

# Pathology Services Request for Proposal (RFP)

Response Submitted By:	
Representing:	
Submission Date:	

**1. Key Contact Information**

Holy Cross Hospital – Key Contacts			
Name	Title	Email	Phone
Bill Patten	CEO	<a href="mailto:bpatten@taoshospital.org">bpatten@taoshospital.org</a>	575-751-5714
Steve Rozenboom	CFO	<a href="mailto:srozenboom@taoshospital.org">srozenboom@taoshospital.org</a>	575-751-5713
Jeff J. Schenck	Asst. Vice President Ancillary Services	<a href="mailto:jschenck@taoshospital.org">jschenck@taoshospital.org</a>	575-751-5872

**2. Holy Cross Medical Center Information:**

Holy Cross Medical Center (HCMC) is the central hub for health care in north central New Mexico. It is home to over 80 physicians, covering a variety of ever-expanding specialties that include internal medicine, family practice, wound care, dermatology, obstetrics and gynecology, orthopedics, general surgery, interventional radiology, urology, pediatrics and a fully-staffed emergency department.

Incorporated in January 1980 as a 501(c)(3) private, non-profit charitable organization, Taos Health Systems became the parent company of Holy Cross Hospital. We are in the process of becoming Taos Health Systems, dba Holy Cross Medical Center. Holy Cross Medical Center has since grown to include the Women’s Health Institute, Taos Surgical Specialties, Physical Rehabilitation Services, and Primary and Pediatric Care. Holy Cross Hospital was established in 1936 and today the hospital is a not-for-profit 25 bed, critical access, full-service facility that is DNV accredited and ISO 9001:2008 certified.

The current fiscal year for HCMC is June 1 – May 31. For our most recently completed fiscal year, 5/31/18, we reported the following results:

- Volumes
  - IP admissions: 1,514
  - Average daily census: 13.7
  - Newborns: 218
  - OP patient visits: 43,911 (not exams)
    - Lab tests: 224,592
    - Surgical Specimens: 2,526/year
    - Dermatology send out Consultations: 220/year
    - Second opinion send out Consultations: 120/year
    - Frozen Sections: 12/year
    - Pap Smear send outs: 1,200/year (could do in-house with cytology screening)
    - Non-gynecological cytology: 65/year

- **Bone Marrows: 5/year**
  - ED visits: 14,602
  - Surgical procedures: 2,999
  - Clinic visits: 27,139
    - Taos Surgical Specialties: 6,040
    - Women's Health Institute: 7,074
    - Center for Physical Health: 12,910
    - Primary Care: 3,223
- Financial results
  - Consolidated gross revenues: \$131,681,013
  - Consolidated net operating revenue: \$59,131,724
  - Operating Expenses: \$62,307,050
    - Payroll: \$27,003,788
      - FTEs: 373 (Hospital & Clinics)
    - Benefits: \$4,915,508
  - Net operating gain / <loss>: <\$3,175,326>
  - Days cash on hand: 8.7

## **RFP Purpose**

The purpose of this request for proposal is to review, select and implement a solution to replace the current Pathology model at Holy Cross Hospital. We are seeking an anatomical pathology and histology system that is patient focused, provides a robust QC segment for anatomical pathology correlation and workload monitoring, and provides a fully focused application for the intensive interactive nature of the pathology workflow.

## **Scope of Pathology Services**

Under the proposed agreement, selected Pathology solution will provide the following services on an agreed upon fee arrangement:

1. Provide a qualified and fully credentialed Pathologist on site at the hospital as needed and negotiated in the agreement/contract;
2. Provide interpretation/results of all specimens according to policy as appropriate for those procedures offered at the hospital with final reports contained within the hospital's EMR for each;
3. Establish a schedule for service availability with a sufficient amount of time for the review of each specimen, discussion of interpretation with the ordering clinician as requested, and performance of on-site procedures for which a Pathologist must be present;

4. At Pathology groups' expense, maintain coverage for consultation as negotiated in the agreement/contract;
5. Ensure that a Pathologist is available, as necessary and reasonable, to provide consultation concerning the interpretation of a specimen, when requested by a medical clinician or when the applicable standard of care dictates that such consultation shall occur. Make every effort to ensure that a Pathologist provides a reading on a STAT report as quickly as possible.
6. Provide communication and education with the hospital's medical staff and the public as reasonably requested by the hospital;
7. Select Pathologists who are fully qualified and able to perform the duties as stated above, but within their scope, expertise, and credentials of each individual Pathologist;
8. Ensure all professional services are provided in accordance with the DNV, the College of American Pathologists, all other applicable regulatory and accrediting agencies and organizations, and the hospital's policies, procedures, and corporate compliance program;
9. Be an approved provider for Medicare, Medicaid, and contracted with all payers whom the hospital contracts;
10. Participate in the peer review and quality assurance activities.
11. Comply with all federal and state laws relating to patient care and related activities;
12. Provide "normal" or "standard" templates for dictation and ensure that the Pathologists dictate into the hospital's dictation/EMR system reports on all examinations, procedures, and other services performed in the Laboratory Department within twenty-four (24) hours of completion of the service. Such records shall be made in accordance with the standards set by the College of American Pathologists;
13. As requested, attendance at Board and/or other meetings;
14. Be a member of and actively participate in Holy Cross Hospital Medical Staff meetings and processes;
15. A board certified Pathologist must serve as the Medical Director for all Laboratory services performed at HCMC and performs the tasks pursuant to this contract.

### 3. RFP Timeframe and Requirements

RFP Schedule	
<u>Deliverable</u>	<u>Date</u>
RFP provided to selected vendors	8/06/18
Deadline for RFP Questions	8/27/18
Deadline for submission of vendor proposals	9/10/18
Submitting vendors notified of selection	9/19/18
Contract negotiations completion	12/10/18
Contract start date	1/2/19

- **Response Requirements**

- Two complete sets of proposals replying to all requested information must be submitted to the address below by September 24, 2018 at 4:00PM (Local time and date).

Holy Cross Medical Center  
Chief Executive Officer  
1397 Weimer Road  
Taos, NM 87571

**Holy Cross Hospital** reserves the right to reject any proposal deemed incomplete or received after the date and time listed above.

- **Questions/Clarifications to RFP**

- All questions and clarifications are to be submitted via email with “Pathology Services RFP Clarification” in the subject line to:  
  
Jeff J. Schenck, AVP Ancillary Services, [jschenck@taoshospital.org](mailto:jschenck@taoshospital.org)
- Each vendor’s RFP response shall remain firm for a period of 180 days from the proposal due date.

**4. Proposing Pathology Group Information**

Pathology Group Name -- Key Contacts			
Name	Title	Email	Phone

Pathology Group Information	
# Pathologists	
# Specialists	
# Support Staff	
# Other Employees	

Key Medical Specialty Leaders		
Name	Title	Specialty

Please provide:

- Your group’s current leadership structure description and current leaders with titles.
- A list of all hospital contracts you have won in the last 12 months.

- A list of all hospital contracts terminated in the last 12 months.
- A CV for each Pathologist in your group.

## **5. Proposal of Pathology Services to Be Provided**

### **A. Pathologist Coverage**

- Describe how the group proposes to provide Pathologist coverage and services to the hospital. Include any 3<sup>rd</sup> party groups that would be included in the proposed services.
- If the use of “Preliminary Reports” is part of the proposed services, please describe when they are used, who is generating them, the process and timing of generating a “Final Report,” how the report discrepancies are managed, reported and communicated, and how the reports will be entered into the hospital’s EMR.
- Describe any areas of sub-specialty provided by your group, and how those services are provided. Please indicate the qualifications used to determine the specialty service.
- Describe any cytology and/or histology services that the group proposes that it will provide.

### **B. Final Report Turn-Around Times**

- Describe contracted Final Report Turn-Around Times based on a 24x7 environment.
- Describe how report turn-around times are measured *and* reported to the hospital.
- Please include (via an attachment) an example of a report that would be used to report turn-around time performances.

### **C. Support of Medical Staff**

- Describe how referring physician consultations are supported. Please include hours of availability, how consultations are coordinated and access to second opinions.

### **D. Quality Assurance**

- Describe your group’s approach towards ensuring quality.



- Describe your group’s standard approach to “Peer Review” and your peer review process. How do you correlate statistical analysis data? Please include tools used, “blinding” process, how quality is measured, and the standards levels assessment used.
- How do you provide additional discrete data fields to facilitate more comprehensive and meaningful QA reports?
- Describe your ability to capture/configure statistical data to include CPT and revenue codes.
- Describe how identified quality issues are addressed, tracked, reported, and communicated with the hospital.
- In the event of a quality issue with an identified Pathologist, describe the process to address and remove the Pathologist from the hospital practice. Please describe any potential impact to the level of service for the hospital as a result of this process.
- Describe your group’s approach toward ensuring that “Critical Findings” are tracked and communicated effectively. Please include tools used, reports tracking, and team staff involved to support this process.
- Describe how Quality Assurance and Critical Findings performance will be tracked are reported to the hospital. Please include an example (via an attachment) of the provided report.
- Provide an example of internal and external surveys conducted to ensure continuous improvement.
- Describe your ability to import or link gross images and microscopic images to a case.
- Describe your ability to have electronic correlation of gross findings.
- Please provide the name and contact information for your identified quality officer.

#### **E. Report Generation and Editing**

- Describe the process and technology used to generate and edit final reports.
- Describe steps taken to ensure report completeness and consistency across the group of individual Pathologists.
- Describe any expectations or needs pathology group has for hospital staff in generation of pathology reports (technology, people, integration, etc.)
- Describe ability to display adequate case data while working on a patient- such as case history, previous pathology reports, clinical lab results, cytogenetics, molecular testing results, etc.
- Describe ability to search/query in the EMR/LIS efficiently. Ability to search case reports of patients to identify specific diagnoses, number of cases, number of correlations, etc.
- Describe ability to electronically order all additional testing (histochemistry, immunohistochemistry, molecular, etc.) on any case and at different phases to include multiple blocks, as needed, simultaneously.
- Describe ability to produce comprehensive reports: to include original final diagnosis and all associated ancillary test results (cytogenetics, FISH, molecular, flow cytometry, other). It is necessary for all these results to be automatically incorporated into the comprehensive reports.
- Provide a representative sample of your group's pathology reports:
  - General final reports
  - Sub-specialty reports (if applicable)
  - Preliminary reports (if applicable)
  - Report addendums
  - Revised reports
  - We will use Mmodal's voice recognition (installing Fall 2018).

## **F. Marketing**

- Provide an overview of the group's experience in promoting Pathology Services to the community and referring physicians.

- Describe your group’s involvement in assisting the generation of referrals for client hospitals.
- Describe your group’s strategy and capacity for growing the business.
- Provide examples of efforts to work with hospital administration and medical staff to strengthen the fiscal performance of the Laboratory Department, including new revenue generation.

**G. Metrics**

- Describe any utilization reports, performance metrics, etc. that your group will provide the Hospital on an ongoing basis.
- Describe the tools you will use to help us understand how our department is performing and how to optimally grow our business.
- Ability to generate a “workload productivity” report as needed. The information required in this report would include number of cases reviewed and respective interpretations by case. Further, it would need to be tracked at the sub-specialty level.

**H. Operational Support**

- Describe any operation support that will be provided to the hospital.
- Please list all requirements for a start-up timeline. Describe how quickly you can initiate service.
- Describe the steps involved in a typical new contract start-up program, including collaboration needed from the hospital in the start-up process and space requirements.

**I. Governance Model**

- Describe your medical director’s duties and expectations.
- Provide the leadership structure used to ensure physician accountability.
- How are operational and strategic decisions made within your group?

- Please list your education and management resources available to group members.

#### **J. Pathologist Staffing And Retention**

- What advantages does your organization have in its ability to recruit quality Pathologists?
- How are your Pathologists compensated and incentivized to achieve performance goals?
- Is it proposed that Pathologists assigned will work exclusively at our hospital?
- What is your proposed on-site staffing plan for the Pathology department at our hospital?
- How do you assure that newly hired Pathologists are high quality?
- Do you track recruiting and retention metrics? If so, please provide information for the past 3 years.

#### **K. Financial Considerations**

- How do you propose to structure this contract financially?
  1. Proposed Medical Director fees, if any?
  2. Proposed group subsidy fees, if any?
- Provide a description of the group's capabilities and experience with separate billing.
- Describe the operations of the billing and collection function (include complaint resolution and interaction with the hospital).
- Provide the name, address, and phone number of the proposed billing service and indicate whether this is an outside service.
- Describe your malpractice insurance program, including provisions for tail coverage and carrier information. Is the premium paid by the group or by the individual Pathologists?

## **L. Clinical Effectiveness Programs**

- Describe your group's clinical effectiveness experience, including but not limited to, information regarding:
  - Protocol development
  - Review of order appropriateness
  - Development of ordering guidelines/suggestions for referring physicians
  - Reducing variations in practice
  - Measuring outcomes
  - Pre-defined CAP developed electronic cancer checklists (protocols)
  - Inventory of FFPE blocks
- Must be able to meet and accommodate industry staging standards for all diseases we are required to report.

## **M. Information Technology**

- Describe how your group uses IT to provide your service with emphasis on any components that are superior or unique to your group.
- Describe how the group will assure that all relevant clinical information is available in the hospital's EMR.
- Describe your ability to use the hospital's EM/LIS for accessioning. There needs to be a process by which we can have real time accessioning with information pulled from the EMR/LIS, and be able to customize what is required at different times. Ability to pull different details into Histology vs. Cytology cases.
- Describe ability to provide automated inventory management for (send-out) referral tests and pathology reviews/personal consultations. Ability to provide alerts to staff when blocks and/or slides that have been sent out have not been returned. Also be able to provide alerts to staff when blocks and/or slides need to be returned to external contributor.
- Explain how your system provides an audit trail for archived cases.
- Describe ability to track specimens, slides, and blocks from receipt until sign out.

- Must be able to interface to all necessary systems with no additional costs to the facility.

**N. Additional Information**

- Provide any other information that you believe will be helpful and relevant to the evaluation of this RFP response.

I hereby acknowledge that the above information is accurate and completed to the best of my knowledge.

\_\_\_\_\_

(Electronic Signature)

\_\_\_\_\_

Date

Name

Title

Organization

**Attachments:**

- 1.
- 2.
- 3.
- 4.