
Response to Vendor questions

1. What is UCDH's desired timeline for completion of the Scope of Work and Deliverables outlined on pages 8 and 9 of the RFP? Are there any specific time constraints or critical dates we should be aware of?

R: 3-4-month timeframe preference.

2. The RFP makes reference to the desire for broad stakeholder input and engagement throughout this process from the Health System, SOM and SON. Within UCDH, who will be the primary sponsor of this engagement? (e.g. UCDH Finance leadership, other)?

R: Sponsor will be the CFO; however, depending on the questions and items needed, may be some diversion to her team of Executive Directors to assist.

3. Are there any resource constraints or limitations that we should consider? What other key stakeholders will be engaged during the assessment?

R: Time allocation related to the Lawson system implementation as well as the normal health system priorities. Other key stakeholders will be the CFO direct reports as well as other c-suite leaders, i.e. operational leaders.

4. To what staff level do you envision the team being engaged with? Will the assessment be held at a leadership level, mid-manager level or engaged by the full department?

R: Down to the mid-manager level but based on need could go to staff.

5. The intro in the RFP states the assessment should address areas for the Health System, School of Medicine (SOM) and School of Nursing (SON) divisions. Are there any finance departments that are excluded from the assessment? (e.g. UC Ambulatory, Medical Group)?

R: The team is responsible for all aspects of finance across the health system, therefore UC ambulatory and the medical group would fall under this as well.

6. Is tax, treasury, accounts payable or procurement included within this Finance assessment scope? Are there any other Finance sub-areas that are often part of other functions such as real estate, payroll, financial systems, revenue cycle, PMO included within this Finance assessment scope?

R: Accounts payable would be included as well as payroll since they fall under our accounting team. The revenue cycle team is not listed even though it is under the CFO's org chart because there is another RFP that is addressing revenue cycle, as a whole. Financial systems would be included in the assessment. Procurement is considered out of scope.

7. What process areas are performed by Managed Care Operations?

R: Managed Care Operations (MCO) maintains eligibility of employees, employee family members, and capitated members assigned to UCD. MCO processes all claims (internal, external, hospital, and physician) for employees, employee family members, and capitated members with assigned risk to UCD. MCO manages all aspects of the eligibility and claims process including negotiating Letters of Agreement for referrals to outside vendors, processing claims checks, processing patient refunds and denials, and being subject to health plan audits.

8. What process areas are performed by Decision Support (e.g. cost accounting, Medicare cost reporting)? And at what level(s) are they provided (e.g. System and Division-level or further down to the departments and service lines)?

R: Cost accounting would be performed under decision support and Medicare cost reporting is under Government Reimbursement.

9. What systems and third-party partners are involved in the Finance workstreams in scope below:
- Accounting and Reporting
 - Budgeting and Forecasting
 - Decision Support
 - Managed Care Operations
 - Payor and Pharmacy Contracting
 - Governmental Reimbursement

R: Please see below:

- Hospital Budgeting – EPSi (now Strata), SOM Budgeting system – Axiom (soon to be Oracle), Forecasting system – Axiom/Syntellis. Cost Accounting system – EPSi (now Strata).
 - Managed Care Operations (MCO) - EPIC/Tapestry for Claim adjudication, BMI for web hosting/claim data entry, Office Ally for EDI claim, Emdeon for EDI claim, Kauli (LAWSON), Echo (Credential Stream), OnBase, Citrix, Optum EncoderPro (Web based not software), Rightfax, Clarity, Filezilla, and WinSCP
 - Provider Enrollment - Trizetto Provider Solutions as a clearinghouse, EPIC/Tapestry for Claim adjudication, BMI for web hosting/claim data entry, Office Ally for EDI claim, Emdeon for EDI claim, Kauli (LAWSON), Echo (Credential Stream), OnBase, Citrix, Optum EncoderPro (Web based not software), Rightfax, Clarity, Filezilla, CMS PECOS, CMS Pave, and WinSCP
 - Government Reimbursement – EPSi, Citrix, EMR, Winzip, Health Financial Systems (HFS) for cost report software and HCRIS database, CCH regulations, Absolute Toyon Cost Report software for workpapers, CMS- PSR and MCR filing, CMS pricer, CMMI, OnBase, Kauli (LAWSON), Physician Links (Crowe), Manatt, Sellers Dorsey, Toyon for appeals and consulting
 - Payor and Pharmacy Contracting - Systems: all main UCDH systems are utilized/accessed by Contracts staff; C360 for electronic contract storage/organization; TP Vendors: NONE
10. Please provide any background around prior internal or external consulting projects or audits performed around the Finance workstreams in scope below, including any findings of note (e.g., organization restructuring, system changes, etc.)?
- Accounting and Reporting
 - Budgeting and Forecasting
 - Decision Support
 - Managed Care Operations
 - Payor and Pharmacy Contracting
 - Governmental Reimbursement

R: No previous engagements as related to this RFP.

11. Can you provide current organizational charts for the below Finance workstreams in scope?
- Accounting and Reporting
 - Budgeting and Forecasting
 - Decision Support
 - Managed Care Operations
 - Payor and Pharmacy Contracting
 - Governmental Reimbursement

R: Organizational charts can be provided upon an executed NDA and/or bid award as deemed appropriate by UCDHS.

12. You note “Internal control processes for the appropriate balance of controls and to ensure they do not constrain business processes” as a deliverable. Do you envision a detailed documentation of current or future state internal control over financial reporting?

R: No, but would like to know of any items not appropriate in their review. Focus should be based on best industry standards/practices and opportunities for improvement within our current workstreams.

13. The RFP makes reference to a Phase 2 “which may include additional work product as approved during the engagement” and will be based on a Time and Materials basis. Is it fair to assume that the Scope of Work and Deliverables outlined on pages 8 and 9 of the RFP should all be structured within Phase 1, whereas any potential new deliverables identified throughout the engagement would be structured as part of a potential Phase 2?

R: The initial assessment for the identified scope would fall under Phase 1. If there is a need for scope expansion and/or implementation, this would be addressed in a Phase 2 approach.

14. Are there any other on-going, planned projects and developments that may create interdependencies and influence the assessment?

R: Project to update the ERP system and Phase 1 is near completion in December.

15. Does UCDH have a prioritization of financial functions or services that are most critical to its immediate needs?

R: Not necessarily as this is an overall assessment and all functions of utmost importance.

16. Are there any financial functions, services and/or efforts that are considered out-of-scope?

R: Nothing is out of scope from a financial function/services perspective.

17. Does UCDH allow hybrid or remote work, or prefer for its contractors to work onsite?

R: No preference, in particular. If remote or hybrid is needed initially that is fine, although the final report and presentation we would ask to be in person.

18. For the RFP response, is there a word or page limit?

R: No. It's preferred to answer all RFP questions in a concise as possible manner.

19. Part A 1.b asks for “names and titles of company principals.” Our firm has hundreds of company principals/partners. May we simply list those that will be staffed on this project?

R: Yes, only those that would be part of this project.

20. Part A 6.a states the following: “Vendor shall secure the required trust agreements with any third-party business associates to protect the confidentiality of UC Davis Health medical and patient information.” Can you please clarify what trust agreements will need to be in place and by when?

R: Any subcontractor that is utilized will be required to be bound by the agreement terms with the prime vendor.

21. Per Section V of the RFP, under the Introduction in the second paragraph, a reference to an “Excel Spreadsheet” was made for Exhibit C, however no Excel template was provided as part of the solicitation. Please confirm what should be included in Exhibit C and in what format.

R: This is a typo. Responses should be provided in accordance with Exhibit B – Bidder Response Proposal – which is posted in PDF version. Exhibit C is specific to our Non-Disclosure Agreement requirement.

22. Part C states the following: “The references may be from two current and one prior client.” Is this required? For example, may two of the three references be for prior clients?

R: We need relevant client-based references (i.e. similar services).

23. Part D states that “UCDH desires to enter into a Fixed Fee contract with a single Bidder for Phase 1 of this RFP.” Can you please confirm that the scope of work included in this RFP is only applicable to Phase 1 and not Phase 2?

R: Correct, only Phase 1. However, if Phase 2 is deemed necessary, the proposed rate sheet would be in effect for all subsequent endeavors.

24. Is there a budget already established by UCDH for this project?

R: There is an anticipated budget however this is not yet disclosed at this stage of the RFP.

25. Since UCDH requests a Fixed Fee contract, may we provide a few options for total Fixed Fees with varying levels of effort/procedures? For example, may we provide a lowest total cost, mid-level total cost, and highest total cost based on increasing levels of effort? This may be impacted by the amount of travel for onsite work, number of employee interviews, and other factors that may impact total fixed fees.

R: Best value proposition; time and material rate sheet is required.