The University of Tennessee Health Science Center

RFP 10054203
Billing Services for College of Dentistry Pathology Department

Addendum #1

Proposals Due:
March 3, 2017
at 2:30 pm Central Time

Written Comments/Questions

1. What were the gross charges and gross receipts for FY2016?
   Approximate gross charges are $380,000 annually based on the number of cases. Approximate gross receipts are $260,000.

2. Will there be more than one tax ID under which to bill?
   No.

3. How many practice associates will have credentials to be maintained? What is the average turnover rate per year of practice associates?
   There are 3 providers with no expected turnover

4. Will any billing be done under the practice associate's NPI?
   Yes

5. Mention is made several times in the RFP about the necessity of previous experience representing higher educational and academic health centers. What is there about the UTHSC's billing that requires unique experience in health care billing?
   We only require the unique aspect of oral pathology. However, it is imperative that the bidder is experienced in this area if we are to be successful.

6. Is a thumb drive acceptable as a means of providing an electronic copy of the proposal?
   Absolutely

7. Does the UTHSC utilize an EHR for patient demographics, insurance and visits information? And, will access and instruction be made available to the selected vendor?
   Yes. Patient records are maintained in AxiUm and the patient management system is provided by Exan.

8. Does the UTHSC utilize a third party collection agency for overdue patient collections? And what is the policy regarding the time frame and procedures required before a patient is turned over to a collection agency?
   Because the typical pathology patient balance is relatively small, limited resources have been used to collect past due accounts.

9. Please provide the names of the current vendors performing these services today.
    All billing is currently in house. The State of Tennessee has a contract with 7 different collections firms. The College uses Automated Collections and Regional Adjustment Bureau.

10. Please provide the current fees for the services described in the RFP.
    88305 - $155
    88304 - $132
    88342 - $66
    88346 - $64
    88399 - $34

11. What is the most common cause of denials?
    Out of network, referring doctor not in network, data input errors

12. Who are the major managed care providers?
    BC/BS
    Cigna
    Amerigroup
    Humana
    Aetna

13. What is your average Days to Collect a claim (Average Days Outstanding)?
    Clean Claim – estimated 4 to 6 weeks

14. Please provide an aged trial balance summary by payer by age (0-30, 31-60, 61-90, 91-120+), or the best information available in this regard.
    We can generate this report, but will need a Business Associates Agreement in place to supply data that has patient information.

15. What billing platform is currently being used for data entry, claims submission, receipts and denial and lost claim follow-up?
    Data is entered into AxiUm by pathology department personnel, and claim data is transmitted via Zirmed to the respective third party payer. Zirmed provides feedback re: denied claims (missing data, data errors); dentistry billing office personnel follow-up on denied claims to obtain data necessary to re-submit.

16. Do cash collections affect the process in any way? Self-pay accounts?
    No

17. Currently, how many payment plans do you establish each month?
    None

18. How do you currently handle statements?
    Statements are mailed monthly

19. Do you send collections letter(s) on past due accounts before turning them over to collections?
    No

20. What is the monthly inbound call volume from patient calls regarding their balance?
    Calls are received by lab personnel and Business Office personnel; but logs are not maintained so total call volume is unknown.

21. Would vendor be responsible for existing A/R? Would the legacy A/R be converted to the vendor system?
    Yes to both questions.

22. Please clarify whether the vendor is free to use their own billing system or UTHSC's EHR or PMS to perform the billing and A/R services.
    If appropriate safeguards are in place, vendor's use of college's system will be considered.

23. Amount of backlog to be included in project?
    Over 365 is approximately $400K

24. What is your fee schedule set at?
    Fee schedule will be provided

25. What are your average monthly collections?
    Approximately $22,000

26. How do you create your charges today? Via EHR or paper or other electronic charge capture (which one)?
    EHR

27. How is you professional billing done today?
    In house

28. Past two years account billed?
    1 year – roughly $372,000
    2 year – roughly $403,000

29. Past two years collected?
    1 year - $262,000
    2 year - $190,000

30. Past two years number of encounters?
1 year – 2,600
2 year – 2,400

31. Payor mix:
Medicare – 25%
Medicaid – 0% - this will change
Private Insurance – 50%
Self-pay – 25%

32. Average monthly billings?
$30,000

33. Average monthly collections?
$20,000

ALL ELSE REMAINS THE SAME.