

VENDOR QUESTIONS PART II

1. Please clarify: **with one (1) original hard copy, six (6) printed copies and six (6) USB drive. Additionally, one (1) original hard copy, six (6) printed copies and six (6) USB drives of the Cost Proposal must be submitted under a separate cover along with the proposal response.**
 - a. Is Hard Copy and Printed Copy the same or should we send one, electronic copy and 6 full, printed copies. **Send a total of seven hard copies and 6 USB Drives**
 - b. What does separate cover mean? Are you asking for 2 “hard copies” and 12 printed copies in total? **Separate your cost proposal from the RFP response. Send a total of seven printed copies and 6 USB drives**
 - c. Do you need 6 USB drives as well? **See clarification above.**
2. Can GHS provide the below data related to small balance inventory?
 - a. Payer aging split
 - b. Split by dollar bucket sub split by Hospital, physician, nursing home and EMS charges
3. Are claims edits and clearing house rejections part of the small balance scope? **Yes**
4. Will the vendor have access to run reports from the clearinghouse?
5. Will the selected vendor have access to ATB and transaction report relevant to the accounts placed? **Yes**
6. Will the remote staff have the functionality to print appeals/ paper claims to a GHS printer? Will the same are dispatched to the payers by GHS? Or will there be a separate Print WQ/folder created where remote team will save all the print documents and GHS team will print and mail it out?
Vendor will have access to print remotely
7. Who posts the payment? **GHS** Are there any backlogs on payment posting? **No**
8. Will vendors get access to the payment/collection report? If yes, weekly or monthly? **Yes Frequency to be determined**
9. Will credit balance be part of the small balance inventory? **No**
10. How are coding related denials worked – will these be routed to GHS or GHS assigned coding team?
Yes – Coding issues will be forwarded back to GHS HIM team.
11. Can you please provide break-up of your denials by types, top 5-10 denials?
12. Are there specific analytics needs that are higher priority for GHS?
13. What turn-around times can we expect on accounts referred back to GHS or the GHS appointed team? Example: Coding denials, provider enrolment denials, etc? **48 hours to one week – depending on the circumstance of the account**