



**TITUS REGIONAL MEDICAL CENTER**

Our Passion. Our Promise. Your Care.

2001 N. Jefferson Mount Pleasant, Texas 75455

903.577.6000 [www.titusregional.com](http://www.titusregional.com)

# Radiology Services Request for Proposal

## 1. Key Contact Information

Titus Regional Medical Center – Key Contacts			
Name	Title	Email	Phone
Terry Scoggin	CEO	<a href="mailto:terry.scoggin@titusregional.com">terry.scoggin@titusregional.com</a>	903-577-6066
Patricia Boeckmann	COO	<a href="mailto:patricia.boeckmann@titusregional.com">patricia.boeckmann@titusregional.com</a>	903-577-6059
Tim Pugsley	CIO	<a href="mailto:tim.pugsley@titusregional.com">tim.pugsley@titusregional.com</a>	903-577-6102
Teri Anderson	Exec Asst	<a href="mailto:teri.anderson@titusregional.com">teri.anderson@titusregional.com</a>	903-577-6052

## 2. Titus Regional Medical Center Information

Titus Regional Medical Center (TRMC) is a 174 licensed bed (8 ICU beds), Level III Trauma Center located in East Texas. Average daily medical census is approximately 70-90 (seasonal) including an 8 bed ICU that runs an ADC of 4-6, with occupancy increasing due to the recent addition of a cardiac cath lab, a certified stroke program, and additional primary care providers. TRMC also provides maternal and pediatric services, inpatient rehabilitation and geriatric behavioral health services that are not a part of this RFP. TRMC is a Level III lead trauma center seeing approximately 25,000 patients per year, with an inpatient admission rate of approximate 18%. Approximately 1000 babies are born at TRMC each year and our community boasts the largest volume pediatric practice in the region.

Radiology services take place in the following areas:

- Within the hospital
  - Adjacent to the Emergency Department
  - 3<sup>rd</sup> floor cardiac diagnostic center
- On campus
  - Imaging Plus – a wholly owned ambulatory imaging center
  - Breast Center – Medical Plaza Building
  - Bo and Patty Pilgrim Cancer Center
  - Sports and Orthopedics – physician practice
- Off campus
  - Family Care Center

The current fiscal year for TRMC is October 1 – September 30. For our most recently completed fiscal year, we reported the following results:

- Volumes
  - IP admissions: 3,424
  - Average daily census: 43.85
  - Newborns: 1000
  - OP Visits:
    - Diagnostic x-ray: 27,430
    - CT scans: 12,572
    - MRI scans: 3,242
    - Ultrasound scans: 6,233
    - Mammograms: 4,753
    - Special procedures not included in above modalities: 10
    - Special procedures included in above modalities:
      - US Guided – 153
      - CT Guided – 92
      - XR Guided - 115
  - ED visits: 24,000
  - Surgical procedures: 3,143
  - Clinic visits:
    - Family Care Center - 32,713
    - Community Care Center – 9,736
    - Orthopedics and Sports Medicine – 5,406
    - Heart & Vascular Center – 5,288
    - Neurology Center – 2,590
    - Breast Center – 3,803
- Financial results
  - Consolidated gross revenues: 205,000,000
  - Consolidated net operating revenue: 75,000,000
  - Operating Expenses:
    - Payroll: 30,400,000
      - FTEs: 614
    - Benefits: 5,800,000
  - Days cash on hand: 112
- Imaging Equipment
- IT/Reporting/Storage Equipment
  - TRMC utilizes Epic EHR and the Radiant module for Radiology.

- CareStream version 12.1 PACS and CPACs
- EMC Isilon for local storage–

### **Scope of Radiology Services**

Under the proposed agreement, the selected Radiologist and/or group will provide the following services on an agreed upon fee arrangement:

1. Provide a qualified and fully credentialed Radiologist on site at the hospital at least from 8:00AM to 5:00 PM Monday through Saturday, six (6) days per week, to timely interpret all ongoing imaging studies conducted at the within the health system and to perform selected interventional procedures;
2. Provide interpretation of radiological procedures in all modalities including general diagnostic x-rays, ultrasound, CT, nuclear medicine, mammography, MRI, interventional procedures, and all future non-cardiac imaging modalities offered in the system with final diagnostic reports for each examination or procedure.
3. Establish a schedule for service availability with a sufficient amount of time for the review of each exam or procedure, discussion of interpretation with the ordering clinician as requested, and performance of on-site procedures for which a Radiologist must be present;
4. At Radiologist or groups' expense, maintain twenty-four (24) hour per day, seven (7) days per week, and 365-days per year coverage. This coverage can include a subcontracted teleradiology service after the hours listed in #1 above. Teleradiology coverage shall conform to the requirements as stated in a completed contract;
5. Performance of certain interventional procedures including but not limited to, needle localization for breast biopsies, ultrasound and CT-guided biopsies, thoracenteses, paracenteses, fine needle aspirations, pain management injections, arthrograms, and more;
6. Provide qualified and full credentialed Radiologists who meet state and federal nuclear medicine standards for the interpretation of all nuclear medicine procedures performed at the hospital, ensure that such Radiologist(s) is named as an authorized user on the radioactive material license, and provide documentation of such authorization (licensing will be requested to the state by the Director of Imaging);
7. Ensure that a Radiologist is available, as necessary and reasonable , to provide consultation concerning the interpretation of an imaging study, when requested by the medical clinician who ordered the study or when the applicable stand of care dictates that such consultation shall occur. Make every effort to ensure that a Radiologist provides a reading on a STAT report as quickly as possible, but in no event later than 30 minutes of being notified by the hospital that a STAT review and report are requested;

8. Provide communication and education with the hospital's medical staff and the public as reasonably requested by the hospital;
9. Select, along with designated hospital leadership, Radiologists who are fully qualified and able to perform the duties as stated above, but within their scope, expertise, and credential of each individual Radiologist;
10. Ensure all professional services, including teleradiology services, are provided in accordance with the American College of Radiology, Mammography Quality Standard Act of 1992, the practice of Radiology in general, and the hospital's policies, procedures, and corporate compliance program;
11. Be an approved provider for Medicare, Medicaid, and contracted with all payers whom the hospital contracts;
12. Participate in the peer review and quality assurance activities;
13. Comply with all federal and state laws relating to patient care and related activities;
14. Provide "normal" or "standard" templates for dictation and ensure that the Radiologists dictate into the hospital's dictation system reports on all examinations, procedures, and other services performed in the Imaging Department within twenty-four (24) hours of completion of the service. Such records shall be made in accordance with the standards set by the American College of Radiology;
15. Develop and lead processes to ensure quality, timeliness, and communication of all results by developing a scorecard of metrics as determined in consultation with TRMC leadership and medical staff;
16. As requested, attendance at Board and/or other meetings;
17. Actively participate in TRMC Medical Staff meetings and processes;
18. With approval of TRMC designated leadership, provide a Medical Director for all Imaging services performed at TRMC and perform all tasks pursuant to the contract;

### **3. RFP Timeframe and Requirements**

**Inquiries** – We encourage inquiries and welcome the opportunity to answer questions from potential applicants. Questions submitted in writing will be returned within five business days. Please direct your written questions to: [patricia.boeckmann@titusregional.com](mailto:patricia.boeckmann@titusregional.com). Any oral communication shall be considered unofficial and non-binding with regard to this RFP.

**Scope of Responses** - Interested vendors must submit their responses to all sections of this RFP and include all requested information. Vendors who wish to send additional materials are welcome to do so, but these materials may not be considered in the evaluation process. All materials must be converted to one PDF file and submitted via email to [patricia.boeckmann@titusregional.com](mailto:patricia.boeckmann@titusregional.com).

**Confidentiality** - Due to the competitive nature of this RFP, to the extent permitted by law, all vendor responses will be confidential.

**Evaluation of Vendor Responses** – TRMC has established a working group to review the documentation received in response to this RFP. During this review process, additional information may be required of the vendors and some vendors may be invited to present directly to the team.

**RFP Schedule**

RFP Schedule	
Deliverable	Date
RFP Launch Date	September 6, 2018
Deadline for submissions of vendor proposals	September 30, 2018
Notification of selection	October 15, 2018
Contract negotiations completed	November 15, 2018
Contract start date	February 15, 2018

**RFP Administrative Conditions**

**Vendor applicants should note the following:**

The issuance of this RFP does not imply an offer to do business with any RFP recipient. The right to accept any complete response, or portion thereof, or to accept none of the responses even if all the stated requirements are met is reserved by the requestor. Only the execution of a written contract will obligate the RFP requestor in accordance with the terms and conditions contained in such contract.

Submitted information packages that do not respond to all items in this RFP may be excluded from further consideration and alternative information packages may not be considered.

Titus Regional Medical Center reserves the right to disqualify any vendor from review in the event the vendor submits the RFP response after the submission deadline.

Titus Regional Medical Center reserves the right to amend or cancel this RFP at any time, without any liability to the RFP originators if, in its sole determination, Titus Regional Medical Center believes that its best interest is served by so doing.

Titus Regional Medical Center will not be responsible for any costs incurred by an organization in preparing, delivering or presenting responses to this RFP. Once submitted, vendor responses will be the property of RFP requestors and will not be returned.

All responses to this RFP should be clear and concise. Responses of excessive length or containing excessive advertisement are discouraged and may not be reviewed.

By submitting an information package, the vendor represents that they have read and understand the RFP and are capable of fulfilling all requirements.



- **Response Requirements**

- Two complete sets of proposals replying to all requested information must be submitted to the address below by September 30, 2018 at 4:00PM (Local time and date).

Titus Regional Medical Center  
Chief Operating Officer  
2001 N Jefferson Ave  
Mount Pleasant, TX 75455

- **Questions/Clarification to RFP**

- All questions and clarification are to be submitted via email with “Radiology Services RFP Clarification” in the subject line to:

Patricia Boeckmann, COO, [patricia.boeckmann@titusregional.com](mailto:patricia.boeckmann@titusregional.com)

Each vendor’s RFP response shall remain firm for a period of 180 days from the proposal due date.

#### **4. Vendor Background and Information**

##### **1. Vendor Company**

- Company legal name:
- Public/Private held:
- State of incorporation:

##### **2. Vendor Primary Contact**

- Name:
- Title:
- Office/Location Address:
- Phone Number:

- E-Mail address:
- Organization’s Internet Home Page:

3. Identify the location of the following:

- Corporate Headquarters:
- Field Support Offices:
- Application Support Personnel:
- Programming/Technical Support Personnel:
- Billing Services Personnel:

4. List the number of employees and providers in your organization by category:

Category	# Employees	Average Number Years with Company
General Radiologists		
Specialists:		
<ul style="list-style-type: none"> <li>• Mammography</li> <li>• Neuro</li> <li>• Cardiac</li> <li>• Musculoskeletal</li> <li>• Pediatric</li> <li>• Interventional</li> </ul>		
Quality and Process Improvement		
Data analysis and Reporting		
Other employees		



Imaging Centers Owned or Operated		
Imaging Center Name	Address	Phone

- Please provide your group’s current leadership structure description and current leaders with titles.
- Please provide a list of all hospital contracts you have won in the last 12 months.
- Please provide a list of all hospital contracts terminated in the last 12 months.
- **Please provide a CV for each Radiologist in your group.**

**Proposal of Radiology Services to be provided**

**A. Radiologist Coverage**

- Describe how the group proposes to provide radiologist coverage and services to the hospital 24/7/365. 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,” and how the report discrepancies are managed, reported and communicated.
- 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.

**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 re-coordinated, and access to second opinions.

### **D. Quality Plan**

- Describe your group's approach towards ensuring quality.
- Describe your group's standard approach to "Peer Review" and your peer review process. Please include tools used, "blinding" process, how quality is measure, and the standards levels assessment used.
- Describe how identified quality issues are addressed, tracked, reported, and communicated with the hospital.
- In the event of a quality issue with an identified radiologist, describe the process to address and remove the radiologist 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 the "Critical Findings" are tracked and communicated effectively. Please include tools used, reports tracking, and team staff involved to support this process.
- Describe how Quality Improvement and Critical Findings performance will be tracked and 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.
- 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 radiology reports.
- Describe steps taken to ensure report completeness and consistency across the group of individual radiologists.
- Describe any expectations or needs the radiology group has for hospital staff in generation of radiology reports (technology, people, integration, etc.)
- Provide a representative sample of your group's radiology reports:
  - General final reports
  - Sub-specialty reports (if applicable)
  - Preliminary reports (if applicable)
  - Report addenda
  - Revised reports

- CareStream Vue Dictation System

## **F. Marketing**

- Provide an overview of the group's experience in promoting Radiology 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 interventional radiology.
- Provide examples of efforts to work with hospital administration and medical staff to strengthen the fiscal performance of the Radiology Department, including new revenue generation.

## **G. Metrics**

- Describe any utilization reports, performance metrics, etc. that your group will provide to the hospital on an ongoing basis including at a minimum:
  - Turnaround time for stats and regular reads
  - Turnaround time for stroke studies
  - Acceptable reading error rate
- Describe the tools you will use to help us understand how our department is performing and how to optimally grow our business.

## **H. Operational Support**

- Describe any operations support that will be provided to the hospital.
- Please list all requirements for a start-up timeline. Describe how quickly you can initiate service and the key IT and operations requirements needed.
- Describe the steps involved in a typical new contract start-up program, including collaboration needed from the hospital in the start-up process, including 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?
- List your education and management resources available to group members.

## **J. Radiologist Staffing and Retention**

- What advantages does your organization have in its ability to recruit quality radiologists?
- How are your radiologists compensated and incentivized to achieve performance goals?
- Is it proposed that radiologists assigned will work exclusively at our hospital?
- What is your proposed on-site staffing plan for the Radiology department at our hospital?
- How do you assure that newly hired radiologists are high quality?

Provide recruiting and retention metrics for the past 3 years.

## **K. Financial Considerations**

- How do you propose to structure this contract financially?
  - Proposed Medical Director fees, if any?
  - 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 provision for tail coverage and carrier information. Is the premium paid by the group or by the individual radiologists?

## **L. Clinical Effectiveness Programs**

- Describe your group's clinical effectiveness experience, including but not limited to, information regarding:
  - Imaging protocol development
  - Radiation dose reduction initiatives
  - Review of order appropriateness/clinical decision support
  - Development of ordering guidelines/suggestions for referring physicians/clinical decision support
  - Reducing variations in practice
  - Measuring outcomes

**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.

**N. Additional Information**

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

Name \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Attachments: