**Appendix B - Software Requirements**

Complete the chart **below** identifying the module(s)/functionality being provided. Put the name of the module (when applicable) and the version number under the appropriate column; i.e. fully integrated or a 3rd party solution that will be interfaced.

Example:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Module/Functionality** | **Name of Module and Version Proposed** | **What is your Current Version of Software** | **Is this a Core Module or an Add-On Module?** | **Is it Fully Integrated (yes/no)** | **3rd Party Interfaced Solution**  **(yes/no)** |
| Position Control | Position Control, Version 3.1 | 3.0 | Core | Yes | No |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Module/Functionality** | **Name of Module and Version Proposed** | **What is your Current Version of Software** | **Is this a Core Module or an Add-On Module?** | **Is it Fully Integrated (yes/no)** | **3rd Party Interfaced Solution**  **(yes/no)** |
| Queries and Reporting |  |  |  |  |  |
| Position Control |  |  |  |  |  |
| On-Boarding |  |  |  |  |  |
| Salary Management |  |  |  |  |  |
| Skills, Training and Certifications |  |  |  |  |  |
| General Human Resource Management |  |  |  |  |  |
| Benefit Administration |  |  |  |  |  |
| Leave of Absence / FMLA Management |  |  |  |  |  |
| Performance Management |  |  |  |  |  |
| Payroll |  |  |  |  |  |
| Disability Pay Program\* (Workers Comp supplemental pay) |  |  |  |  |  |
| Back-Pay Program\* |  |  |  |  |  |
| Provider Maintenance\* (Retiree / COBRA billing database) |  |  |  |  |  |
| Time & Attendance  Benefit Accrual |  |  |  |  |  |
| **Other Modules Required to Meet Functionality** |  |  |  |  |  |

\*If you have a module that is able to replace these custom applications for the MCC to consider, they should be noted both here and in the pricing document. Regardless of whether proposing a module for the custom applications, costs to interface to these modules must also be included.