University of New Mexico

Hospitals

Request for Proposals

Addendum No. 3

Project Number:

RFP P427-20

Medical Coders and Auditors



Due Date: October 13, 2020 2:00 p.m. MST

The time and date proposals are due shall be strictly observed.

UNMHS RFP P427-20 Medical Coders and Auditors

General Questions:

- Page 6 Section C number 1 "Organizational Experience, quality and stability" (Exhibit B, Section I.A)
 - The RFP says to reference (Exhibit B, Section I.A) for information needed/required in this section. Would we be correct in assuming on page 12 (A. Vendor Information numbers 1-5) is the information being requested for the response? If not please clarify. Yes. There is not a section 1.A. See page 11 thru 13.
- On Page 6 Section C number 2 "Technical Approach" (Exhibit B, Section 1.B)
 The RFP states to reference Exhibit B, Section 1.B. However we cannot locate section 1.B within EXIBIT B
 - Could you please advise where to find this section? Could it possibly correspond with Page 12 (Staff Competency / Experience 1-5) AND (Management/Performance Measures 1-5)? Yes this corresponds with page 12. There is not a section 1.B
- Page 6 number 2 a. references "Scope of Work Requirements" Could you please clarify how to locate (1.B..i and 1. B iv)? We do not see any numerals within Exhibit B. There is not section 1.B i thru 1.B IV. Follow Exhibit B please starting from page 11 thru 13.
- Are the in-patient & out-patient medical records from EMR available via HL7 or FHIR feed? HL7.
 For all contract coding services, vendor will be given Citrix access to our EMR and coding system.
- Does UNMH facility require MIPS measures for part-b patient episodes? Yes
- Will UNMH share historical denied claims (EOBs) to learn from coding or medical necessity related denials per payor per medical code? Yes – Historically, any received denials are shared with vendor for coding feedback.
- Can you break out the 750,000 outpatient clinic/ancillary services better? By type? The
 overwhelming majority of outpatient clinic encounters are standard clinic visits performed in the
 office setting (roughly 99%), while our department handles ancillary/radiology services on an asneeded basis (roughly 1% annually)
- Since the RFP's objective is to provide coders/auditors "on a supplemental basis", can you
 estimate the number of admissions, observation admissions, surgical encounters, and
 outpatient clinic/ancillary services that would be considered "supplemental" for coding per
 year? Historically, contract coding services covered 35-50% of all annual encounter volumes in
 all listed areas.
- Will UNMH consider fully autonomous medical coding via AI with contractual accuracy of 95%? Historically, all contract coding has been completed in a traditional format –UNMH will provide consideration of this alternative method. If this method is employed, full disclosure of AL technology and workflow must be shared for review, along with all testing procedures and final outcomes.

•	RFP Section	Page/Row	RFP Text in Question	Change Healthcare Question	UNMH Response
1.	SECTION II. PROPOSAL COPIES AND FORMAT	5	Proposal - One (1) ORIGINAL, One (1) HARD COPY, and one (1) ELECTRONIC COPY of the proposal; ORIGINAL and COPY shall be in separate labeled binders. The proposal can NOT be emailed.	Due to the current government regulations/recommendations regarding the Covid-19 pandemic, would UNMH allow electronic submissions in lieu of hard copy submissions?	Please mail responses.
2.	General	General	General	Does the UNMH currently have PRN coding and coding audit vendors?	Yes. We hold several vendor contracts and currently employ the services of two vendors at this time.
3.	Objective	9	provides insight into the annual volumes within UNMH.	Of the annual volumes, what percentages for each category should the vendor(s) expect to receive monthly/weekly, in order to properly staff, to ensure that the turnaround times are met.	This can be flexible at times. Historically, contract coding services have coded roughly 35-50% of total encounter volumes.
4.	General	General	General	Please provide the number of inpatient charts that the vendor(s) can expect to receive on a weekly basis to code.	If vendor was selected, it would be expected that there is ample workload for contract coding services. For example, if one IP coder was needed – UNMH would ensure workload was substantial to offer coder a full-time workload (on a monthly

					basis, this would equate to roughly 260 charts). Historically, when utilizing contract coding services, contractors were utilized on a full-time basis.
5.	General	General	General	Please provide the number of outpatient encounters/charts that the vendor(s) should be prepared to code on a weekly basis by: a. Observations b. Same day outpatient surgical cases c. Outpatient clinic d. Ancillary services	Same as above explanations. At this time, it is assumed 35-50% of total encounter volume may go to contract coding services (see RFP for encounter volumes on an annual basis).
6.	General	General	General	Please provide the requested audit sample size and the frequency of audit requested.	Monthly audit size of 150-300 encounters.
7.	General	General	General	Please define outpatient clinic encounters; are these encounters provided by your physicians and/or nurse practitioners in an office setting? If not, please describe the service and type of clinic.	Outpatient clinics are completed in the office setting.
8.	General	General	General	Will the proposed auditor scope of services be "prebill"? How many records will the vendor receive on a weekly basis to audit? How will records be selected to send to the auditor?	Audits would be retrospective (never pre-bill). If an audit is performed, the full audit sample would be released to the vendor in its entirety with an agreed upon deadline for completion. For audits, vendor will be given access to our EMR and coding system. The full audit sample will be loaded into the EMR for the vendor.

9.	General	General	General	If a vendor is selected for both coding services and the coding audit services; will UNMH allow the coding auditor to review records coded by the same vendor?	Yes – though, vendor will have to have safeguard measures in place to ensure that auditing is fair and impartial, preferable in contract to uphold accuracy standards.
10.	General	General	General	If the audit is to be retrospective, what timeline after final bill will the record be reviewed? How many records/encounters should the vendor expect to receive on a weekly or monthly basis, so that staff can be assigned.	The audit would be on a monthly basis, 150-300 encounters chosen from encounters coded in the month prior. Same process as listed above – Vendor would be given access to our systems and the full audit sample would be preloaded for auditors with deadline agreed upon beforehand with vendor.
11.	General	General	General	Will vendors be allowed to respond to only the coding support services or only to the coding audit services instead of responding to both services.	We will allow both or either or in terms of services.
12.	General	General	General	May a vendor submit a response that included written and digital (e.g., video thumbnails) sections, if digital material is available? If no, can you explain your objection?	This would be allowed, though it is appreciated if response is provided in a written format.
13.	General	General	General	How would a vendor be scored if a vendor included an alternative format (i.e., digital response)?	No difference – though written format as requested is appreciated.
14.	General	General	General	Instead of a written response, would UNMH accept a multimedia/video clip of our	This will be allowed, though it is appreciated if response is provided in written format.

				company information, if available?	
15.	General	General	General	Instead of a written response, would UNMH accept a video thumbnail demonstrating product functionality for a Section (e.g., Section 7 Selfservice and usability), if available?	This would be allowed, though it is appreciated if response is provided in a written format, or provided in conjunction with a brief written summary.

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