

VENDOR QUESTIONS

1. Can we print offsite? **Yes**
2. If we print onsite are you paying for the postage?[CCD] **We are currently dealing with space constraints and therefore we do not anticipate a need for the vendors to be onsite.**
3. Are we correcting claims?[CCD] **vendor would correct claims in Epic.**
4. Are you correcting claims at Grady? **Depending on the situation**
5. We assume you will correct coding when necessary?[CCD] **yes but would be assigned within Epic similar to the current staff workflow.**

Can you confirm that a vendor can only bid the Small Balance portion and not the Bad Debt portion. We do not perform Bad Debt Services? **Yes they can bid only one portion.**

Nthrive

1. Have you used 3 vendors in the past for this service? **No, 2 vendors for bad debt.**
2. What are your current bad debt recovery percentage?
3. Can you confirm that legal collections are in scope? If so, will we send a list to Grady for approval prior? **No**
4. Are you currently using a secondary vendor? **No**
5. Is the small balance scope considered active AR or bad debt accounts? **AR**

Financial Corporation of America

1. How will the rest of the RFP be weighted if 25% is applied for supplier diversity? **This is not a weight. This is the percent of the total value of you contract that you are to spend with a minority or woman owned business. (Please read section 7 in it's entirety)**
2. Can you provide the current contingency rates of the current vendor's? **We do not provide that information**
3. Can you provide current recovery rates for both small balance and bad debt collection services?
4. Are we required to bid on both the small balance and bad debt collection services, or can we bid on just one? **No**
5. We have signed agreements with other clients who use the EPIC system and EPIC agreements are within those contracts, can you be more specific regarding the Epic Outsource agreement? Is there a single source EPIC agreement that we need to have for this RFP? **No**

Professional Medical Services

Insurance Questions:

1. Are vendors required to utilize Section 7: Supplier Diversity if we currently can handle all aspects of the scope of work internally? **Yes**
2. Payer mix with # of Accounts and Dollars for the proposed population to be outsourced?
 - a. Commercial Ins
 - b. Managed Care
 - c. Medicaid

- d. Managed Medicaid
- e. Other
3. Is the A/R a Gross Receivable or Net Receivable (Contractuals taken at time of billing or payment)? **Net Receivables**
4. Will vendor have access to all 835 electronic remits? **Yes**
5. Will vendor have access to work all Insurance Receivables directly in Epic, balance/transfer insurance buckets, enter memos, post adjustments, etc.? **Yes**
6. Will vendor have access to all optical imaging systems for retrieving additional information? **Yes**
7. Will vendor have access to electronic billing clearinghouse? **Yes**
8. Will vendor have access to request/retrieve Medical Records? **Yes**
9. What is the insurance small balance write off amount? **\$9.99 and under (excluding Medicaid and Medicaid CMO)**

Self-Pay/Bad Debt Questions:

1. What is the expected liquidation % by end of the placement tenure? **Based on the length of 435 days with no payments**
2. What is the proportion of Pure Self-pay vs Balance after insurance?
3. Will Vendor have access to Client system? **Yes**
4. If Patient provide insurance information and it is within the timely filing limit, who will bill the claim to payer (Client/Vendor)? **Client**

CBCS National

1. Why is this opportunity out to bid at this time? **Comparing current people, process and technology.**
2. Would you be willing to share who the incumbent vendors are? **No we will not provide that information**
3. Are vendors required to bid on both segments (small balance and bad debt), or can we bid exclusively on one? **Vendors can bid on both segments**

EReivables

1. Is it mandatory for vendors to bid on both programs, and may they bid on just one of the two, either the Small Balance Collections OR Bad Debt Collections? **No**
2. Re the cost proposal, are you looking for one blended rate for hospital services, physicians, nursing home and EMS accounts, or a separate rate for each? Note, if you are looking for separate rates we would want to see projected volumes for each. **More in the capability of hospital and physicians**
3. Is the 90 day placement criteria negotiable for some payers? Note, many payers will be beyond the time frame for reconsideration and for appeal, most specifically Medicaid and Managed Medicaid by the time the vendors would receive the placements **No**

IC Systems

- What is historically the rate of liquidation, as a percentage, for your bad debt portfolio? If historical data is not available, what liquidation rate does Grady Health System expect? **Comparing current people, process and technology.**
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Americollect

1. What version of Epic are is Grady Health on? **Upgrading to version 2018 in June 2019**
2. If we are only bidding on the bad debt part of this... How would you like us to clarify that we are responding solely for this piece of the business? I just want to make sure it's clearly noted that we are focusing solely on the bad debt with our RFP response. **Respond to the section for Bad Debt Only**
3. Do you anticipate amending the due date? **No**
4. Will all questions being asked by all participating vendors be published somewhere? If so, where will that be located? Will you be sending that out next week? **Responses will be posted to the Grady website by February 28, 2019 @ 5:00PM. www.gradyhealth.org/suppliers.**

AGS Health

- What is the average monthly inflow of claims?
- Will there be a need to send patient statements **No**
- What % of payers have website access **90%**
- Accounts by aging by payor by location with below information (excluding self-pay) for each of the billing (Hospital, physician, nursing home and EMS billing)
 - Claim count from DOS/Bill date
 - Primary and secondary balance
 - \$ balances bucket
 - Are figures stated in the RFP document with respect to small balance claims. Is this gross or net? **Net**
- Are claims edits and clearing house rejections part of the AR Follow up scope? **Yes**
- What is your clean claim %? **94% - 96%**
- Will this project include no response and denial AR follow up? **Yes** If so, please provide the following:
 - a. Top 5 Denials by Payor **Authorizations/Referrals, No Response from insurer,**
- What's the reoccurring aging bucket for these balances? Is there a one-time backlog in the first year along with the reoccurring bucket? **No**
- What is the expected TAT (do we have separate TAT for denials, no response and others) **Within 5 – 10 days of placement**