

Taking Medicine Further[™]

Written Questions and Answers

Credit Balance Services RFP KD-0104-23 Closing Date:05/09/23 Today's Date: 04/26/23

No.	Question	Answer
1.	Can data be sent offshore if it isn't kept there.	KDMC data cannot be sent out of the USA.
2.	What metrics will KDMC use to measure success of this project? • Specific volume worked each month? • Percent of population reduced? • AR Days? • How will success be measured in terms of volume and dollar reduction? • What are other measurements of success in the eyes of KDMC?	KDMC will measure success primarily by aged volume reduction in addition to AR days.
3.	What expectations does KDMC have for subcontractors with an established relationship to offeror?	We have the same expectation of subcontractor that we have for the offeror.
4.	How will offeror fit into KDMC's refund process? Will the offeror be responsible for cutting checks? Triggering refunds? Is the offeror responsible for preparing reports such as SMS-838.	The offeror will be responsible for requesting the refunds within Epic and preparing any necessary documentation to support the refund. KDMC will be responsible for approving the refunds and processing the checks. The offeror

		will not be responsible for the CMS-838.
5.	What is KDMC's preferred means of automating activity back into Epic? Does KDMC prefer the offeror have people working directly in Epic?	KDMC prefers to have people working directly in Epic. We are looking for a vendor that will be an extension of our current team.
6.	Can you elaborate on the need for Epic certification? It is our view that Epic certification is not needed to perform credit balance work as we work with over 1800 hospitals with a vast majority of them being on Epic.	Epic certification is not required.
7.	 What systems are in scope? Hospital Physician Any legacy systems to be aware of? 	The scope of the projection will primarily be physician based credit balances. Depending on the engagement and the need, KDMC may want to extend the agreement to hospital credit balances. There are no legacy systems to be aware of.
8.	Can you elaborate on the expectations of the three (3) FTE's to be provided for the credit service program? Is the expectation they be on-site at KDMC? Can this work be performed remotely? • Will there be any KDMC staff jointly working credits? • Any staff available for support or validation?	Our expectation is the FTEs will work remotely. KDMC has staff that will provide support if needed.
9.	What information will the offeror have access to, such as contract data, EOB, account? How is this information provided to the offeror?	The offeror will have access to contracts, EOBs and any necessary Epic access to work the credits.
10	We have also attached an excel document that we received a while back from KDMC. Is it possible for this spreadsheet to be updated with current AR populations?	We do not have this information for our current receivable. We can provide our physician credit balance inventory by count and AR value.
11.	We are unclear how enrollment relates to the Intent and Scope of this RFP as defined by Section 2.1. Also, please clarify if, by "customer service functions" you mean our staff who work on projects similar to the one proposed in this RFP or our staff that will directly interact with KDMC's staff. 4.5.5	Enrollment functions mean the people who actually implement this program. They may be the same people that perform the day to day customer service. KDMC is your customer. This is referring to any contractor who does any work for KDMC.
12.	We do not believe this section is applicable to the Intent and Scope proposed in this RFP. Please clarify. 4.5.13	It means can you conduct your business with customers that may not speak English or have a disability.

13.	We are unsure what specific documentation you are requesting. Can you please specify? 4.5.15	You do not need to be certified for Epic.
14.	Preventing overpayments in a project such as the one requested in the RFP is just part of the project. We do not understand the request for "design implementation and calculation of effectiveness" regarding overpayments at the Intent and Scope does not call for any process or system design. 4.6.3	Intent & Scope is intended to give a high level view of this RFP. Section 4.6.3 is specific criteria. If you do not have these capabilities, note it on your offer.
15.	Again, there is no requirement in the Intent and Scope to develop a "design change", so we are unsure what this question is referring to. Please clarify. 4.6.5	Intent & Scope is intended to give a high level view of this RFP. Section 4.6.5 is specific criteria. If you do not have these capabilities, note it on your offer.
16.	Please confirm that for this section you are asking what data and access we will need and how will it be transferred between the organizations. If that is not a correct interpretation, please clarify. 4.6.13	Yes, that is what we are asking.
17.	We do not understand how "payroll deduction/refund errors" relate to the Intent and Scope of this RFP. Please clarify. 4.6.14	King's Daughters will deduct the payments from employees. And sometimes they take too much. If this does not apply, just answer with N/A.