

Statement of Work for Contract Coding VA Pacific Islands Health Care System

PURPOSE

The purpose of this contract is to assign ICD -10-CM and ICD-10-PCS codes based on medical record documentation inpatient admission/hospitalizations provided under the auspices of VA Pacific Islands Care System (VAPIHCS). This is to support the current inpatient coding program.

BACKGROUND

1. The VA Pacific Island Health Care System (VAPIHCS) operates the Honolulu Ambulatory Care Clinic, 60 bed skilled nursing home (Center for Aging), 12 bed PTSD residential rehabilitation program, 16 bed psychiatric ward, and outpatient clinics in Hilo, Kona, Maui, Kauai, Guam, and American Samoa. VAPIHCS is affiliated with the University of Hawaii. The affiliation has medical students, interns and residents who frequently rotate. Additionally, there are students in psychology and nursing. Also, due to high demand and low availability, many specialties are contracted out to Tripler Army Medical Center, Guam Naval Hospital and other community health care entities.

SCOPE OF WORK

1. Contract coders must use their skills and knowledge of ICD-10-CM, ICD-10-PCS and any available resources to select the diagnostic and procedural codes. Contractors must code inpatient care (including authorized and unauthorized purchased/fee care), census (Community Living Center (CLC) and Post traumatic stress disorder residential rehabilitation program (PRRP) based on the documentation in the medical record including the Computerized Patient Record System (CPRS), VISTA, VISTA Imaging, and the Department of Defense's (DOD) electronic medical record systems (CIS, AHLTA, CHCS, JANUS, and JLV).

Additionally, the contractor shall assure that coders follow up with providers to obtain missing documentation, clarification of terminology or other documentation, and any other coding or documentation requirements necessary for accurate coding and billing. Site specific coding guidelines will be provided on an as needed basis in instances where established guidelines are not clear.

2. Service Connection/Special Eligibility. Contract coders shall be knowledgeable on first pass inspection of service connection determination and special eligibility categories.
3. Initial service connection shall be made by the coder.
4. Questionable service connection/special eligibility determination shall be addressed by the Revenue Utilization review nurse and coding shall be held until final determination can be made.

5. Electronic coding software shall be utilized for all encounters coded. Currently, VAPIHCS uses Nuance Compliance Coding Module (CCM) and VIP Workplace. VIP Workplace for inpatient coding and Clintegrity as a standalone coding reference. Additional guidelines will be provided by the site Coding Supervisor for inpatient workload assignment and when needed. Workload may also be assigned by paper documentation/ and or email delivery for authorized and unauthorized purchased/fee inpatient care.
6. All coders are expected to follow all ICD, CPT-4, and HCPCS coding guidelines and to adhere to the Standards of Ethical Coding. A copy of these standards is contained in the latest version of the VHA Handbook for Coding Guidelines, Health Information Management, and Department of Veterans Affairs. It is available on the VHA HIM's webpage through the intranet: <http://vaww.vhahim.va.gov>. The Handbook for Coding Guidelines is a guideline. It is meant to assist coders, but does not take precedence over definitive coding source, e.g., ICD, CPT, HCPCS, DSM-V, CPT Assistant, and AHA Coding Clinic.
7. Contractor shall provide Coding Supervisor updates on any coding error coded by the provider.
8. Contractor shall provide Coding Supervisor notification of any coding discrepancies between codes provided by purchased care provider and coder.
9. Contractor shall provide all labor, materials, transportation and supervision necessary to perform coding and abstracting using standard industry guidelines (AHA Coding Clinic, CPT Assistant, CMS/AMA, etc.). VAPIHCS policies and procedures will be followed. Unclear policies will be discussed with the VAPIHCS HIMS Coding Supervisor, or designee, for clarification.
10. Contractor shall provide staff coverage adequate to meet 7 day VA deadlines. PTF (Patient Treatment file) is closed within 7 calendar days from receipt of work for all types, provided there is sufficient documentation. Lack of documentation for any work type must be communicated to coding supervisor.
11. Contractor shall specify a contact person and phone number for the duration of the work.
12. Contractor shall maintain daily communication with the Coding Supervisor or other designated medical center employee (i.e. team leader) regarding progress, workload status and/ or problems.
13. Upon request of the Contracting Officer, Contractor shall remove any contract staff that do not comply with VAPIHCS policies or meet the competency requirements for the work being performed.
14. VAPIHCS will provide access to the Network for VISTA/CPRS, VISTA Imaging and Nuance VIP Workplace, and Clintegrity Encoder software for all contract coders. All applications will be accessed via Citrix, through VPN, for all remote coders.
15. The Coding Supervisor or VA appointed designee may conduct data validation of the contractor on a monthly basis to confirm that contractual coding meets accuracy requirements. High standards to coding must be maintained. Coding must maintain a minimum of **95% accuracy** with a desired accuracy rate of 98% to be the goal.

QUALITY CONTROL PROCESS

The contractor shall:

1. Complete all encounters received via pull list or other mechanism within 5 days of provision of the complete medical record to the contractor. Completed workload shall be communicated back to the VAMC designee daily in order to keep our billing workflow moving. Alternate timetables are acceptable based on mutual agreement of the contractor and PIHCS. When the contractor cannot meet this deadline due to unforeseen circumstances, contractor shall notify VAPIHCS by the 4th business day after receipt.
2. Perform on-going quality assessment of not less than 5% of all coded services and provide weekly results to VAPIHCS to ensure that the 95% accuracy rate is met. The contractor shall continually monitor and supervise the work performed by the contract coders on a continuous and ongoing basis, at no cost to VAPIHCS. Provide copies of results of the routine monitors to the Coding Supervisor on a weekly basis, with any time spent correcting errors made by contract staff provided at no additional cost to VAPIHCS. Results are to be tracked by coder to assure appropriate follow-up.
3. Re-review any coded data where a question is found by VA during the pre-bill process or when a denial (usage of e-denials website) is received. Corrections shall be made or existing coding substantiated according to appropriate coding rules and references. This service is included in the price of the work. The re-review may be based on an e-mail message so a designated person must log on periodically until notified that it is no longer necessary.
4. Use the standard VA CBI audit form during review processes and to report the data:
 - a. The Standard VA CBI audit contains 5 elements for review for an individual patient visit
 - (1) Principal diagnosis code
 - (2) Secondary diagnosis codes
 - (3) ICD Procedure codes
 - (4) Present on Admission (POA) indicator.
 - (5) DRG Assignment
 - b. For each element, document the correct number of codes (numerator) and the total number of correct codes coded (denominator) on the Standard VA CBI audit.
5. The contractor shall include all anticipated expenses for travel within the proposed cost for this contract.
6. Contractor coding prices may be quoted per encounter or per hour. If per hour quote is given, contract coders will code, at a minimum, an average of 13 inpatient discharges without professional fees per 7.5-hour work day, 9 inpatient discharges with professional fees per 7.5-hour work day, Number of encounters coded will be included with the billing invoice in instances where an hourly rate is charged.

7. The contractor shall agree that all deliverables, associated working papers, and other material deemed relevant by the contractor in the performance of this task order are the property of the United States Government.
8. The contractor shall agree that all individually identifiable health records will be treated with the strictest confidentiality. Access to records shall be limited to essential personnel only. Records shall be secured when not in use. At the conclusion of the contract, all copies of individually identifiable health records shall be destroyed or returned to the VA. The contractor shall comply with the Privacy Act, 38 USC 5701, AND 38 USC 7332. Contractor staff shall sign confidentiality statements as required. Mandatory training requirement on VA privacy Act/HIPAA shall be completed.

REQUIRED CODER KNOWLEDGE AND SKILLS

Coder's performance requirements:

1. Read and interpret health record documentation to identify all diagnosis and procedures that affect the current inpatient admission/hospitalization, and inpatient professional services.
2. Possess formal training in: anatomy and physiology, medical terminology, pathology and disease processes, pharmacology, health record format and content, reimbursement methodology, and conventions, rules and guidelines for current classification systems (ICD-10-CM and ICD-10-PCS)
3. Apply knowledge of current diagnostic coding and procedural reporting guidelines for inpatient services.
4. Code in accordance with Correct Coding Initiative (CCI) edits guidelines (i.e., bundling versus unbundling).
5. Possess training in and apply knowledge of what constitutes a service connected or special eligibility service when interpreting health record documentation
6. Provide a list of coded records bi-weekly
7. The coders will be working remotely from home and/or at the Contractors Facility

Period of Performance

The period of performances shall be at the Contracting Officers discretion: One (1) year BASE and may include one to four (1-4) one-year options.

REQUIRED CODER EDUCATION AND EXPERIENCE

Coders shall be credentialed and have completed accredited program for coding certification, accredited health information management or health information technician. A certified coder is someone credentialed by the:

- a. The American Health Information Management Association (AHIMA) and includes RHIA, RHIT, CCS, CCS-P, or
- b. American Association of Professional Coders (AAPC) as a CPC or CPC-H.
- c. Supervisory Coders must have a minimum of three years' experience in VHA coding.
- d. Credentialed coders must have a minimum of two years' experience in VHA coding.

CONTRACTOR PERSONAL SECURITY REQUIREMENTS

Contractor will obtain security clearances for all personnel who have access to VA records, whether in paper or electronic form. Employees must be cleared by VA security prior to starting VA related work which entails completion of the Questionnaire for Non-Sensitive Positions form and clearance via SIC-Security Investigations Center. Employees will then be processed for fingerprinting, once cleared via VA, New User Access Authorization will be provided to Contractor by VA. Contractor shall certify that all employees who do work for the VA have on file a confidentiality agreement. Further, Contractor shall have all employees participate in VA security training provided by the VA from time to time. Such training shall be offered at the Contractor site. Contractor shall bear the expense of employee wages during such training.

Contractor employs sufficient number of cleared staff members to ensure that all work process included in the statement of work can be performed. Contractor shall provide each employee an identification badge which shall be displayed on the outer garment at all times. The badge shall include, as a minimum, the employee's name and position title, and the Contractor's trade name.

Contractor must possess all licenses, permits, accreditation and certificates as required by law. The Contractor shall perform the required work in accordance with The Joint Commission (TJC), Veterans Health Administration (VHA) and other regulatory standards. TJC standards may be obtained from:

Joint Commission on Accreditation of Healthcare Organizations

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Contractor shall bear the expense of obtaining background investigations from recruited personnel, including replacement personnel. Contractor shall prescreen all personnel requiring access to the computer systems to ensure they maintain a U.S. citizenship or legal alien status and are able to read, write, speak and understand the English language.

Contractor shall provide compensation to personnel, including wages, health insurance, paid time off and holiday pay consistent with VA schedule. Contractor shall agree that all deliverables, associated working papers, and other material deemed relevant by the contractor in the performance of this task order are the property of the United States Government. Contractor shall agree that all individually identifiable health information shall be treated with the strictest confidentiality. Access to records shall be limited to essential personnel only. Records shall be secured when not in use. At the conclusion of the contract all copies of individually identifiable health records shall be destroyed or returned to the VA. Any individually identifiable health records shall be deleted from computers not belonging to the VA. The contractor shall comply with the Privacy Act, 38 U.S.C. 5701, 38 U.S.C. 7332, and 5 U.S.C. 552(a) et. Seq. Contractor staff shall sign confidentiality statements as required. Contractor shall comply with all provisions of the Health Information Portability and Accountability Act (HIPAA) including but not limited to privacy, security of electronic health data, and adherence to standards and code sets as required by HIPAA. Contractor shall insure the confidentiality of all patient and employee information and shall be held liable in the event of breach of confidentiality. Contractor staff must sign confidentiality statements as required. Any person, who knowingly or willingly discloses confidential information from the VA, may be subject to fines.

(End of Statement of Work)