

RFI-002-10/11
STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION
REQUEST FOR INFORMATION
INDEPENDENT THIRD PARTY CLAIM DISPUTE RESOLUTION

1. REQUEST FOR INFORMATION

The Agency for Health Care Administration (Agency) requests information from qualified vendors interested in providing independent third party claim dispute resolution to Medicaid providers. These services are to be provided at no cost to the Agency and/or the State of Florida.

A Request for Information (RFI) is not a method of procurement. Responses to a RFI are not offers and may not be accepted by the Agency to form a binding contract. This RFI shall not directly result in the execution of a contract with the Agency. The Agency reserves the right to utilize the information gathered through the RFI process to develop a scope of services, which may be incorporated into a contract using a statutorily approved method of procurement.

2. BACKGROUND

During the 2000 Legislative Session, the Agency was given the authority to contract with a “qualified independent third-party claim dispute-resolution-entity”, hereinafter referred to as the resolution organization, to provide assistance to contracted and non-contracted providers and health care plans for resolution of claims disputes within the parameters of Section 408.7057, Florida Statutes (F.S.) and Rule 59A-12.030, Florida Administrative Codes (FAC). The resolution organization must meet the following requirements:

- a. Shall be a qualified independent third-party claim-dispute resolution entity as outlined in Section 408.7057(1)(c), F.S.;
- b. Shall have the staff necessary to perform a timely and qualified review of submitted claim disputes;
- c. Shall have the capability to complete the claim review within sixty (60) days after the requested information is received by the resolution organization and not to exceed ninety (90) days after receipt of the initial claim submission as outlined in Section 408.7057(g)2(3), F.S.;
- d. Shall be available to review and process cases on an as needed basis. The number of dispute cases submitted cannot be anticipated;
- e. Shall be registered to do business in the State of Florida through the Florida Department of State’s Division of Corporations and be a registered vendor in MyFloridaMarketplace. Information regarding registering with the Florida Department of State can be accessed at <http://www.sunbiz.org/>. Registration with MyFloridaMarketplace can be accomplished on line at

[http://dms.myflorida.com/business_operations/state_purchasing/myflorida marketplace](http://dms.myflorida.com/business_operations/state_purchasing/myflorida_marketplace).

- f. Shall comply with the Department of Health and Human Services Privacy Regulations specified in the Code of Federal Regulations, Title 45, Sections 160 and 164 regarding the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

3. ANTICIPATED SCOPE OF SERVICES

The resolution organization shall perform claim dispute review and resolution services within the parameters of Section 408.7057, Florida Statutes (F.S.) and Rule 59A-12.030, Florida Administrative Codes (FAC).

The resolution organization shall determine, based on the desk review whether the claim disputes submitted by health care plans, and/or contracted and non-contracted health care providers meet the statutory requirements of Section 408.7057(2)(b); (c); and (d), F.S., and meet the claim threshold requirements specified in Rule 59A-12.030(2)(a); (b); and (c), FAC. Determination shall be completed within ten (10) days after receipt of the claim dispute.

If the resolution organization determines that the request fails to meet statutory and rule requirements, the resolution organization shall notify the entity filing the request. If the request meets the requirements, the resolution organization shall issue a written recommendation to the Agency, based on finding of fact, within sixty (60) days after the request is received by the resolution organization.

The dispute resolution procedure shall entail the review of the documentation provided and any additional information requested by the resolution organization. The resolution organization shall have the capability to research the claim dispute submission and make a recommendation to the Agency regarding, but not limited to, legal aspects of contract specifications and contract termination clauses, appropriate medical coding and use of modifiers, and determination of "usual and customary" charges of medical procedures within a geographic area.

The Agency shall issue a final order within thirty (30) days after receipt of the recommendations issued by the resolution organization. The Agency will enforce the final order as authorized under Section 641.52(1)(e), F.S.

4. COST INFORMATION

This is a no cost Contract. The resolution organization shall absorb all costs associated with providing the claim dispute review and resolution services. The resolution organization shall receive payment for review fees from the party that does not prevail or by both parties, if the recommendation and final order provide for an apportionment of the review fee in cases in which both parties prevail in part.

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5. RFI RESPONSE REQUIREMENTS

Vendors responding to this RFI are asked to be thorough, but concise. The total response to this RFI should be limited in length to no more than fifty (50) single-sided pages.

The RFI response should including the following information:

- a. The vendor's name, place of business address(es) and contact information, including representative name and alternate if available, telephone number(s) and email address(es);
- b. A statement of interest in the proposed services outlined in this RFI;
- c. Information concerning the vendor's ability to perform the services required, including qualifications and experience in implementing and administering claim dispute resolution services;
- d. Program specifications, including information on the vendor's approach for review of cases and recommendations; and ability to share data with the Agency;
- e. Description of the vendor's information systems capabilities and security features, including the ability to protect information in compliance with HIPAA requirements;
- f. A description of the vendor's protocols and internal procedures for ensuring system security and the confidentiality of personally identifiable data, as well as its disaster recovery plan and ability to resume service with minimal disruption;
- g. Information with regard to proposed staffing, including:
 - Number of proposed staff and designation of full time staff;
 - Responsibilities of staff by position;
 - Resumes for proposed staff;
 - Training requirements; and
 - Background screening criteria utilized for hiring.
- h. A description of the vendor's quality assurance system, including a description of how the vendor intends to monitor the appropriateness and effectiveness of the service;
- i. The vendor's fee schedule, which includes the charge per hour for:
 - Physician Expert Review
 - Utilization Nurse Review
 - Medical Claims Coding Expert Review
 - Legal Expert Review
 - Review Fee for Initial Review to determine Eligibility

- Any other possible Review Fees
- j. Corporate Background and Experience, which includes the background and experience in tasks that are similar to the tasks required by Section 408.7057, F.S. and 59A-12.030, FAC, including, but not limited to:
- References;
 - Dispute resolution experience;
 - Dispute resolution experience related to health care issues;
 - Dispute resolution experience related to HMO and provider disputes;
 - Dispute resolution experience related to HMO and subscriber disputes;
 - Experience in health care financing;
 - Experience in coding of medical claims; and
 - Corporate personnel, computer, and other resources.

6. PROPRIETARY INFORMATION

This RFI and any response to it are public records under Chapter 119, Florida Statutes. Responses must indicate which portions, if any, of the information provided are trade secret by marking each page upon which such information appears as "trade secret pursuant to Section 812.081, Florida Statutes. Vendors must indicate which portions, if any, of the information being provided are trade secrets, by marking each page upon which such information appears. Information specifically identified as a trade secret under Section 812.081, Florida Statutes, will be kept confidential to the extent provided by law. If the Agency receives a public records request for information that has been identified by the responder as a trade secret, the Agency will notify the responder of such request.

7. RESPONSES

Responses to this RFI should be provided no later than **5:00 PM, Eastern Time, October 19, 2010**. Responses can be sent via email to:

Chrisy Smith, Procurement Office
chrisy.smith@ahca.myflorida.com

Additional information that cannot be transmitted electronically must also be submitted by **5:00 PM, Eastern Time, October 19, 2010**, to the following address:

Agency for Health Care Administration
Procurement Office
Attn: Chrisy Smith
Building 2, Suite 203
2727 Mahan Drive, MS #15
Tallahassee, Florida 32308

8. VENDOR COSTS

Vendors are responsible for all costs associated with preparing a response to this RFI. The State of Florida, Agency for Health Care Administration, will not be responsible for any vendor costs associated with preparing this information.

9. QUESTIONS

Questions concerning this RFI can be submitted in writing via email to the address listed above. All responses to questions received will be made, in writing, directly to the sender.

10. AGENCY FOR HEALTH CARE ADMINISTRATION WEBSITE

Additional information about the Florida Agency for Health Care Administration can be found on the Agency's website at: <http://ahca.myflorida.com>.

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