

IONM RFP 2018-011 Response to Questions Due 10/24/18

- 1) **There is a request for a copy of Proposer's most recent audited financial statement and annual audited financial statements for the previous two years. If the proposer does not have audited financials, would tax returns suffice?** If Provider has audited financial statements and annual financial statements for the previous two years this must be submitted. If not, tax returns can be substituted with explanation as to why the former is not available.
- 2) **What are the types and number of cases that are typically monitored?** They are either spine or neurosurgery cases. From 1/1/18 to 10/24/18 there were at least 257 cases that had IONM.
- 3) **Does the Health System anticipate awarding one contract or multiple contracts? If multiple, will there be a minimum guarantees to selected vendors?**
The Health System is open to awarding more than one contract. The Health System cannot make volume guarantees.
- 4) **What is the average case duration?** From 1/1/18 through 9/13/18, the average IONM case duration was 3.87 hours.
- 5) **Can you provide the last 3 years' worth of IONM case volume?** See number 2 for the 2018 volume cases.
- 6) **Can you provide your overall Payer/Insurance Carrier Mix?** The hospital payer mix for 2017 was Medicaid 47%, Medicare 27%, Commercial 19%, other 6%, and self-1%. Spine and Neurosurgery cases tend to be higher in Commercial and no Fault.
- 7) **Can you please provide a break down on the specific case types?**

What percentage is Neuro, Ortho, Cranial, Vascular, etc.? 90% are ortho spine and 10% are Neurosurgery including Cranial and Neuro-Spine.

- 8) **How many surgeons normally use the IONM service each year?**
Can you please provide the surgical operative days for the primary surgeons who use IONM?
There are about 9 surgeons that use this service. We are a trauma 1 facility and require this service on a 24/7 basis.
- 9) **How many IONM cases do you usually run concurrently in one day?** It varies depending on the OR schedule and unforeseen trauma cases.
- 10) **Do you keep any current IONM supplies in –stock at your facility?** No
- 11) **Will this RFP screen for IONM companies who are compliant with their billing practices and ensure fair market value pricing is enforced?** All proposals are evaluated as set forth in the RFP.
- 12) **If awarded, how long is the award and will there being additional option years to execute?** Awards terms vary based on proposals and needs of the corporation.
- 13) **Would all IONM services under this contract be performed at Nassau University Medical Center (NUMC), or would cases need to be covered at affiliates too?** Only at NUMC
- 14) **Are these services currently being provided by outsourced vendor(s), in-house team or combination?** Outsourced vendor

15) **Is this RFP a standard re-bid of an expiring contract, or is NHCC genuinely exploring options for IONM service?** All proposals will be evaluated against each other.

16) **Please provide (per location) the following information about cases over the past year:**

- a. **Concurrency: What are Peak and Average volumes by facility, by day?** Only one site. Varied but Thursday tends to be higher volume day.
- b. **How many surgeons at each location are anticipated to use IONM?** One site, 9
- c. **Please provide a breakdown of case types per facility?** See Question 9.
- d. **What is average case duration per facility?** See Question 5.
- e. **What is the payer mix per facility?** See Question 6.

17) **The Description of Services lists both EEG acquisition and Processed EEG Acquisition. Please clarify whether the EEG service intended under this RFP is in –OR only and not clinical. In-OR and clinical are considerably different. OR only.**

18) **RFP requests that the physician must be either board certified or board eligible in Neurophysiological Intraoperative Monitoring. Can this requirement be revised to include audiologists who have specific training and experience in intraoperative neurophysiology?** No