Grady

RFP 21002BB
HOSPICE SERVICES
Vendor Questions

1) Would we be managing specific beds designated for Hospice at Grady or managing an actual GIP unit? Either way, how many beds would this be? **Grady uses a scatter bed model to extend hospice services to patients not stable enough to move to an outside inpatient hospice or to home hospice services. Grady aims to transition patients to hospice services on critical care units and to cohort patients outside of critical care units on a single medical surgical unit.**

2) Is there currently a designated hospice unit or wing at Grady? If so, how many beds? **At this time Grady does not maintain a designated hospice unit but uses a scatter bed model to provide hospice services to inpatients not stable enough to move to an outside inpatient hospice or to go home with hospice services**.

3) If not a dedicated hospice wing/unit, is there a designated number of beds available for hospice at Grady? If so, how many? **Grady uses a scatter bed model for hospice services without a designated number of beds. The number of beds allocated to hospice depends on the number of patients who need hospice services.**

4) When was last bid for Hospice at Grady? **June 13, 2016**

5) Could you provide trended data for the last 3-4 years, corresponding to the 3 areas the hospice partner will manage?

   a. How many hospice patients remained inpatient at Grady until death?
   b. How many hospice patients were discharged to another Inpatient unit or SNF?
   c. How many hospice patients were discharged to home?

   The categories in the table below reflect the best effort to gather volumes for hospice services.

Hospice Discharges	2018	2019	2020	2021	Total
Discharged from Grady to Hospice at Home/ALF/PCH/SNF	220	212	227	271	930
Discharged from Grady to Grady Inpatient Hospice	195	265	282	183	925
Discharged from Grady IP to Other IP Hospice	293	279	278	96	946
Total	**708**	**756**	**787**	**550**	**2801**

6) What is the payer mix breakdown for hospice referrals? *This information will be available on Tuesday, July 13. GHS analytic team is gathering this information.*

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7) Who is palliative physician team? What is model? How many Grady Palliative patients convert to hospice? **Grady maintains a Palliative Care Service to provide inpatient and ambulatory palliative care services for patients with serious illnesses. The service consist of physicians, nurse practitioners, social workers and chaplains. Physicians are board certified in Hospice and Palliative Medicine.**

8) Is Grady experimenting with any payment models to drive down cost? **Grady Memorial Hospital and Health System serves as a safety net service provide for Fulton and DeKalb counties as well as much of metro Atlanta. Safety net service provider face resource constraints every day. Grady works hard to make the best use of available resources. At the present time, Grady is not engaged in special initiatives aimed to drive down hospice service costs.**

9) Can Grady expand on any credentialing process for our hospice Medical Director? **The RFP outlines that the physician leader of the Grady Palliative and Supportive Care Service serves as the medical director for the GIP hospice program. The hospice partner works with the palliative care service physician leader to implement seamless services for patients using inpatient hospice services at Grady.   More information may needed to better understand the role and need for hospital credentials for your hospice Medical Director?**

10) Can you expound on what you mean by supplier diversity? All services provided to hospice patients (I.e. pharmacy DME etc..)are through the hospice. There is no additional costs outside the hospice perdiem. **Supplier diversity is the utilization of Minority, female, veteran, service-disabled, LGBTQ, HUBZone or small business in any aspect of delivering services to GHS. The respondents should list any suppliers in their supply chain who fit to one of the aforementioned categories.**

11) **Please forward me the terms and conditions. *Will confirm release with Legal Affairs & information will be available on Tuesday, July 13.***