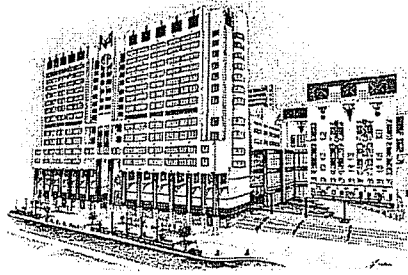


The Grady Memorial Hospital Corporation  
d/b/a

# GRADY HEALTH SYSTEM

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**Remarkable Service Exceptional Care**

**GRADY HEALTH SYSTEM**

**Resource Management**

**REQUEST FOR PROPOSAL**

**FOR**

**SEIMENS LEGACY  
ACCOUNT WORKDOWN**

**REQUEST FOR PROPOSAL NUMBER  
09025IM**

**Request for Proposal Posted: May 28, 2010  
Proposal Due: June 24, 2010 4:00 PM EST**

## **SECTION 1: GRADY HEALTH SYSTEM BACKGROUND**

Grady Health System (“GHS”) is the southeast’s largest public hospital system. With a delivery system that includes affiliations with public health organizations, medical education programs, and community advocates, GHS provides quality, cost-effective, and customer focused health care to residents of metropolitan Atlanta and citizens of the State of Georgia. Grady Health System is comprised of Grady Memorial Hospital (953 licensed beds), Crestview Rehabilitation and Nursing Facility (388 long-term care beds), the Infectious Disease Center, the Loughlin Radiation Oncology Center, the Maloof Imaging Center, eight (8) community health centers, the Regional Perinatal Center, the Regional Burn Center, the State of Georgia Poison Control Center, the Georgia Cancer Center of Excellence, Ambulance Services, and the Emergency Care Center offering the only Level I trauma care in the region.

Grady Memorial Hospital opened in 1892 to provide medical care for the indigent and emergency health care for all residents of the Atlanta community. Grady is currently operated by the Grady Memorial Hospital Corporation d/b/a Grady Health System.

Medical care is provided under contract with Emory University and Morehouse Schools of Medicine. GHS also operates three professional training programs in medical technology, radiation oncology, and radiation technology. GHS cares for over 30,000 inpatients and more than 800,000 outpatients annually, including over 95,000 emergency care visits (including psychiatric emergency). In addition, the ambulance service provides more than 84,000 trips per year.

## **SECTION 2: OVERVIEW, QUALIFICATIONS & EXPERTISE**

### **Project Overview**

Grady Health System is seeking the services of a qualified offeror that can provide dependable, efficient and effective procedures and services for the billing and collection from third-party payors for inpatient and outpatient accounts. These services will include the work down and resolution of third-party A/R with debit balances on the Siemens Invision Patient Accounting System, prior to, during and after GHS’ conversion to EPIC. Specific activities the selected vendor will be expected to perform include, but are not limited to, billing, re-billing, follow-up, administrative appeals, denial management, and under payment recovery. Vendor will be expected to resolve credit balances created on accounts after placement. Collection of balances due from the patient after payment from insurance is not included in the scope of this RFP.

GHS anticipates the placement of accounts will be according to the following schedule and parameters:

<u>Placement</u>	<u>Date</u>	<u>Parameter/Age</u>
• Initial placement	September 1, 2010	>150 days from discharge, all balances
• Second placement	November 1, 2010	>90 days from discharge, all balances
• Third placement	December 1, 2010	All balances <\$500
• Final placement	February 1, 2011	All remaining accounts

GHS understands that an organization’s operational centers may be located in several different geographic regions, and that certain support functions, such as system reconciliation and transactional activity, may be performed in an off-shore locale. All actions that specifically involve billing, re-billing, follow-up, appeals, denial management and under payment recovery, however, the Offeror must perform domestically.

### **Qualifications & Expertise**

Grady Health System requires that the successful Offeror exhibit the highest standards of integrity and work ethic (e.g. confidentiality, diligence and professionalism) and possess specialized experience in providing Extended Business Office operations including, but not limited to: Billing, Rebilling, Collection, Denial Management and

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Appeal processing, Contract Management, and Quality Assurance. Within all responses to this RFP, the Offeror will provide the following details:

1. Describe how the Offeror's experience meets the requirements of this Request for Proposal.
2. Provide your company's full legal name, corporate mailing address and phone number. Indicate whether you are a corporation, sole proprietorship or partnership and if you are a subsidiary of a parent company.
3. Describe your company history, including when it was founded, where it has operated, and any mergers or acquisitions. Include an estimated volume of collections.
4. Number of years working healthcare and key service offerings.
5. Please provide a listing of hospital customers and a description of the services your firm provides them. Please indicate if you have Georgia clients.
6. Disclose whether the proposing entity, or any shareholder, member, partner, or officer or employee thereof, is presently a party to any pending litigation or has received notice of any threatened litigation or claim directly or indirectly bearing on Grady Health System or the Grady Memorial Hospital Corporation. Has your organization or any of the staff ever been convicted of Medicare fraud or abuse?
7. Disclose whether the proposing entity, or any shareholder, member, partner, or officer or employee thereof, is presently has any business or personal relationship directly or indirectly with senior leadership at Grady Health System, members of the board or members of the Grady Memorial Hospital Corporation.
8. Describe how you ensure regulatory compliance within all of your functions. How are compliance issues reconciled, managed, controlled, and reported?
9. Please indicate where the work will be performed (e.g. city, state, and country).

Grady Health System shall make an assessment of each Offeror's response and whether in the opinion of GHS, the Offeror is capable of undertaking and completing the scope of work delineated within this RFP in a satisfactory and timely manner. GHS will award a contract only to a responsible Offeror that has the ability to successfully perform under the terms of this RFP.

### **SECTION 3: PROPOSAL EVALUATION, SELECTION PROCESS, AND SCHEDULE**

#### **SCHEDULE:**

**Questions Due: June 9, 2010, 12:00 Noon**

**Responses to Questions will be posted to the Grady Website by June 16, 2010**

**Response Due Date: June 24, 2010 at 4:00PM EST**

**\*Finalist(s) Presentation: TBD-If Required**

**\*Award Decision: TBD**

*\* Date(s) are subjected to change*

## **SECTION 4: SPECIFICATIONS / DESCRIPTION**

### **§ 4-A Scope of Services**

Grady Health System is seeking the services of a qualified Offeror that can provide dependable, efficient and effective procedures and services for billing, rebilling, and follow-up functions for third party receivables in a large trauma hospital. A snapshot of the A/R eligible for assignment as of May 25, 2010 is provided in Appendix A (EXCEL FILE).

#### **Staffing**

Offeror will provide all full time employee equivalents (FTEs) necessary to perform the functions outlined in the scope of services in a virtual capacity to GHS. GHS will only be able to accommodate a minimal number of clerical support onsite.

#### **Billing**

Offeror will conduct all necessary billing and re-billing functions associated with the assigned receivables from their system. This will include claim editing, and error resolution, as well as electronic and paper submission capabilities for primary, secondary and tertiary billing. Offeror will be required to conduct Payer claim reconciliation and rejection corrections. Offeror will coordinate claim corrective action with the appropriate department at GHS including, but not limited to Patient Access and Health Information Management.

#### **Follow-up and Appeals**

Offeror will perform all follow-up, appeals and documentation activities within their system. Offeror must maintain appropriate staffing and utilize electronic work-flow tools to enable timely follow-up to any and all unadjudicated accounts receivable. Work-flow processes must be able to track staff productivity and provide management reporting to GHS leadership.

#### **Denial Management**

Offeror will be required to track and report denial occurrence trends and recovery trends by payer and coordinate corrective action with the appropriate hospital department at GHS including, but not limited to clinical departments, as well as Patient Access and Health Information Management. As needed, Offeror will work on site with clinical departments to educate and develop processes to reduce and/or eliminate billing and payment denials.

#### **Contract Managements and Underpayment Recovery**

Offer must have the capability of performing financial modeling of the appropriate payments from contracted Third Party Payers and coordinate with Payers to verify appropriate payment of the claim in a manner consistent with the contracts or state regulations. Offeror will generate monthly detailed lists and the claim resolution for claims that were underpaid or overpaid claims. Offeror will be required to track and report payment variance occurrence trends monthly and recovery trends by payer.

#### **Quality Assurance/Compliance**

Offeror will have a quality assurance program to ensure that all billing and collection techniques are compliant with State and Federal collection industry regulations. The quality assurance program will include a documented process for measuring the quality of Business Office staff productivity and quality by employee by activity. This may include, but is not limited to: Random sampling of staff collection protocols and review of account documentation for appropriate, resolution-oriented actions.

#### **Reconciliation**

Offeror will conduct regular and rigorous reconciliations against GHS records to ensure complete placement of accounts assigned into vendor system and account balance accuracy.

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**Information Systems and Operational Support Services**

Offeror must be able to send, receive and utilize existing formats for electronic/automated account referrals and data transfer (including, but not limited to, 18D and 7M records). Offeror will ensure consistent, competent technological support is available to conduct all required Business Office processing and reporting from their systems. This would include monitoring system daily and monthly processes required to facilitate operational functions such as batch processing, claims production and standard reporting.

**§ 4-B Submission Guidelines**

In addition to items listed below, interested respondents are asked to submit documents and information as described fully in Appendix F: Required Content of Proposals.

Proposer(s) are asked to submit a response to the following:

1. Provide Company Profile.
2. Provide a complete overview of your Extended/Virtual Business Office operation services, including systems used, and billing and collections processes utilized, and hours of operation.
3. Provide five (5) reference(s) specifically indicating successful Extended/Virtual Business Office operational services for a comparable public Health System within the last five years.
4. Provide a schedule of fees. (Include options for both onshore/offshore.)
5. Provide an overview of the company's technology and percentage of business dedicated to healthcare-related billing/collections.
6. Provide background on the number of Siemens Invision hospital(s) serviced and a list of any known unresolved interface issues that your company has experienced working with Siemens hospitals.
7. Provide definition of the implementation or start-up procedures, resource requirements, task list of functions that are required with a timeline for implementation to achieve connectivity for this outsource.
8. Describe the process for staffing new client business specifically related to all Extended/Virtual Business Office functions outlined in this document.
9. Provide description of technology used to verify benefit eligibility with insurance payor, (i.e., Medicaid, Medicare or Commercial).
10. Provide a list of any automated capabilities for managing and auditing payments, such as the ability to audit Managed Care and Medicare payments for accuracy.
11. Provide an overview of follow-up methodology including staff productivity expectations. Describe in detail your approach for handling accounts with this type of engagement. Flowchart accounts by payer type and indicate your ability to customize the account flow to meet Grady's needs.
12. What tools and technology will you utilize to work the accounts described in this RFP? How is workflow prioritized for staff follow-up?
13. What are your key metrics used to measure performance?
14. Describe your approach to segmentation and how is it used to enhance performance.
15. Describe account documentation procedures.

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16. Provide an overview of your denial management and third party appeal process.
17. Provide description of how third party payment variances will be identified and pursued for resolution. Provide a sample of payment variance reporting.
18. Provide a description of any/all training programs for your employees related to Business Office functions, and State/Federal compliance regulations, including the minimal requirements and training frequency.
19. Provide information on historical recovery rates by payer for similar hospital systems.
20. Provide disclosure and specifics of any past services your firm provided to The Fulton-DeKalb Hospital Authority, or GHS.

**§ 4-C Documentation**

Offerors must provide documentation of the following in their proposal submission:

1. A project organization chart with supporting job descriptions and responsibilities, and a one page resume of each individuals providing project leadership, including the individuals that would be assigned to manage the day-to-day functions of the engagement.
2. Provide a sample job description for employees performing the billing, denial, appeal and collection functions. Include the average tenure of the associates in your organization, in general, and those who would be specifically assigned to this project.
3. Provide quality assurance policy for billing, claim correction and follow-up activity.
4. Construct a work matrix for assigned inventory that includes numbers/types of follow-up activity, a description of the process flow of account management, including decision points and escalation points.
5. The process of allocation of accounts to individual collectors within the organization. This should include production expectations and staffing assignments.
6. Provide a detailed description of weekly account reconciliation process for all assigned accounts.
7. Provider staffing plan for an on-site service representative.
8. A copy of the company's Compliance plan, name of the Compliance Officer and his/her biography.
9. Provide documentation of the invoicing process, especially as it relates to recoupment of payments on assigned accounts.

**Reporting**

1. Offeror will be responsible for ensuring all reporting is generated timely and accurately;
2. Offeror will provide an example of performance scorecards utilized to measure project performance.
3. List the name and frequency of the standard reports you will provide to the facility.
4. State your ability to run ad-hoc reports and provide customized reporting to the facility.
5. Please provide copies of your standard reporting package.

## **SECTION 5: EVALUATION CRITERIA AND PROCESS**

The selection of the awardee to be engaged by GHS to accomplish the aforementioned scope of work will be based on the following criteria that are utilized by the Technical Evaluation Team. The Technical Evaluation Team is comprised of members of the GHS staff.

### **§ 5-A Technical Proposal/Demonstrating An Understanding of the Services/Products Requested/Technical Modules**

Proposals submitted must demonstrate the capability to comply with all requirements and specifications contained in this RFP. Failure to demonstrate the ability to meet specifications may result in non-consideration.

### **§ 5-B Previous Experience On Projects of a Similar Nature/References**

GHS will review and evaluate the information submitted related to the scope of services and similar sized projects your firm has successfully completed in the past. Particular attention will be paid to the capability, quality, timeliness, cost controls and references.

### **§ 5-C Cost Proposal**

GHS will review and evaluate the overall costs in the proposal to determine if they are: (1) Realistic for the work to be performed; and (2) Consistent with various elements of the Proposer's scope of services/technical proposal.

### **§ 5-D Management Plan/Implementation/On Going Support**

GHS will review and evaluate an overview of the proposed project management team and plan. In this overview, please identify the consultants and other key staff who would be assigned to the project and involved in providing goods/services as specified in the RFP. Provide biographical data on these individuals, the roles that each will play, and indicate which senior level staff member(s) will represent your firm at meetings with GHS. It is also requested that you provide biographies of other key members in your firm whom you regard as key to the firm's governance or to a relationship with GHS. The Proposer shall also include an overview of its corporation which will include, but not be limited to a description of the corporation, length of time in business, market presence, financial stability, and a summary of the firms project management and control policies.

## **SECTION 6: REPRESENTATIONS AND INSTRUCTIONS**

### **§ 6-A Instructions, Conditions, and Notices to Proposers**

#### **§ 6-A-1 Response Guidelines**

The information required by this RFP is comprehensive and necessary for accurate Proposer selection. Please be concise with answers. Each applicable question must be answered. For questions deemed not applicable, please state "not applicable". The response to this RFP must be submitted **with one (1) original hard copy, two (2) CD's and four (4) printed copies of the proposal. Three (3) copies of the Cost Proposal must be submitted under a separate cover with the proposal. No faxed nor e-mail copies will be accepted.**

Proposals must be completed and returned in the same format. Your RFP response, in its entirety, will be included in the subsequent contract negotiated between GHS and the selected Proposer. All documents shall be submitted in a sealed container sufficient to protect and maintain the confidentiality of the contents and/or to indicate loss of confidentiality. Container must indicate this **RFP # 09025IM** and the name of the company submitting the proposal on the outside of the container. All responses to the RFP must be delivered to the Resource Management Department no later than **JUNE 24, 2010 by 4:00 PM EST.**

All forms in Appendices A, B and C must be signed by an officer of the firm having the authority to make such offers, verifying that the proposal is valid and will remain valid.

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Any cost incurred in the preparation and presentation of this response is to be absorbed by the Proposer. All documents submitted will become the property of GHS unless otherwise requested in writing by Proposer at the time of submission. Further, any materials submitted by Proposer that should be considered “CONFIDENTIAL” must be clearly marked as such. Submission of any materials, confidential or otherwise, will implicitly grant the right of use by the Corporation. All portions of the proposal that are not designated as confidential will become part of the public record immediately following an award. Documents designated as confidential will be treated as such to the extent permitted by law, including but not limited to the Georgia Open Records Act.

**§ 6-A-2 Submission Guidelines**

Bidders are forbidden to contact, directly or indirectly anyone other than the Grady Resource Management Department. Ivan Mann, CPPB, Resource Specialist is the sole point of contact for this RFP during the bid process. Contact with any person other than Ivan Mann is grounds for disqualification from this process. Bidders are also strictly forbidden to attempt to influence, through internal or external third party sources the outcome of this bid. Your submission of this RFP serves as your confirmation that you, your firm and anyone acting as an agent, representative or influencer on behalf of your firm has not engaged in any action that may be construed as an attempt to influence the outcome of this bid.

Failure to comply with any of the above stated guidelines may result in immediate disqualification. If you have any questions regarding this RFP, email or fax your questions /concerns to **Ivan L. Mann**, CPPB, Resource Specialist at [imann@gmh.edu](mailto:imann@gmh.edu), 404-616-8247.

**§6-A-3 RFP Terms and Conditions Posted on the Grady Website at the following address:**

**[www.gradyhealthsystem.org/vendors](http://www.gradyhealthsystem.org/vendors)**

Compliance with GHS terms and conditions are required for any Proposer selected to provide goods, equipment, or services by the awarding of any Request for Proposal.

**§ 6-A-4 RFP Completion Instructions**

**Acceptance of Proposer’s proposals:** GHS reserves the right to accept or reject any proposal, change these specifications or waive any formalities. Should it be necessary to modify an application to fulfill the needs of GHS, GHS will retain exclusive rights of ownership and use of all design documents, programs, and documentation developed. The proposals, as submitted, will be the basis for contract negotiations and will be included in any contract between GHS and the selected Proposer. Representations made within the proposals will be binding on responding Proposers. Proposer’s responses should be written in a concise and forthright manner. Proposers may be excluded from further consideration for failure to fully comply with the specifications of this RFP, including the failure to return ALL required documents, as well as, not using the forms and files as included. GHS will not be responsible for any costs associated with proposals as submitted.

**Proposer Selection:** GHS reserves the right to make an award based solely on the proposals as submitted, or any other basis, or to negotiate further with one or more Proposers. The Proposer(s) selected will be chosen on the basis of greatest benefit to GHS, as determined by GHS, and not necessarily on the basis of the lowest price. Award of a contract, if any, resulting from this RFP will be subject to the terms and conditions of GHS purchasing policies. Upon completion of the initial review and evaluation of the proposals, selected Proposers may be invited to participate in oral presentations.

**Full Right of Selection and Rejection:** The right to reject in its entirety or to select a Proposer providing other than the lowest cost product is reserved. GHS reserves the right to select and award, at its option, the runner-up’s Proposal in the event the selected offer for award or Proposer receiving the award, upon further review and solely in the opinion of GHS, fails to meet all qualifications or specifications or proves to be a selection not in the best interest of GHS.

**Proposal Open Record:** If a request to inspect the proposal, or any portion thereof, is made by a third party, GHS will endeavor to treat all materials requested to be kept confidential and non-disclosable to the extent provided by the Georgia Open Records Act. The Proposer understands that GHS may be subject to the provisions of such Act together with the Uniform Trade Secrets Act. GHS will endeavor to inform the Proposer of any third party request

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for disclosure of such information pursuant to the Georgia Open Records Act or as may be otherwise made to Grady Health System.

If the Proposer requests that such information be held confidential and not disclosed by GHS, the Proposer will assume the defense of such position, up to and including litigation, and will indemnify, save and hold harmless GHS, its officers and employees, from any expense, fees, costs or liability associated with such third party request or such litigation. If the Proposer does consider the proposal or any portion thereof to contain confidential information, it shall submit a letter on the Proposer's letterhead signed by the owner or Chief Executive Officer, requesting that GHS treat the proposal confidential and private information to the extent possible under Georgia law. Otherwise, the Proposer agrees that its' submission may be deemed as public information.

**Regulatory and Ethical Compliance:** No proposal shall be accepted from, and no contract will be awarded to, any person, firm or corporation that, within the past five years, has been found in non-compliance with Georgia statutes or the standards and rules set by the Ethics Commission of the State of Georgia. (<http://www.ethics.state.ga.us>).

Prior to any contract award, GHS will verify that the prospective Proposer's company, officers and/or principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from transactions by any Federal department or agency. This will be verified through the Office of Inspector General (OIG). If the Proposer and/or its principles appear on the OIG list, GHS reserves the right to reject the Proposer's proposal and refuse award of a contract.

**Notice of Award:** The notice of award is issued by the Resource Management Department. Unsuccessful Proposers shall be notified in writing, after award has been made.

## **SECTION 7: ECONOMIC OPPORTUNITY PLAN (EOP)**

It is an overall objective of Grady Memorial Hospital Corporation d/b/a Grady Health System (GHS) to encourage involvement by local, small, or economically disadvantaged contractors and suppliers in business activities generated by GHS, while assuring that such activities will be conducted in accordance with all applicable laws. It is the declared policy and intent of GHS to strive to maximize participation of local, small, or economically disadvantaged businesses through all business contracting opportunities. GHS is committed to ensuring that local, small, or economically disadvantaged businesses are given every opportunity to participate in contracting opportunities.

GHS prohibits discrimination on the basis of race, color, gender, religion, national origin, or disability in connection with employment of any person, or the award of any contract. GHS will provide equal opportunities without regard to race, color, gender, religion, national origin, or disability, by requiring that any vendor doing business with GHS provide equal opportunity to persons and businesses employed by, or contracting with the supplier of products and services to GHS.

The respondents must outline a plan of action to encourage and achieve participation by local, small or economically disadvantaged businesses as it relates to this RFP.

**Past Performance:** Proposer shall (1) summarize in writing its past performance for client healthcare institutions in actively fostering the participation of local, small or economically disadvantaged businesses utilized by the institution, (2) provide three (3) or more client references for this purpose for whom it has provided billing services within the past two (2) years, with the name, phone number and e-mail of a specific knowledgeable contact person for each such client reference.

**Present Commitment:** Proposer shall submit in writing its present commitment and business plan to facilitate and promote the participation of local, small or economically disadvantaged businesses. Specific, measurable performance criteria for this purpose shall be included in the Proposer's submission which, subject to negotiation and mutual consent, shall be included in the awarded contract as measurable requirements of vendor performance for the duration of the contract.



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*The Grady Memorial Hospital Corporation d/b/a Grady Health System*  
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**APPENDIX A: REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS OF PROPOSERS**  
**\*\*REQUIRED INPUT WITH SUBMISSION\*\***

**CERTIFICATION**

The undersigned certifies that he/she has read, understands, and agrees to be bound by the terms and conditions of the Request for Proposal (RFP #09025IM). The undersigned further certifies that he/she is legally authorized by the Proposer to make the statements and representations on this form, and that said statements and representations are true and accurate to the best of his/her knowledge and belief. The undersigned understands and agrees that if the Proposer makes any knowingly false statements, or if there is a failure of the successful Proposer (i.e., contractor) to implement any of the stated agreements, intentions, objectives, goals, and commitments set forth herein without the prior approval of GHS, then the Proposer's act or omission shall constitute a material breach of the contract. The right to terminate shall be in addition to and not in lieu of any other rights and remedies GHS may have for defaults under the contract. Additionally, the Proposer may be prohibited from obtaining future contracts awarded by GHS. GHS reserves the right to terminate any contract where a material breach has occurred.

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_

**FACSIMILE:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

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(SIGNATURE)

---

(DATE)

*The Grady Memorial Hospital Corporation d/b/a Grady Health System  
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**APPENDIX B: COST PROPOSAL**

- Give pricing on the proposed scope of services, based on the information given and vendor's intended delivery. (Include options for both on –shore/off-shore.)
- Describe any value-added services that are included in the pricing, but beyond scope of RFP

Three (3) copies of the cost proposal must be submitted under a separate cover with your proposal.

**RFP #09025IM**

**Please Note:**

Proposer's Name: \_\_\_\_\_

Total contract value for ALL requirements, including G & A\*: \_\_\_\_\_ \*\*

\*G&A: All general and administrative costs, profits, travel, per diem, and ALL costs associated with this contract.

\*\*This figure is the figure that will be used in the evaluation. \_\_\_\_\_

Where there is reference in the RFP to deliverables, submission requirements, or other response and contract performance discussions, said reference may not include all requirements in the RFP. It is incumbent upon the Proposer to read this entire RFP carefully and respond to and price all requirements and ensure "Total contract value for ALL Requirements" above includes all requirements.

\_\_\_\_\_  
(Print Name of Authorized Company Officer)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date Signed)

**APPENDIX C: SOLICITATION / CONTRACT FORM**

**REQUEST FOR PROPOSAL NUMBER: RFP#09025IM**

**RFP DESCRIPTION: SEIMENS LEGACY ACCOUNT WORKDOWN**

PROPOSAL RESPONSES MUST ARRIVE NO LATER THAN **June 24, 2010 at 4:00 PM**. NOTE: Mark the outside lower-left corner of your submission with the RFP number shown above.

This document contains **13** pages. Questions regarding **RFP #09025IM** should be directed to **Ivan Mann, Resource Specialist, by June 16, 2010 @ 12:00 Noon**.

You are invited to submit your proposal for the services listed with in this RFP. Responses must arrive at:

<u>DELIVERY ADDRESS</u>	<u>MAILING ADDRESS</u>
Grady Health System Resource Management Department *Armstrong Hall, 4 <sup>th</sup> Floor Armstrong Street Suite 420 Atlanta, GA 30303	Grady Health System Resource Management Department 80 Jesse Hill Jr. Drive, SE Atlanta, Georgia 30303

**\*NOTE:** The Armstrong Hall Building is located on the corner of Armstrong Street and Piedmont Avenue. **FAXED RESPONSES WILL NOT BE ACCEPTED.**

Director of Resource Management: Jasmine Batth DATE: 5/28/10  
Vice President /MM/CPO: Valerie J. Ramsey DATE: 5/28/10

**PLEASE BE ADVISED:** Proposers must **complete and return all pages** required with proposal submission. Failure to return these completed pages with responses may result in non-consideration of proposal submission.

Please acknowledge receipt of the following Addenda to the solicitation documents below by entering the number and the date of each:

Addendum No. \_\_\_\_\_ Date \_\_\_\_\_  
Addendum No. \_\_\_\_\_ Date \_\_\_\_\_  
Addendum No. \_\_\_\_\_ Date \_\_\_\_\_

NAME OF RESPONDING FIRM: \_\_\_\_\_

NAME OF COMPANY OFFICER \_\_\_\_\_  
(Company officer must have authority to legally bind the company):

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

**(MANDATORY) SIGNATURE OF COMPANY OFFICER ABOVE (Certifying agreement with specifications, terms and conditions unless otherwise noted.)**

*Signature*