>It would be helpful to understand how many databases, their sizes and the expected number of unique fields to be migrated.</p>	DDS anticipates that data will be migrated from the DDS data warehouse. More information will be included in the LOIS RFP.

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24. Section 10, Existing Systems, pages 15-17	<p>There is a risk management database (RMD) that is listed but doesn't appear in the diagram tables. Is RMD being replaced by LOIS?</p> <p>Are there any systems in Section 10 which are not being replaced?</p>	<p>Yes, DDS anticipates that the RMD will be replaced by LOIS.</p> <p>The diagram tables are conceptual and do not include every system in use.</p> <p>The exact systems that may be replaced by LOIS will be defined through the functional and non-functional requirements in the RFP.</p>
25. General	This RFI appears to be very technical in nature; focused to a solution that would be custom coded for DDS vs a SaaS/COTS type of solution. Is DDS leaning towards having a custom solution built for LOIS?	DDS is not leaning towards a custom solution for LOIS. DDS is looking for best of breed solution(s) with the least amount of customization.
26. General	<ul style="list-style-type: none"> • What is the anticipated timetable for the LOIS solicitation process? • Are there plans for any further RFIs? • Will there be any discussions with bidders? • When is an RFP anticipated to be released? 	<ul style="list-style-type: none"> • DDS plans to release the solicitation in Fiscal Year 26/27. • No plans for further RFIs. • Upon receiving responses to the RFI, DDS may reach out to vendors for additional information. • DDS anticipates releasing an RFP in Fiscal Year 26/27.
27. Data Warehouse Integrations and Medallion Architecture	What are DDS's preferred data extraction mechanisms for the enterprise data warehouse (API-based, ETL processes, event streaming, or a combination)?	It depends on the application modules and data exchange services through the API hub (API-first) and ETL, streaming services, etc.
28. Data Warehouse Integrations and Medallion Architecture	What are the timeliness requirements for data synchronization between the solution and DDS's data warehouse (real-time, near-real-time, batch, or scheduled intervals)?	Primarily, DDS would expect near real-time but may consider batch or scheduled intervals under certain situations. We will require integration with message queues for synchronous and asynchronous transactions with no loss of data and latency limitations that negatively impact our data processing transactions and communications.

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29. Data Warehouse Integrations and Medallion Architecture	How should the Medallion architecture layers (Bronze, Silver, Gold) be implemented? What are the specific data transformation and cleansing requirements for each layer?	<p>DDS is implementing a Medallion architecture. Our expectation is that the solution will be able to integrate with the architecture with both import and export data transmission. DDS expects the system to support querying specific layers (Bronze for raw, Silver for cleaned, and Gold for business-ready data) through standard data connectors and APIs.</p> <p>Application and data layers should be decoupled. The vendor solution needs to support data ingestion and transformation through API integration with DDS infrastructure and other hybrid options (ETL, streaming). However, we would expect data cleansing at the source of the application (left-first strategy) modules before ingesting data through the medallion layers. We would expect the vendor to provide a rule-based engine for business transformation and API hub to integrate with existing DDS infrastructure.</p>
30. Data Warehouse Integrations and Medallion Architecture	What are the preferred data formats and schemas for data warehouse integration?	Data that is integrated with the data warehouse should use open standards (non-proprietary, specific to a vendor-created format), such as JSON and parquet to send the data to the DDS environment. Data supports various types of content, including structured and unstructured data. We would expect the vendor to provide a unified data model or a common data model (such as OMOP, depending on the products), specific to vendor solutions.
31. Data Warehouse Integrations and Medallion Architecture	Are there existing data warehouse integration patterns or standards that the solution should follow?	Yes, the solution should adhere to DDS standards with Medallion architecture, utilizing data and API-first methodologies based on use cases. Vendor should apply left-first strategy at the application layers of vendor solutions to clean up data before processing through DDS data ingestion layer. The DDS Data Warehouse/Gold layer will store analytics content to provide a self-service and unified dashboard across applications, serving as the single source of truth. The Vendor should provide a solution for a unified dashboard across all applications.
32. Data Warehouse Integrations and Medallion Architecture	What are the data volume expectations and throughput requirements for data warehouse integration?	Supporting regional centers and various integrations from a centralized solution will require thoughtful design to scale and perform in near real-time. We would expect the vendor to provide benchmarks and explain how modules will scale.

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33. Data Warehouse Integrations and Medallion Architecture	Does DDS require OMOP (Observational Medical Outcomes Partnership Common Data Model) format support for observational health data research and analytics? If so, what are the specific OMOP transformation requirements, data elements, and research use cases that must be supported?	While certain State-Operated Facilities capture limited clinical information to support care delivery, LOIS is not intended to function as an EHR or research platform. Therefore, adoption of OMOP or similar research-oriented common data models is not required.
34. DDS LLM and agents integration	What are the specific technical requirements for integrating with DDS's LLM and Agents systems, including preferred integration patterns (API-based, event-driven, or hybrid)?	At a high level, AWS Bedrock and other LLM APIs will be needed to access LLMs; however, integrating Agentic AI and MCP will be required to build common reusable API/Python frameworks. Additional information will be provided in the RFP.
35. DDS LLM and agents integration	What data boundaries and access controls should be implemented for LLM and Agents integration to ensure appropriate data privacy and security?	In most cases, Application and Data agentic AI need to be decoupled. Guardrails must be implemented. Additional information will be provided in the RFP.
36. DDS LLM and agents integration	What metadata and semantic structure requirements exist for LLM integration to ensure proper data understanding and context?	DDS has a semantic metadata layer (using AWS and 3 rd party tools) that will serve as a central repository for metadata management. The solution needs to be discussed with the vendor. Additional information will be provided in the RFP.
37. DDS LLM and agents integration	Are there specific GenAI guardrails, model data boundaries, or AI privacy controls that must be implemented?	Guardrails are in accordance with the responsible AI policy and NIST risk assessment standards. As a reference, the NIST Artificial Intelligence Risk Management Framework is available here: Artificial Intelligence Risk Management Framework (AI RMF 1.0) Please refer to the CA State policies, such as the SAM and SIMM. - SAM 4986 - 4986.13 includes AI guidance - GenAI Risk Assessments (SIMM 5305-F and SIMM 150) Additional information will be provided in the RFP.
38. DDS LLM and agents integration	What are the use cases and functional requirements for AI/LLM integration (e.g., case triage, analytics, chatbot assistance, intelligent automation)?	It's broad to provide details here with use cases and requirements. Use cases will vary, depending on the specific applications and modules. At a high level, vendor solutions would provide building and/or integration with chatbot, agentic AI automation, etc. Use cases and functional requirements will be provided in the RFP.
39. Compliance Standards and Implementation	What are the specific compliance standard requirements that must be implemented (HCPCS, ICD-10-CM, DSM-V, AAIDD SIS, DABS, National Core Indicators, CMS/Medicaid reporting)?	It has not been determined if all the listed standards will be mandatory requirements. DDS is looking to get a better understanding of the standards that can be met out of the box. The specific compliance standard requirements will be defined in the RFP.

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40. Compliance Standards and Implementation	Are there California-specific compliance requirements beyond federal standards that must be addressed?	California State Administrative Manual (SAM) Section 5300 and California Department of Technology (CDT) and Department of General Services (DGS) General Provisions for IT Goods and Services (GSPD-401IT); Statewide Cloud Computing Policy (SIMM 5305-A)
41. Compliance Standards and Implementation	What are the specific reporting formats, schedules, and submission processes for compliance reporting, and are there existing compliance validation processes or tools that the solution should integrate with?	This will be defined in the RFP.
42. Compliance Standards and Implementation	What are the accessibility requirements beyond Section 504 of the federal Rehabilitation Act that must be implemented?	Accessibility requirements beyond Section 504 are included in the Lanterman Act. https://www.dds.ca.gov/transparency/laws-regulations/lanterman-act-and-related-laws/ DDS must comply with Section 508 of the Rehabilitation Act (29 U.S.C. 794d) by conforming to the Web Content Accessibility Guidelines (WCAG) 2.2 Level AA.
43. Compliance Standards and Implementation	What multi-lingual access capabilities are required, and which languages must be supported?	DDS must provide multilingual user interfaces and translated content in all threshold languages required by the State of California, as defined by CalHHS Language Access Policy and the Department Language Access Plan, with English as the default.
44. Deployment and Repository Access	What are DDS's preferred deployment processes, approval workflows, security requirements, and environment configurations (development, staging, production) for code deployments?	DDS uses Azure DevOps (Git) with role-based access controls. Developers work in feature branches, which are merged into release branches after code review. Merging triggers the CI/CD pipeline, deploying first to staging and then to production. The main branch always reflects production code. Code reviews, automated checks, and clear commit messages ensure quality, and documentation is updated for major changes.

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45. Deployment and Repository Access	What are DDS's code repository requirements, standards, and access requirements (e.g., branching strategies, commit message formats, code review processes, repository structure, version control workflows, documentation standards)?	DDS uses Azure DevOps (Azure Repos + Pipelines) with Git. Repositories follow protected branch policies (PR-only to main/release, required reviewers, build validation, and linked work items). Short-lived feature branches are standard, with trunk-based development preferred. Commits/PRs must reference a work item, code reviews are required, and no secrets are stored in code. Repos include basic documentation (README, deployment/runbook, and architecture notes).
46. Deployment and Repository Access	What are the requirements for deployment slot management and blue-green deployment strategies?	DDS deployments are managed through an Azure DevOps CI/CD pipeline with defined stages and approval gates. The code moves sequentially from development to staging and then production, with automated checks and approvals ensuring quality. At this stage, there is no need for blue-green deployments or parallel environments that can be discussed later.
47. Performance and SLA Requirements	What are the specific SLA definitions required for uptime, latency, and throughput?	SLAs will be defined in the RFP.
48. Performance and SLA Requirements	What are the performance benchmarks, stress-test requirements, expected user volumes, concurrent user requirements, peak load characteristics, and acceptable response time targets for different types of operations (transactional, reporting, analytics)?	This information will be defined in the RFP.
49. AI strategy alignment and use case prioritization	What is DDS's AI strategy and roadmap, and how should the solution align with it?	DDS's AI strategy focuses on practical, use-case driven applications to improve efficiency and decision-making. Solutions must align with the use cases, integrate with AI workflows, and be designed for future growth and enhancements.
50. AI strategy alignment and use case prioritization	What are the prioritized AI use cases and their functional requirements?	DDS focuses on AI use cases that improve efficiency, knowledge access, and legislative analysis. The AI agents are integrated through a coordinated workflow that ensures scalability, security, and compliance. Use cases will be defined in the RFP.
51. AI strategy alignment and use case prioritization	What are the specific AI/GenAI features and capabilities that DDS requires in the solution, including analytics enablement, metadata catalog implementation, semantic structure alignment, and data model design considerations for LLM integration?	DDS requires an AI/GenAI solution that is secure, scalable, and easy to integrate with LLMs and MCP. It should support analytics, organized data management, semantic consistency, and modular design, while meeting security, compliance, and extensibility standards.
52. AI strategy alignment and use case prioritization	Are there specific AI model requirements, frameworks, or technologies that must be supported?	DDS requires AI solutions that are flexible and model-independent. The solution should support multiple frameworks, such as allowing easy integration with AI smart workflows (e.g., using MCP, model context protocol), and track model usage for transparency, accuracy, and reliability. As AI is a rapidly changing field, the vendor should stay up-to-date with model integration and Agentic AI capabilities.

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53. AI strategy alignment and use case prioritization	What are the data requirements and quality standards for AI/ML model training and inference?	DDS requires that all AI/ML data be of high quality, well-governed, and secure with robust guardrails in place. Data must be accurate, clean, traceable, relevant, and monitored to ensure reliable, compliant, and unbiased model outputs.
54. AI strategy alignment and use case prioritization	What are the governance and oversight requirements for AI/GenAI implementations?	DDS ensures AI/ML solutions have usage monitoring, audit logging, and compliance with security and privacy rules. Quality, fairness, and safety are maintained through guardrails, reviews, approvals, and bias checks.
55. Monitoring and Alerting	What notification groups, escalation paths, and alert routing requirements does DDS require for the alerting and incident management system?	These requirements will be defined in the RFP.
56. Scope and Vision Clarification	Which LOIS functional areas (intake, case management, financials, service delivery, analytics) are of highest?	All the functionalities mentioned are high priority and will be discussed during the RFP. We will work with the System Integrator to develop a roll-out strategy that best meets the needs of DDS, RCs and the System Integrator.
57. Section 1, Page 3	How will DDS be managing implementation? For example, in-house, relying on OTSI, or another option?	DDS will manage implementation in-house.
58. Section 9, Table 4, Page 14	Conceptually, does DDS see LOIS as one singular product/system (as implied by the single box) or as multiple products/systems (as implied by the speech bubble)?	DDS anticipates multiple products. However, if a vendor provides a single product that meets LOIS requirements, DDS will consider it.
59. Section 2, Page 3	Per the RFI, "DDS is also seeking information on implementation strategies for LOIS." However, most of the questions in the RFI and the workbook provided are geared towards recommended COTS/MOTS technology solutions. If DDS would also like information about implementation strategies through this RFI, could DDS provide more specifics about what information would be most useful to them in terms of implementation strategies? For example, would DDS like more information about agile technology modernization implementation strategies, integration of modular systems, or other services needed for implementation to consider in their project budget?	The RFI will be amended to remove this statement. The purpose of this RFI is to better understand learn how technology solutions could support both transactional and analytics needs across DDS, regional centers (RCs), and state operated facilities

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60. Section 8, Page 7	Given the current situation of "highly decentralized architecture with multiple duplicative systems," we assume the goal of a more centralized, coherent ecosystem will also need a more centralized user management system with high levels of identity and authentication assurance. Can DDS clarify whether it is also seeking recommendations for user management?	Yes, DDS would like recommendations on user management.
61. Section 2, Page 3	We applaud DDS for conducting significant user engagement via town halls prior to releasing this RFI. In addition, DDS is specifically seeking information about "Which solutions are most likely to maximize user satisfaction, initially and over time." Would DDS be interested in getting recommendations through this RFI from vendors who provide consulting services on how DDS can ensure users are kept at the center of any technology implementation? Or is this RFI solely focused on getting information about existing hardware/software solutions to accomplish the project goals?	Yes, DDS is interested in getting recommendations from vendors on user-centered design. Yes, DDS is interested in getting information about solutions that can accomplish the project goals and align with the DDS future architecture.
62. Section 9, Table 2, Page 12	Has DDS determined which of the current functions/modules is in most need of replacement through the new LOIS platform and would likely be prioritized for implementation? If so, can DDS share that information?	All the functionalities mentioned are high priority and will be discussed during the RFP. DDS will work with the System Integrator to develop a roll-out strategy that best meets the needs of DDS, RCs and the System Integrator.
63.	Please specify what "recognized national standards" the new platform will need to meet, especially if the project will need federal approval and funding.	The project has approved enhanced federal funding from CMS for the project and anticipates that the RFP will include requirements stating the solution shall comply with the applicable federal conditions for enhanced funding at 42 CFR 433.112. Reference: eCFR :: 42 CFR 433.112 -- FFP for design, development, installation or enhancement of mechanized processing and information retrieval systems.
64. Table 4. LOIS Future Conceptual System Environment	Will regional centers be using their legacy systems in addition to the LOIS system or will all providers be required to use only the LOIS system?	Yes, Regional Centers will be required to use the LOIS system.
65. General	What, if any, data migration requirements exist?	DDS is currently cleaning up our data, defining data retention policies and what data will be migrated to the new system. Requirements will be defined in the RFP.
66. General	Given the business transformation and stakeholder impacts, does CA DDD have a plan and strategy around organizational change management?	DDS has a dedicated organizational change management team that is planning and executing organizational change management.

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67.	General	Is there anything you can share regarding next steps in your procurement process and the expected timeline to develop and award a contract for the LOIS system?	DDS is following the PAL process and currently in stage 2. DDS anticipates releasing an RFP in FY 2026/27.
68.	Table 4. LOIS Future Conceptual System Environment	Is DDS anticipating a phased implementation by regional center?	DDS does not have a specific implementation phasing. DDS is interested in vendor recommendations.
69.	Table 4. LOIS Future Conceptual System Environment	The RFP language states: "we currently anticipate multiple products rolled out iteratively". Should we take this to mean that the goal is to turn up site-by-site, or complete a component and roll it out across all sites?	DDS is interested in vendor recommendations.
70.	General	What role does DDS anticipate playing in setting the standards across each of the 21 regional centers?	DDS anticipates collaborating with the regional centers to create common standards.
71.	General	Has DDS budgeted this initiative in their FY'26 budget expectations? If so, can DDS share the budget for this implementation?	No implementation budget has been set at this point. The LOIS project has approved planning BCPs through the current State Fiscal Year.
72.		<p>The Vendor Solution Workbook appears tailored for software product vendors. As a system & business integrator, Protiviti's capabilities in solution design, integration, and program management may not fit neatly into this format. Would DDS allow us to submit supplemental materials or an alternative format alongside the Excel template, so we can fully demonstrate our strengths and experience?</p> <p>a. Is this intended to be a software procurement, services procurement, or both?</p>	<p>Department anticipates a "System Integrator" vendor "proposing" a complete solution comprising potentially multiple components or software products.</p> <p>The RFP when released will require a combination of services and products.</p>
73.		Will this be a single award contract to a Prime integrator?	Yes, this is the current procurement plan.

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74.	Does DDS intend to implement a single vendor technology or is DDS open to a multi-vendor, multi-product ecosystem?	<p>DDS anticipates multiple products. However, if a vendor provides a single product that meets LOIS requirements, DDS will consider it.</p> <p>DDS intends to release a single RFP with a single prime vendor that may include sub-vendors, based on the needs of the prime. DDS acknowledges that more than one product may be needed to meet the scope of LOIS.</p> <p>This information is not being requested in this RFI. DDS does not expect the partnership to be presented in the response in this RFI. However, if the vendor has industry insights to share regarding partnerships and what is technologically feasible, please include that information.</p>
75.	Does DDS have any constraints on implementation timeline (e.g., alignment with legislative cycles, sunset dates for legacy systems, expiring contracts, FFP requirements)?	The implementation timeline will be defined during the procurement phase.
76.	<p>For the existing systems listed (SANDIS, UFS, eBilling, ER2000, CRS, FPIBS, Therap, document management systems, etc.), can DDS indicate:</p> <p>a. Which systems LOIS is expected to replace vs. integrate with vs. coexist with long-term?</p>	DDS will be replacing all the systems outlined in the question. We will work with the System integrator to develop a roll-out strategy that best meets the needs of DDS, RCs and the System Integrator.
77.	<p>Regional Center Variability</p> <p>Given that 21 RCs currently maintain independent instances of SANDIS, UFS, and eBilling on their own IBM iSeries systems, can DDS describe:</p> <p>i. The degree of process variation across RCs that DDS expects LOIS to standardize vs. preserve.</p> <p>ii. Whether there are existing standard business process models or policy manuals that define the “target” way of working that LOIS should enable.</p>	DDS has developed high-level generalized workflows with the RCs. Where possible, DDS intends to modify our existing processes to align with the vendor's process flows to decrease configuration/customization. DDS expects the high-level workflows to be consistent, but the role-based access could vary by RC. These workflows will be described in the RFP and further modified with the vendor as user stories during implementation.

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78.	<p>Are there specific security standards or certifications DDS expects the LOIS solution and hosting environment to meet (e.g., FedRAMP equivalence, NIST 800-53, SOC 2, ISO 27001)?</p> <p>Are there any state-specific security requirements or architectural patterns (e.g., California State data center usage, state-mandated cloud providers) that vendors should assume?</p>	<p>California State Administrative Manal (SAM) Section 5300 and High Impact security controls identified by the National Institute of Standards and Technology (NIST) 800-53 Revision 5, Security and Privacy Controls for Information Systems and Organizations, Health Insurance Portability and Accountability Act (HIPAA), cloud environment that maintains an active Federal Risk and Authorization Management Program (FedRAMP) authorization at the High Impact Level or equivalent</p> <p>California Department of Technology (CDT) and Department of General Services (DGS) General Provisions for IT Goods and Services (GSPD-401IT); Statewide Cloud Computing Policy (SIMM 5305-A);</p>
79.	What is DDS' current cloud hosting environment?	AWS as a cloud ecosystem and Azure for DevOps and office products integration.
80.	Outside of the named IBM solutions, are there additional key solutions or providers for DDS' current system environment?	Please refer to Table: List of Existing Systems in Section 10 of the RFI.
81.	Can DDS clarify how it defines "Commercial Off-The-Shelf (COTS)" versus "Modified Off-The-Shelf (MOTS)" in the context of LOIS?	In the context of the California Department of Technology's (CDT) Project Approval Lifecycle (PAL), COTS refers to ready-made commercial products used "as is," while MOTS denotes those same products after they have been modified to meet specific organizational needs. See CDT guidance and SIMM 180 SOW Guidelines for additional details.
82.	Will DDS share how it plans to weight domain-specific capabilities versus generic platform flexibility in scoring at the RFP stage?	Method of scoring evaluation will be provided in the RFP.
83.	How does DDS define 'system of record' across core domains, e.g. person, case, provider, invoice, payment, etc. today?	DDS defines "system of record" as the system where the data originates, and the single source of truth will be the DDS Data Warehouse across various applications.
84.	If multiple COTS/MOTS products will be used, what expectations does DDS have for a unified enterprise data architecture (canonical models, shared IDs, common services)?	This will be discussed as part of the enterprise architecture with the application vendors and their solution. In general, it needs to integrate with DDS AWS ecosystem by unified representation of data and its relationships and dependencies, which include common data model, shared IDs, common frameworks, and microservices.
85.	Can you clarify if DDS has any preferred or required API paradigms (REST, GraphQL, gRPC) and governance practices that should be standardized across the various stakeholder group (HQ, 21 RCs, SOFs, providers, and public portal users)?	All the above and API-first will be the standard for integration with external groups. The design needs to be discussed, and Data Governance and AI Governance policies should be reviewed based on the proposed vendor solutions.
86.	Where does DDS envision event streaming (e.g., Kafka, Kinesis, Pub/Sub) for near-real-time propagation from transactional to analytical layers?	Event streaming is considered for real-time event processing instead of batch processing, depending on the use cases and requirements.

RFI Section/Topic	RFI Question	DDS Response
87.	What data quality rules currently exist, if any, to handle inconsistent standards across RCs/SOFs?	DDS anticipates that data will be cleaned up and migrated from the DDS data warehouse.
88.	Which safeguards for PHI/PII/waiver data (encryption, key management, tokenization, differential privacy, secure enclaves) are mandated or preferred?	California State Administrative Manual (SAM) Section 5300 and High Impact security controls identified by the National Institute of Standards and Technology (NIST) 800-53 Revision 5, Security and Privacy Controls for Information Systems and Organizations, Health Insurance Portability and Accountability Act (HIPAA), cloud environment that maintains an active Federal Risk and Authorization Management Program (FedRAMP) authorization at the High Impact Level or equivalent. California Department of Technology (CDT) and Department of General Services (DGS) General Provisions for IT Goods and Services (GSPD-401IT); Statewide Cloud Computing Policy (SIMM 5305-A). CMS has extensive privacy and security requirements, including annual and bi-annual penetration testing and security assessments. https://cmgov.github.io/CMCS-DSG-DSS-Certification/Conditions%20for%20Enhanced%20Funding/Security%20and%20Privacy/
89.	What data-access policies are needed to be defined and enforced across APIs, SQL endpoints, streams, and BI?	The data access policies should include Role-Based and Policy-Based access controls. This will be discussed as per vendor solutions.
90.	Which entities (person, provider, organization, service taxonomy, rates) does DDS want mastered first? Does DDS have a process to govern and manage golden-record survivorship across DDS, RCs, and SOFs	This will be discussed as per vendor solutions. DDS would expect a unified model to govern and manage golden records.
91.	What is DDS's preference for canonical IDs and matching (deterministic/probabilistic)? Is there a process in place today to identify and resolve ID conflicts across legacy sources?	This will be discussed as per vendor solutions. We are working on entity relationship and identity matching capabilities.
92.	What user experience does DDS envision for a data catalog (business definitions, quality SLAs, lineage)? Is it DDS' intention to have datasets discoverable and trustworthy statewide for different user personas?	DDS plans to build a unified master catalogue across all applications and user personas. The Vendor needs to provide solutions for master data management and its integration.

RFI Section/Topic	RFI Question	DDS Response
93.	How does DDS want to manage multi-lingual content (including right-to-left scripts) and culturally appropriate terminology across case, billing, and portal experiences, e.g. should it be consistent in all use cases, or are there only certain use cases (e.g. public facing) where multi-lingual content is needed?	It depends on use cases and requirements for adaptability and unified UI. The content in any approved languages should be available as per the user's needs.
94.	Data Catalog & Metadata Management	DDS expects a searchable, interoperable, and unified data catalog across all applications.
95.	Integration Architecture	The Vendor should plan for various types of integration – near real-time, CDC, event streaming, and batch as per the requirements that will be defined in the RFP.
96.	Integration Architecture	API Hub will be a co-development integrating with existing APIs.
97.	Integration Architecture	The application data sources need to be decoupled from internal data layers. For example, the financial system and the case management system may have their own data storage (depending on the vendor solutions), which will be a raw source of data maintained by application solutions at their origin. The source transactional data created in the application will be integrated through API-first, ETL, or other methods. Certain master data files will be maintained in the DDS Data Warehouse and imported by the application as needed. Vendor solutions need to support a Federated data model through a data fabric layer rather than transmitting raw data into the DDS Data Warehouse unless needed for analytics or transactional purposes. Alternatively, a vendor solution could be in-house within the same DDS infrastructure. In this case, the data and application tiers will be managed internally but application and data will still be decoupled. The design needs to be discussed further with vendor and their capabilities.
98.	AI/GenAI Infrastructure	Yes, it depends on the use cases and PII/DDG (data de-identification) guidelines.

RFI Section/Topic	RFI Question	DDS Response
99. AI/GenAI Infrastructure	For AI capabilities within LOIS, should vendors plan to integrate with DDS-provided AI services, deliver AI capabilities within the LOIS solution, or both?	Yes, however, DDS intends to keep Application Agentic AI and Content Agentic AI decoupled, depending on the use cases.
100 Deployment Model & Data Ownership	The RFI states DDS seeks to 'retain full ownership of operational data.' To clarify deployment expectations: Should vendors assume that all LOIS infrastructure, including application control planes and data stores, must be deployed within DDS-owned AWS accounts? Or is vendor-managed infrastructure with contractual data ownership provisions acceptable?	The application-specific infrastructure could be vendor-managed with contractual data ownership provisions. In this case, the vendor application infrastructure must be integrated with the DDS AWS ecosystem through defined medallion architecture to synchronize data into the data warehouse. Another option is to host applications from the DDS AWS account. It depends on the vendor solutions. The final design needs to be discussed with the DDS team.
101 Deployment Model & Data Ownership	Given the 21 Regional Centers currently maintain separate system instances, what is the data governance model for a unified LOIS? Will RCs retain logical data separation? What data sharing restrictions between RCs must LOIS enforce? Will DDS establish centralized data stewardship?	LOIS will maintain a centralized data model with standards and business rules that all regional centers must comply with. There will be logical data separation so that each regional center staff only has access to their data based upon roles and responsibilities. DDS will establish centralized data stewardship. Requirements will be defined further in the RFP.
102 Deployment Model & Data Ownership	Should vendors assume that all data within the LOIS data layer must be stored in non-proprietary, open formats (e.g., Parquet, Iceberg, Delta Lake) that DDS can access and query independently of the vendor application?	Yes. All data should be accessible via API or the Data Fabric layer and ETL process, in acceptable non-proprietary, open formats.
103 Scope & Migration	Should vendors assume LOIS will fully replace the following systems, or will some continue operating with LOIS as an integration layer: SANDIS (21 RC instances), UFS (21 RC instances), eBilling, ER2000/AS400 (SOF), and FPIBS?	DDS will be replacing all the systems outlined in the question. We will work with the System integrator to develop a roll-out strategy that best meets the needs of DDS, RCs, and the System Integrator.
104 Scope & Migration	What is the expected migration approach for historical data from legacy systems, particularly SANDIS with approximately 2 million individual records? Is DDS expecting full historical migration, a defined look-back period, or read-only access to legacy data during transition?	DDS is currently cleaning up our data and developing our data retention policies. This includes what data can be deleted, what data can be archived and what data will be migrated to the new system. This information will be provided in the RFP.
105 Scope & Migration	FPIBS operates on ADABAS (30 files, 1,473 data elements). Are there specific constraints, modernization plans, or interface requirements for this mainframe-based system that vendors should account for?	FPIBS will be replaced by LOIS. The future solution will need to perform the federal financial participation reporting and paid-claim reporting to DHCS for each of the DDS's federal programs. We don't anticipate any interface requirements with existing internal mainframe-based systems.
106 Entity Resolution & Master Data	Does DDS have an existing Master Person Index (MPI) or entity resolution capability for linking individuals across the 21 Regional Centers and SOF systems? Should LOIS integrate with existing capabilities or provide this functionality?	Every individual has a Unique Client Identifier (UCI) that identifies them across the regional centers and SOF systems. LOIS should provide this functionality across DDS, regional centers, SOF, and related systems.

RFI Section/Topic	RFI Question	DDS Response
107 Entity Resolution & Master Data	What unique identifiers are currently used across systems (UCI, SSN, RC-specific IDs)? Is there a defined strategy for establishing authoritative individual records across the federated environment?	<p>Every individual has a Unique Client Identifier (UCI) that identifies them across the regional centers and SOF systems. Some SOFs also assign a unique identifier for the individuals residing at the facility, such as Porterville (PVL) identifier.</p> <p>However, SSN, Medi-Cal Benefits Identification Card (BIC), and other Federal identifiers may also be associated with a client.</p> <p>DDS is interested in vendor approaches to establishing authoritative individual records.</p>
108 Compliance & Standards	The RFI lists compliance with HCPCS, ICD-10-CM, DSM-V, AAIDD SIS, DABS, and National Core Indicators. Does DDS have existing code mapping tables or terminology services that vendors should integrate with, or is the expectation that LOIS will establish and maintain these mappings?	It has not been determined if all the listed standards will be mandatory requirements. DDS is looking to get a better understanding of the standards that can be met out of the box. The specific compliance standard requirements will be defined in the RFP.
109 Implementation Approach	Are there specific Regional Centers or SOF facilities identified as initial implementation sites, or will pilot scope be determined through vendor engagement?	Implementation approach has not been determined. DDS expects vendors to provide implementation approaches in their responses to the RFP.
110 Implementation Approach	What level of customization and configuration is expected at the Regional Center level? Should vendors plan to provide RC-specific customization, or will a standardized configuration apply across all 21 RCs?	DDS has developed high-level generalized workflows with the RCs. Where possible, DDS intends to modify our existing processes to align with the vendor's process flows to decrease configuration/customization. DDS expects the high-level workflow to be consistent, but the role-based access could vary by RC. These workflows will be described in the RFP and further modified with the vendor as user stories during implementation.
111 Intellectual Property & Portability	For any custom development or configuration performed as part of LOIS implementation, what are DDS's expectations regarding intellectual property ownership? Will custom code, configurations, and data models developed for LOIS be owned by DDS?	Ownership of custom software is addressed in standard contract language.
112 Intellectual Property & Portability	What are DDS's requirements for solution portability and exit strategy? Specifically, should vendors describe how DDS could transition away from the proposed solution, including data extraction, format standards, costs, and avoidance of proprietary lock-in?	DDS expects for solution portability and exit strategy to be defined during the RFP. DDS is interested in vendor approaches to solution portability and exit strategies.
113 Purpose of RFI	Does the agency have interest in cyber support?	In vendor response, define what is meant by cyber support and how this may benefit LOIS.

	RFI Section/Topic	RFI Question	DDS Response
114	List of Existing Systems /Existing System Overview	Who is the agency's current cloud provider?	Amazon AWS for the ecosystem, and Azure for DevOps and Office products.
115	List of Existing Systems /Existing System Overview	What is the current list of COTS licenses managed by the agency?	This information is not applicable to the RFI.