



Health Care

April 9, 2025

REQUEST FOR PROPOSAL 31189

Hospital Patient Access – Financial Counseling

Digital Registration-Intake

AMENDMENT 1

CONTACT & SUBMITTALS

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Sealed or Emailed Proposals Accepted Until

April 23, 2025 @ 3:00 PM Central Time

AMENDMENT 1

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1. Which Oracle Cerner product/version is in use today?

REPLY: 2025.1.03

2. Is this entirely for ER/Trauma/Urgent Care visits (for patients that are not scheduled within Oracle Cerner)?

REPLY: The scope of service initially is for the ER, Urgent Care, Trauma, Unscheduled Urgent/Emergent Admission patient populations that have an ADT interface message sent when the encounter is created in Oracle Cerner.

- Will any scheduled patients be using the patient engagement platform?

REPLY: We will be evaluating scheduled hospital services functionality as part of this RFP for a possible second phase, however it is not included in Phase 1.

3. How many providers will have patients using the patient engagement platform?

REPLY: For Phase 1 the project will be specific to revenue cycle/registration intake forms. Departments using the tool will be limited.

4. How many departments/locations will have patients using the patient engagement platform?

REPLY: For Phase 1, 2 departments (Emergency Rooms & Urgent Care Units) at 6 different physical locations/sites.

5. Has MUHC considered different modalities that patients would use i.e. mobile devices/kiosks/tablets?

REPLY: Yes, all have been considered and looking for the most appropriate options to meet our needs.

6. What is MUHC currently using an integrated digital registration tool for scheduling patients?

REPLY: We currently utilize Tonic for patient registration and intake, although their applications do not provide the desired services specified in this RFP for the "ER, Urgent Care, Trauma, Unscheduled Urgent/Emergent Admission" patient populations, so this is an enhancement, not a replacement of our current applications.

7. What is a 'Flexing form'? (page 5, q 8)

REPLY: Trigger specific forms based on insurance. For example: If Medicare trigger CMS regulatory form "Important Letter for Medicare" to that population. If Tricare is associated to encounter trigger "Tricare Rights & Appeals."

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8. Does bi-directional text mean 2-way texting? (page 7, Criteria 3, q 1)

REPLY: Two-way, real-time communication. The patient can pose a question to MU Health, and MU Health can real time respond via text.

9. Can you provide more information on what is meant by 'payment alias'? (page 10, Criteria 4, q 1)

REPLY: The ability to identify and differentiate hospital vs physician payments when sending them to Cerner Rev Cycle.

10. Can you list all scheduling, registration, and revenue cycle host systems that are currently in use? Can you include the differing service areas they are being utilized?

REPLY: In Emergency Rooms/Urgent Cares use Cerner Revenue Cycle for registration, Experian Coverage Discovery, Experian Registration Quality Assurance, Experian Eligibility, Experian Patient Advisory Suite.

11. Are there any plans to migrate to any different host systems for scheduling, registration, or revenue cycle?

REPLY: Not that we are aware of.

12. Are your Oracle Cerner environments currently FHIR enabled?

REPLY: Yes.

13. Are you willing to share the list of other respondents?

REPLY: For the integrity of the RFP, we are not able to share this.

14. Can you provide the number of 2024 patient encounters broken out as total scheduled & total unscheduled?

REPLY:

Scheduled visits: Fiscal Year 2024 between MUHC and CRMC locations was approximately 1,045,000 visits.

Unscheduled; Emergency Rooms: 111,000; Urgent Cares: 203,531.

15. Can you share the current number of providers who carry a schedule across all the ambulatory clinic locations. This can be approximate as we understand it will fluctuate throughout the year.

REPLY: Around 500 physicians or other provider types.

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16. Are you looking for an enterprise license to cover registration for all scheduled and unscheduled encounters?

REPLY: This is to be determined as we are not pursuing a phase for scheduled at this time. There will likely be a subsequent phase down the road after validation of Phase 1 (Unscheduled) outcomes.

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THANK YOU FOR YOUR INTEREST AND PARTICIPATION IN THIS RFP PROCESS!