

### Mary Free Bed RPF Questions

1. The initial term of the agreement was stated as 18 months to two years. Are you open to longer-term agreements, or is your intent to have support for initial start-up and then after conclusion of the initial term to manage the program yourself? **Our intent is support for start-up. We will determine the need for ongoing to support as the initial support phase concludes.**
  - a. At Mary Free Bed we offer several different collaborative models including the traditional management agreement, but we also offer 50/50 joint operating agreements (no new entity created) where we can invest capital and contribute to the program growth as well as share in the profit/loss of the program. Would you be interested in a summary of both types of models? **Yes, we be interested in a summary of both types of models, understanding the 50/50 likely results in a longer timeline.**
2. Are you able to provide more insight into how you arrived at a 24 bed DPU? Did you hire Walter Consulting and/or another consultant to complete the analysis or did you conduct the analysis internally? Are you open to growth beyond 24 beds following the initial term of the agreement if the appropriate CON and licensure can be obtained? **We evaluated our need based on the patients waiting for timely rehab services, those referred out, market trends and the days associated with this volume. This demand fit the available capacity of a renovated 24-bed unit. Growth beyond that capacity is not likely given overall bed capacity in the hospital building.**
3. Is your current plan to serve only adults, or are you looking to serve adolescents (under 18) and pediatric populations?  
**Grady will only serve adult patients.**
4. In the RFP the document states the construction of your unit will be completed soon. We have the following questions related to the unit:
  - i. Are you able to send a unit floor plan and/or square footage? We find physical layout can change staffing efficiencies and types of patients served. For example, secure units for cognitively impaired or those who have experienced a severe brain injury. Also serving patients with spinal cord injury the equipment sometimes requires significant space.  
**Attached are the unit floor plans.**
  - ii. Are the 24 planned rehab beds all private rooms?  
**Yes, all 24 rehab beds are in private rooms.**
  - iii. Do the 24 beds each have private bathrooms complete with showers?  
**Yes, all 24 private rooms have private bathrooms complete with shower.**
  - iv. Have you ordered rehabilitation equipment for the unit and if so, what types of therapy equipment were purchased? This helps us understand the types of patients able to be served. Was a wheelchair fleet included in this purchase, and if so, were any tilt in space, power chairs, specialty cushions etc. purchased? (This impacts the manager's responsibilities at time of go live and after).  
**We are in the process of ordering equipment for the unit. We did not include a wheelchair fleet.**
5. Do you have your own orthotics, prosthetics and bionics supplier or are you interested in having your partner provide those services? Mary Free Bed has a vast O&P+B business and we

manufacture our own prosthetics. **We do have a supplier for orthotics. We would be interested in the services Mary Free Bed could provide.**

6. At Mary Free Bed, we are not-for-profit and serve all patients. Do you have specific charity care policies we should be aware of?

**Attached is a copy of Grady's Financial Assistance policy.**

7. What would make Grady Health System say the rehabilitation partnership is a success? For example, beyond budget and volumes, are there specific programmatic outcomes you wish to achieve to complement your acute care programs and services (i.e., certain return home rates, re-admission thresholds, acute LOS targets etc.)?

**We are very focused on providing timely rehabilitation services to our patients, many of whom wait without sufficient access to acute rehab services. With this focus, we anticipate improved key performance indicators like reduced length of stay, measured return to home rates and reduced re-admissions.**

8. Please confirm if you need your partner to manage the CMS certification for the rehab unit including the 437 and 855A forms? Please verify your cost report start and end date.

**Yes, we need our partner to manage the CMS certification and the 437 and 855A forms. Our cost center report starts October 1 and ends September 30.**

9. Do you have an existing physiatry consult service at Grady? Are your physiatrists and other physicians directly employed by Grady or independent contractors? **We have Physical Medicine and Rehab physicians on staff through our affiliation agreement with the Emory University School of Medicine.**