

RFI Responses #2 – Remote Medical Coding

1. Pages 20, RFQ B.4 SOW paragraph 7g states: “The Contractor shall provide for its staff laptops, reference material, software/encoder tools for conducting reviews and developing training materials. Contractor staffs shall be proficient in the use of the laptops, reference materials, software/encoder tools and provide with their proposal evidence of use of an encoder.”

Page 21, Paragraph 8 states: “Contractor shall ensure that its staff members providing services under this statement of work (SOW) and pursuant agreement (CONTRACT) use VA encoder software.” **Please confirm that the Contractor is to use the VA encoder software, rather than encoder software provided by the Contractor.**

If they are referencing the Nuance software (and I think they are), this is a national VA purchased software and all VHA’s are required to use it, so I would expect all contracted coding services are also required to use it.

2. Page 23, RFQ B.4 SOW paragraph 8.O.1 states: “The Contractor shall furnish certification of Indemnification and Medical Liability Insurance in accordance with VAAR 852.237-7...”

The services to be provided under the contract do not include services by licensed health care providers. Coding contractors do not provide medical services and are not able to obtain medical liability (malpractice) insurance. **Does this provision apply to this solicitation?**

No; this provision does not apply as this does not involve non-personal health care services. Provision removed from SOW.

3. Page 24, RFQ B.4 SOW paragraph 9: Under Task Two, there is a table of turnaround times for Inpatient Facility, Inpatient Pro Fee, Outpatient, and Surgery encounters, and Item Numbers for these coding types are shown on the Price Schedule. There is no Deliverable 1. Deliverable 2 is “Coded Outpatient Encounters”. Separate deliverables are not provided for other encounter types. **Please clarify deliverables for Task Two.**

There is a Task 1, work plan with deliverables 1.1, 1.2, 1.3, and 1.4. Then there is a Task 2, which has a deliverable 2 only. Task 3 is for auditing services.

4. Page 25, RFQ B.4 SOW: **Does VACCHCS mandate the use of the E/M calculator for applicable Outpatient Coding?**

Yes.

5. Page 27, RFQ B.4 SOW, Task Two, Deliverable 2: Task Two is for Coding Services, but there is a delivery schedule related to Audit services, rather than coding services. **Does**

this table refer to the Contractor's internal audits of contractor coding staff for performance monitoring purposes or to the External (Monthly) Auditing Services under Task Three?

It belongs to Task 3.

6. Page 27, RFQ B.4 SOW Task Three: External Auditing Services: This section reads as if VACCHCS is contracting for External Auditing of VA coders, yet there is no corresponding Item Number on the Price Schedule to support External Audits of Outpatient encounters, Inpatient DRG, and Inpatient Professional Fees. **Will the Government add line items to the Price Schedule to cover these activities by the Contractor?**

No.

7. Page 27, RFQ B.4 SOW, Task Two: Coding Services, Deliverable 2 (Table, Bullet 1): **Does VACCHCS want offerors to document and provide a statistically valid sampling methodology with the submission of the Technical Proposal to cover both External Audit Services and weekly internal QA of contractor coders?**

Requirement is to subject description of sample size determination.

8. Page 27, RFQ B.4 SOW, Task Three - External Auditing Services (Bullet 2): The data included in this bullet is very specific regarding coding which is not contained in the Task Two description of coding services. In Task Three, there is reference to auditing the first four listed diagnoses in the outpatient and inpatient setting, both facility and professional services, and the first four listed procedures/services in the outpatient and inpatient setting, both facility and professional services. **Does the language referenced in Task Three also apply to coding in Task Two, such that the Contractor is required to list the first four diagnoses, procedures, and services listed?**

Yes

9. Page 27, RFQ B.4 SOW, SOW, Task Three - External Auditing Services (Bullet 4): The description included in this bullet is applicable to External Auditing Services of VA coders. Two deliverables are labeled 3.6. **Will the Government add Item Numbers to the Price Schedule to cover these activities by the Contractor, and reflect any changes based upon the answer to this question in Deliverables 3.1-3.6? No. 3.1-3.3 & 3.5-3.6 are required. Duplicate 3.6- two-hour educational session for coding staff has been removed. 3.4 has been removed.**

10. Page 28, RFQ B.4 SOW, Task Three - External Auditing Services, paragraph 1: It is not clear whether the 10% sample size refers only to External Audits of VA coder performance. On page 30, paragraph 11, Quality Control and Performance Metrics, the required sample size for the weekly internal (Contractor) audit of contractor coder performance is 5%. **Would the Government please clarify the sample size for**

External Audits of VA Coders and add an Item Number to the Price Schedule to cover External Audits? Would the Government also confirm the 5% sample size required for the Contractor's weekly internal audit of its coders?

External Audits-Sample size is 10% of the entire workload

Weekly audits sample size is 5% of the entire workload for the week.

11. Page 29, RFQ B.4 Paragraph 9 and Attachment C – Price Schedule: The SOW does not specify deliverables for Tasks Four and Five. Two deliverables are labeled Deliverable 3.6. Attachment C - Price Schedule does not include Item Numbers for Task Three – External (Monthly) Auditing Services, Task Four - CDIS, and Task Five – Training and Education.

Would the government please clarify deliverables and quantities for Tasks Three, Four, and Five, and add the corresponding Item Numbers to the Price Schedule?

3.1-3.3 & 3.5-3.6 are required. Duplicate 3.6- two-hour educational session for coding staff has been removed. 3.4 has been removed.

Attachment C – Price Schedule includes an Item Number for Census Coding, but there is no task associated with this deliverable in the SOW. Please clarify.

Census can be found in SOW under Description of Possible Coding Work Types, c: [inpatient facility coding, patient treatment file \(PTF\)](#). Pg. 42 of RFQ document.

12. Page 29, RFQ B.4, paragraph 10: **Please clarify whether we are to submit a quarterly summary report to a national COR, in addition to the designated VACCHCS COR.**
No; VA COR submits to national.
13. Page 31, RFQ B.4, paragraph 15, Government Responsibility: **Would the Government please confirm that VACCHCS does have written local site coding guidelines in place that are used to supplement and augment VA National Coding Guidelines?**

Yes, HCSM 136-14-019 (for E&M coding)

14. Page 38, RFQ E.4 SOW, paragraph 18.5, Contractor Personnel Security: There is ambiguous language under Bullet #2 that offshore coding is not expressly prohibited. **Would the Government please confirm that offshore coding is expressly prohibited and confirm that use of 100% remote US-based coding is an evaluation factor?**

Off-shore coding prohibited

15. Page 64, RFQ E.4, Item #1-Key Personnel: The definition of key personnel appears to be limited to just coders (page 31, Contractor Experience). Coder credentials and experience are to be submitted on the Excel attachment provided by the Government. **Are Project Supervisors and Auditors considered key personnel? If so, does the Government require credentials, experience summaries, or resumes for Project Supervisors and/or Auditors?**

Yes, in order to supervise and audit coders, the individuals should have same credentials.

16. RFQ Attachment, Wage Determination (page 8): **Please confirm that for the purposes of this solicitation, SCA compliance, including EO 13706, Health & Welfare benefit rate is \$4.13 per hour, \$165.20 per week, or \$715.87 per month.**

Yes looking at the current SCA wage determination these numbers are correct.

17. The VACCHCS solicitation for Medical Coding Services includes auditing and training services in the scope of work however the Price List does not include an item number for these services. Will these services be added to the Price List?

The expectation is that they audit themselves. Training and CDI services would be for purchase and not a part of the normal services. We want the option to purchase the services so we want to ensure the vendor has the capability to audit our documentation/coding and provide training on both. The purchase would be made via separate purchase card or purchase order.

18. What is the production standard on an hourly basis for Census Coding?

Please see the inpatient discharges below for the daily minimum standard per day. Those are the records that will be what will be in Census.

Coder Productivity Standards	
Scope of Work	Minimum Standard per Day <i>NOTE: This is based on a 7.5 hour workday and does not include leave, educational hours, or non-coding activities. Appropriate lower standards may be set for coders in developmental positions.</i>
Inpatient Discharges with Professional Fees	9
Inpatient Discharges without Professional Fees	13
Surgery cases including Billable Pathology and Anesthesia Services	25
Outpatient, Outpatient Testing, and Inpatient Professional Encounters	70

Particular info for Census:

Patient Treatment Files Census Record. A patient treatment file census record documents all VHA medical facility patients in an active inpatient status. Census data includes hospital, Community Living Center (CLC), domiciliary and any VA Community Care facility for which VA is paying (including Contract or Community Nursing Home (CNH)) at 11:59 pm on the last day of each quarter. (December 31, March 31, June 30, and September 30). Census PTF records must be closed out and accepted by AITC as

error free by 6:00 p.m. Central Time on the 7th calendar day following each quarter (January 7, April 7, July 7, and October 7) for inclusion in VHA corporate monthly and annual data file snapshots of closeout workload.

PTF census data records must be closed, released, and accepted within 7 calendar days of quarter end. Census data must be accepted between January 1-7, April 1-7, July 1-7, and October 1-7, annually. Census records sent to AITC containing data errors must be corrected, closed, released, transmitted and accepted in time for receipt by AITC before 6:00 p.m. Central Standard Time on January 7, April 7, July 7, and October 7, annually.