

## Change log: ID-01 Core Solution - 10 April 2026

Name	Date identified	Changes/Questions	Answers to suppliers
Request Purpose and scope and Interface description - new Solution and the existing VNA for Image Viewing (Sectra),	2026-03-26	In order to provide a qualified de-risked price for the integration between the new Solution and the existing VNA for Image Viewing (Sectra), we kindly request the following: Purpose and scope – What clinical functionality is required from the Sectra integration in the new Solution (e.g. can it be assumed that images are stored in the VNA by Sectra as the imaging system, and that the solution should use a DICOM assession number to access the image in a dedicated viewer)? Interface description – Please provide available technical documentation describing the current integration between COSMIC and Sectra, including integration method, authentication approach, and the Sectra products and versions in use.	Please see answer in document CL-31

<p>Request Purpose and scope and Interface description - new Solution and new Solution and MedRuc</p>	<p>2026-03-26</p>	<p>In order to provide a qualified and de-risked price for the integration between the new Solution and MedRuc, we kindly request the following: Purpose and scope – What billing functionality is required from the MedRuc integration, and which clinical events or data should trigger a billing transaction (e.g. registrations, procedures, diagnoses)? Interface description – Please provide available technical documentation describing the intended integration with MedRuc, including the expected data flow, interface method, and the version of MedRuc currently in use or planned. We note that the integration is listed as future and based on EDI with FHIR as a planned standard — Does that mean that EDI is currently supported. If so please specify how.</p>	<p>The Client does not require suppliers to assume or cost a specific integration approach for MedRuc as part of the current tender scope.</p> <p>At this stage, the Client does not have defined requirements regarding:</p> <ul style="list-style-type: none"> <li>•specific billing functionality to be supported</li> <li>•clinical events or data that would trigger billing transactions</li> <li>•detailed interface specifications for integration with MedRuc</li> </ul> <p>As such, no detailed documentation regarding data flows, interface methods, or versions of MedRuc can be provided at this time.</p> <p>Should integration with MedRuc become relevant, this will be addressed in collaboration with the selected Supplier during future phases of the programme.</p>
<p>Is Appendix 27 Unified Plan available in English?</p>	<p>2026-03-30</p>	<p>Does Appendix 27_Unified Plan.pdf" exist in English?</p>	<p>At this time, an English version of the appendix is not available. Appendix 27 Unified Plan is provided for background and contextual purposes only to support the supplier’s understanding of the overall roadmap and scope of the programme. Appendix 27 does not form part of the requirements that will be evaluated. Therefore, suppliers are not expected to rely on this appendix for the preparation of their proposal. The key elements relevant for the tender are described in the main tender documents and appendices that are provided in English. Any further clarification regarding the programme roadmap and scope contained in Appendix 27 will be addressed during the clarification phase with the selected Supplier.</p>

<p>Clarification on Sub-appendix 18D1 the cronicly ill patient with multiple conditions</p>	<p>2026-04-08</p>	<p>In the case in Sub-appendix 18D1 the Cronicly ill patient with multiple conditions under the section on pharmacy a step is described as follows: "Needs the ability to perform a one time repeat prescription for critical, well known medication". It is unclear to tenderer what is required by the pharmacist</p>	<p>According to Faroese law : <a href="https://logir.fo/Kunngerd/114-fra-02-12-2024-um-forskriftir-heilivagsbilegging-og-skamtlutan-av-heilivagi9">https://logir.fo/Kunngerd/114-fra-02-12-2024-um-forskriftir-heilivagsbilegging-og-skamtlutan-av-heilivagi9</a> and <a href="https://logir.fo/Anordning/1444-af-29-06-2021-om-ikrafttraeden-for-Faeroerne-af-forskellige-love-om-aendring-af-lov-70e(behandlingsfarmaceuter) stk.4, 2)">https://logir.fo/Anordning/1444-af-29-06-2021-om-ikrafttraeden-for-Faeroerne-af-forskellige-love-om-aendring-af-lov-70e(behandlingsfarmaceuter) stk.4, 2)</a>. Pharmacist can make a prescription for patients in stable treatment. In practice it means that the pharmacist shall be able to make a one-time renewal of an existing, expired prescription. This means that the patient in urgency cases can go directly to the pharmacy to get a new bulk of existing pharmaceutical treatment that the patient is in a stable treatment with, even though the prescription from the doctor is expired.</p>
<p>Clarification on Sub-appendix 18D1 the cronicly ill patient with multiple conditions</p>	<p>2026-04-08</p>	<p>The therapist needs to be able to see a status overview of the assistive devices assigned by the Hjálptólamiðstøðin (Assistive Devices Center). It is unclear whether some form of integration with that system is desired, assuming that a list could be exposed from there, or whether the requirement is simply to document all assigned assistive devices in the EHR (Electronic Patient Record) system for the patient in question.</p>	<p>There are no requirements on integration to Hjálptólamiðstøðini or on documentation of assigned assistive devices in the EHR, so the tenderer shall not make any detailed descriptions or prize it in the offer. The customer is however open to any proposals on how an overview of the assistive devices assigned by the Hjálptólamiðstøðin can be provide</p>