



SAIF Corporation – RFP – (Medical Bill Review and Negotiation Services)

#	Question by Proposer	Response by SAIF
1.	Is there an RFP#?	Yes. SAIF's RFP # is 58. ORPIN's RFP # is 435-1025-15.
2.	Is there a mandatory pre-bid meeting?	No.
3.	Is there bonding required?	No.
4.	What was the cost of these services last year?	The fees paid for services were between \$200,000 and \$250,000 in 2014.
5.	Can you provide a bid tabulation?	SAIF requested clarification from the vendor about this question, but did not receive a reply.
6.	Please provide the number of bills processed under this contract each year for the last three years.	2014: 177 bills 2013: 21 bills 2012: 29 bills
7.	Please clarify if SAIF has its own out of state networks and only wants the proposer to do hospital negotiations or non-PPO negotiations, or if the proposer can audit hospital bills utilizing its PPO's?	SAIF does not have its own out of state networks. The proposer should include PPO network discounts, as long as the network discounted payment represents payment in full to the provider and the worker is protected from balance billing by the provider.
8.	Can Specialty Bill Review can be used for auditing outside of normal negotiations, i.e., specialty programs or specialty networks?	SAIF may have interest in other types of bill negotiations and network discounts for other out of state medical provider types. The proposer should address this in F. 12 of the RFP.

9.	Who is the current service provider assigned to this contract?	CorVel Corporation Qmedtrix Systems, Inc.
10.	Who provides services for the instate bills?	SAIF conducts its own audit of bills from in-state providers.
11.	Is the proposer required to build an interface with the SAIF existing bill review platform?	No, SAIF would not require a bill review interface be built. SAIF would fax bills and chart notes to the contractor for processing. We would need the explanation of review and the signed provider agreement emailed back to SAIF. SAIF would mail this to the provider with payment.
12.	Is the proposer required to build an interface with the SAIF claim system?	No SAIF would not require a claim interface be built. SAIF would fax bills and chart notes to the contractor for processing. We would need the explanation of review and the signed provider agreement emailed back to SAIF. SAIF would mail this to the provider with payment.
13.	What are the current rates for this contract?	Our current rates are not relevant to the RFP, as we are asking respondents to propose rates with which they are comfortable, not match rates that currently exist.
14.	Please provide a summary of bills processed the last year including number of bills, billed charges, reductions by type of reduction and total fees.	Bills processed through current bill review companies: <ul style="list-style-type: none"> • See responses #4, #6 • Billed charges: between \$3 - \$3.5 million Net savings rate (minus fees): between 32% - 38%
15.	How many out of state hospital bills did SAIF have in 2014?	SAIF received approximately 2100 bills for compensable workers' compensation claims from out of state hospitals in 2014. Many bills are not processed through the bill review companies for the following reasons: <ul style="list-style-type: none"> • Some providers have been unwilling to negotiate discounts. • Some bills are for low dollar amounts and are not included in the bill review process. SAIF has direct discount agreements with some out of state providers.
16.	What was the total billed charges for these out of state hospital bills in 2014?	There were approximately \$10 million in billed charges from out of state hospitals in 2014.
17.	Has SAIF used an outside vendor for these services in the past or has this bill review function always been done in house?	SAIF currently uses two outside vendors for this process; see response #9.

18.	What percentage of the total out of state hospital bills come from the three border states mentioned in the RFP (Washington, California and Idaho)?	Approximately 85% of out of state hospital bills are from Washington, California and Idaho. Most of the 85% are from Washington hospitals.
19.	Will the vendor selected for this work be required to have business interaction with any Oregon MCO?	It may be beneficial for the proposer to have a limited business interaction with an Oregon MCO.
End of Q & A		