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**TRANSMITTAL SHEET**

**TO:** Prospective Bidder

**FROM:** Hospital Materials Management Administrator

**DATE:** December 4, 2025

**SUBJECT:** **GMHA RFP 001-202 Revenue Cycle Management Services  
Amendment No. 4**

**PAGES:** 2 including cover sheet

**NOTES:**

An acknowledgement via a return email would be appreciated as soon as possible.

**DATE / VENDOR ACKNOWLEDGEMENT**

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# GUAM MEMORIAL HOSPITAL AUTHORITY

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## AMENDMENT #4 GMHA RFP 001-2026 REVENUE CYCLE MANAGEMENT SERVICES

This amendment is in response to the clarifications submitted from MicroHealth LLC.

### Current Environment & Performance

1. What are the current key performance metrics for the revenue cycle (Days in A/R, Clean Claim Rate, Denial Rate, Collection Rate) and how do they compare to the targets listed in section 1.2?

**Response:** Days in AR = 181, Clean Claim Rate 90%, Denial Rate 5%, Collection Rate = 93% (net) 35% (gross)

2. What specific challenges led to the significant bad debt provisions of 59.4M and 43.6M in FY 2024 and FY 2023, and what percentage is potentially recoverable?

**Response:** Significant self-pay population and low recovery rate. Self-pay recovery is about 15% of gross charges.

3. What is the current state of interfaces between existing systems, and what specific role will the contractor play in the RCM Cloud implementation scheduled for March 2026?

**Response:** Please refer to page 3 & 4 of the RFP. The contractor should include a plan for using RCM technology – either using other RCM technology, technology alongside RCM Cloud, or a combination of both.

### Staff Transition & Operational Requirements

4. Will the contractor be required to hire all existing RCM staff, and what are the current compensation levels and any collective bargaining agreements that would affect employment terms?

**Response:** The solicitation does not require the contractor to hire all existing RCM staff. RCM staff are not covered under a CBA. Current compensation levels can be viewed on <https://www.gmha.org/transparency-center/#staffing-pattern>.

5. What is the expected timeline for full transition of RCM operations, and will there be a phased approach by department or function?

**Response:** Please refer to page 8 (F) requiring a plan providing as much detail as is practical, explaining how the services will be performed.

## Financial & Contractual Structure

6. Is GMHA open to various pricing models (fixed fee, percentage of collections, hybrid), and what is the current annual cost of the RCM operation?

**Response:** This is a multi-term fixed price contract with price adjustment (page 69 – Contract Type).

7. Will the contractor be responsible for any existing AR during transition, and what are the expectations for working down legacy AR?

**Response:** Yes. Refer to page 6 (7) AR Management.

8. What specific penalties or incentives will be tied to the performance metrics listed in section 1.2?

**Response:** This has not yet been determined.

## Compliance & Regulatory Requirements

9. What is the current state of compliance with TEFRA, price transparency, and No Surprises Act requirements, and what specific documentation gaps exist?

**Response:** None at the moment.

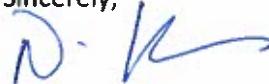
10. What specific Medicare cost report support is expected from the contractor?

**Response:** Responding to requests for data for the cost report preparer.

Please acknowledge receipt of this amendment by signing and sending back to Materials Management by Fax at 649-3640 or email to [materials.mgmt@gmha.org](mailto:materials.mgmt@gmha.org).

If you have any questions, please feel free to address your letter to Joleen M. Aguon, MD and email to the [materials.mgmt@gmha.org](mailto:materials.mgmt@gmha.org).

Sincerely;



DOLORES PANGELINAN  
Hospital Materials Management Department

ACKNOWLEDGMENT:

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PRINT NAME

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SIGNATURE

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DATE