
Solicitation Amendment

Total Joint Replacement Bundled Episode of Care

RFP No. 15-023

Amendment No. 10

Date Issued: January 11, 2016

Purpose: RFP 15-023 Questions and Answers

Amendment need not be submitted with Proposal. All other Terms, Conditions, and Specifications remain unchanged. The above referenced solicitation is amended as follows:

QUESTION AND ANSWERS

The following applies to RFP 15-023 Questions and Answers:

Q1: Please clarify the missing information from Exhibit 1, under Warranty Period, of RFP 15-023 stating, “The diagnostic code for osteoarthritis for either total knee or total hip replacements: ICD-9 (or applicable ICD-10) diagnostic code=”.

A1: The diagnostic code for osteoarthritis for either total knee or total hip replacements: ICD-9 diagnostic code = 715.X (“715 Osteoarthritis and allied disorders”). The applicable ICD-10 codes were not identified in the Bree Criteria but would be identified during the contract and implementation period.

Q2: In Appendix A of the Submittal Document, Question 4b refers to Q6 and Q22 in the HCAHPS. Please confirm the specific questions to which HCA is referring since questions can be modified.

A2: Question 6 of the HCAHPS survey is, “During this hospital stay, how often did doctors listen carefully to you?” Question 22 of the HCAHPS survey is, “Would you recommend this hospital to your friends and family?”

Q3: The minimum qualification section requires confirmation that, “orthopedic surgeons who will be performing TKR/THR Bundled Episodes of Care, perform a minimum of fifty of either total knee or total hip replacement surgeries per year”. Historically, if a surgeon performed approximately 45 TKR and 125 THR per year, would they still meet the minimum volume for both procedures to achieve the minimum volume standard?

A3: The number of TKR and THR procedures cannot be combined to achieve the minimum volume standard.

Q4: Please confirm whether an organizations’ program has to follow all of the Bree Criteria recommendations for TKR/THR in order to be accepted? Is this something that can be negotiated during contract negotiations?

A4: HCA intends is that the Center(s) of Excellence (COE) programs will follow all of the Bree Criteria recommendations for TKR/THR. If there is a specific Bree Criteria recommendation that your organization does not meet, please describe the rationale behind excluding the recommendation, and why your approach results in a better outcome for patients.

Q5: Please clarify if Proposers are required to list any subcontractors in their submission. Will Awarded Contractor(s) be allowed to add subcontractors at a later date if they are not included in the RFP response?

A5: HCA requires proposers to list subcontractors that will assist the proposer's in carrying out the Total Joint Replacement Bundled Episode of Care. Awarded Contractor(s) will be allowed to add subcontractors at a later date if they are not included in the RFP response.

Q6: The RFP states that HCA will award up to five (5) contracts for the Total Joint Replacement Bundled Episode of Care, and includes in Amendment 6, that each organization that submits a response needs to clearly identify their COE. Please clarify if a health system with multiple acute care facilities would be considered 1 (one) contract and if they will be required to perform procedures at a single acute care facility that they designate?

A6: No. A health system with multiple acute care facilities will need to document, any location where a patient will receive care and state in writing that these facilities meet the Bree Criteria for TKR/THR.

Q7: Please clarify if part of the five (5) contracts provision includes awarding a contract to both acute care facilities and physician group(s)?

A7: HCA encourages alignment and partnership between physicians and acute care facilities in providing TKR/THR services. To that end, HCA intends to contract with up to five (5) Centers of Excellence. A Center of Excellence may be owned by a health system, a physician group, or a combination of both.

Q8: If a physician group is awarded a contract, please clarify if they will be required to perform all procedures at a single designated acute care facility under the contract, or can they provide services at multiple facilities as one (1) awardee.

A8: If a physician group is awarded a contract, they will need to identify the acute care facility (or facilities) where they will be performing TKR/THR procedures. The intention is that the physician's group and acute care facility (or facilities) will operate as one (1) COE. Each COE (including acute care facilities where care is provided) must be able to document that it is able to meet the Bree Criteria. If a physician group performs these procedures at more than one acute care facility, each facility must have an organized protocol and must meet the Bree Criteria.

Q9: Please clarify if the Total Joint Replacement Bundled Episode of Care is limited to a specific geographic area or is it statewide?

A9: The HCA intends that UMP Members will have access to one or more a Center(s) of Excellence for TKR/THR located within Washington state.

Q10: Does the potential Awarded Contractor have to be contracted with Regence?

A10: As stated in Amendment 6, Question 1, HCA has not limited this procurement to providers who are in Regence's network. This opportunity is open to any proposer who meets the criteria of the RFP.