Bad Debt Collection Accounts

Inpatient, Outpatient and Emergency Room

RFP 2014-011

Are bidders required to bid the additional services for A. Holly Patterson Extended Care Facility, including Medicare and Medicaid processing, or can they bid only on the components of the original RFP.

You could bid on one or the other or both service lines.

Can you explain how you want FORM A completed. For instance, you refer to Inpatient, Outpatient, and Emergency Room Accounts, but you only ask for pricing for Inpatient and Outpatient.

Check the box for the appropriate service line that you want to be considered for.

Also, what are you seeking behind the $ signs on FORM A. Is this an “either or” situation where we can either bid a contingency fee percentage or a flat dollar amount per account, FTE, etc. Or were you expecting some dollar amount in addition to the contingency fee percentage.

You must bid contingency on Bad Debt Collections. The $ sign denotes a cap on a specific account.

Under Scope of Services, Section A. Description of Services, mention is made of a Day-One Vendor with a note to “see above”. Is this referring to the statement on page 1 that the vendor will get accounts at day 120 or was more information intended?

The accounts will be given to the vendor after day 120.

Also in Section A, if the vendor discovers third-party coverage they are to bill using the NuHealth system. Does NuHealth want the vendor to do all collection work, as well as, re-billing of third-parties on the NuHealth system or just the re-billing? In other words, should we use our own system for standard collection processes?

The billing should be done through the hospitals Eagle system.

Section A says, vendor will work the accounts for 150 days. What happens to accounts still unpaid after 150 days? Do they go to a second’s agency?

The accounts are sent back to NuHealth.

Under Scope of Services, Section B. Additional Requirements applicable to all Service Lines, the second paragraph states: “Any payments received with twenty-one (21) days of the claim being sent to the vendor should not be claimed as monies obtained by the vendor unless diligence has
Can you define how diligence will be proven? If we have sent a letter and made phone calls will that qualify?

This is subject to further discussion when finalizing an agreement.

Relative to Bad Debt collections, can the Agencies assume the contingency fee would apply to insurance payments collected as well as patient/guarantor payments? Would the Agency be responsible for billing/re-billing insurance, or returning verified benefits information to hospital for billing?

Yes the contingency fee would apply to both. Yes the agency is responsible for billing and re-billing of all accounts.

What is the current number of monthly placements? What is the average balance of the monthly placements?

The number of placements for 2013 was 28,801 for $54,425,030 in gross charges.

Will NuHealth System allow evening and weekend calling, IVR and unattended calling?

All activities must comply with applicable laws.

Are cellular telephone numbers clearly identified in referral media?

Yes cellular telephone numbers are clearly identified in referrals.

Are scan lines required on collection statements driving payment directly to NuHealth’s System bank/lockbox?

To be determined.

What is the small balance write-off amount, or minimum balance that collection Agencies are required to activate and work? I.e. <$25.00 etc.

To be determined.

Would Agencies be able to report delinquent accounts to Credit Bureaus?

Please refer to scope of services.

Would NuHealth’s System approve certain litigation where warranted and based on agreed upon suit parameters, i.e. balance, income requirements etc.?

Please refer to scope of services.
What collections processes took place prior to placement, please put an “X” next to each

a. Financial Counseling
b. Medicaid Eligibility advocacy
c. Point of service collections
d. Electronic presumptive charity care screening
e. Letter series prior to placement

Not applicable.

Will there be a grace period after placement?

Please refer to scope of services.

How long will the vendor be able to keep the placed accounts?

To be determined.

Will the agency get commission credit for discovered insurance?

Yes the agency will get commission credit for discovered insurance.

Please clarify if the MWBE requirement is mandatory? If so, is the 20% goal mandatory?

Please refer to the RFP concerning MWBE participation.

Can we provide a flash drive for the electronic version vs. a CD?

We will accept proposals on a flash drive.

What has been the average rate of recovery for the last twelve month on delinquent patient accounts worked in primary bad debt?

Not applicable.

Who are the incumbent agencies currently used today and will NuHealth provide their recovery statistics?

Not applicable.

How often is the placement cycle? Daily, weekly, monthly, other?

The current placement cycle is monthly.
Do you use an early out partner prior to bad debt placement?

Yes NuHealth uses an early out partner prior to bad debt placement.

What is the average age from discharge/service date?

Please refer to scope of services.

We are currently not licensed in Nassau County. Can this be fulfilled upon award of the bid?

Yes.

What are the past 12 month’s recovery rates for Bad Debt Collections?

- Inpatient
- Out Patient
- Emergency Room

Not applicable.

Placement Profiles; please provide current vendors contingency fee rate?

Not applicable.

At what age will selected vendor be allowed to credit report?

Please refer to scope of services.

Do you require Attorney Vendex Certification and/or Attorney letters for vendors who will utilize the services of their own attorneys for litigation purposes?

Please see the RFP disclaimer. Subcontractors must not be on the excluded list.

Do you require General Liability and Professional Liability Certificates of Insurance as proof of coverage, included with the proposal, or upon being awarded contract?

Awarded the contract.

What will be the duration of the contract with the successful bidder?

Please refer to the RFP.

What is your current billing system?

Our current billing system is Eagle/ American Healthcare.
Do you have the capacity to transmit data electronically?

Yes we have the capacity to transmit data electronically.

Is the Form A required to be in a sealed envelope?

Yes Form A should be in a sealed envelope.

Do you require that sample reports be included in the proposal?

Please refer to the RFP.

Who will be selected as the individual working for NuHealth billing department for day to day contact?

To be discussed.

When accounts are placed, what type of format can we expect to receive?

To be discussed.

Based upon the self-pay bad debt collections, will our staff be provided a VPN access to the billing system?

Please refer to scope of services.

What is the settlement threshold the vendor needs to adhere on behalf of NuHealth?

To be discussed.

In assuming the vendor will be given authorization for legal on a case by case basis, what is the legal threshold minimum on a patient balance placed for collection?

To be discussed.

Once an account has been authorized by NuHealth for legal, can post judgment remedies be taken in the form of:

a) Wage Levy Attachment?  b) Bank Execution?  c) Property Lien?

To be discussed.

How many agencies will this be awarded to?

To be determined.
Who are the incumbents?

Not applicable.

What is the present commission rate?

Not applicable.

What are the current recovery rates on the business?

Not applicable.

Do you expect the placement volumes to remain consistent going forward?

Yes we expect the placement volumes to remain consistent going forward.

Will there be a backlog of placements sent at the start of the project or only new accounts?

To be determined.

What are the collection liquidation rates achieved by the current incumbent/incumbents?

Not applicable.

E. 1, Pg. 12—Would Nassau accept detailed biographies in lieu of resumes?

Resumes

What are NuHealth's internal staff performance metrics/standards for Bad Debt & Collections? For example: # of accounts worked in a day, etc.?

Not applicable.

Does NuHealth allow for services to be performed using offshore resources? If so, is there a certain percentage of the work that would need to be done domestically?

All proposals will be considered.

Are accounts submitted at charge level or per patient?

Accounts are submitted at a charge level.

What is the current policy regarding legal accounts?

Please refer to RFP.
How many vendors do you currently use for this service?

Not applicable.

What is the contingency fee charged by your current vendor(s)?

Not applicable

Will these accounts be only hospital charges, or will physician charges also be including?

These accounts will only be hospital charges.

What is your current EHR/EMR system?

Our current EMR system is Allscripts.