

SOLE SOURCE DETERMINATION

The Purchasing Division has been requested to approve a sole source purchase for the commodity or service described below. Pursuant to West Virginia Code 5A-3-10c, the Purchasing Division is attempting to determine whether the commodity or service is a sole source procurement. If you believe your company meets the required experience and qualification criteria stated below, please e-mail the Purchasing Division Buyer at roberta.a.wagner@wv.gov a copy to Karen.O.Byrd@wv.gov to express your interest in the project. Please forward any and all information that will support your company's compliance with required qualification and eligibility criteria along with any other pertinent information relative to this project to the Purchasing Division no later than 04/06/09.

Requisition Number: HCC09212

Department/Agency: WV Health Care Authority

Detailed Description of Project: Cardiac Catherization Lab Audit

Proposed Sole Source Vendor: WV Medical Institute
3001 Chesterfield Place
Charleston, WV 25304

Specific Eligibility Criteria: See attached specifications

Specific Qualification Criteria: See attached specifications

To continue assessment of clinical quality indicators by a Quality Improvement Organization (QIO)

The West Virginia Health Care Authority (Authority) is charged with regulation of the Certificate of Need program (WV Code §16-2D-5) and a utilization review and quality assurance program (WV Code §16-29B-23).

In 2003, the Authority directed acute care hospitals offering diagnostic and therapeutic cardiac catheterization services to report demographic, clinical and outcome information to the American College of Cardiology National Cardiovascular Data Registry (ACC/NCDR). The ACC/NCDR is a tool available to monitor quality of cardiac care nationally.

This data is monitored and assessed by a Quality Improvement Organization (QIO) for the appropriateness of care, quality of the care and monitoring.

The Authority entered into an initial agreement with WVMI in 2003 to perform these services. In 2006, WVMI was awarded a sole source direct purchase order. The services have been performed to date and are scheduled to end June 30, 2009. At this time, it is necessary to continue the services.

The vendor must be a Medicare authorized QIO operating in the State of WV. A vendor must regularly perform site visits to acute care hospitals in WV. The vendor must have an agreement with the ACC/NCDR to receive data feeds. In addition, they must have a current data feed from major third party payors in the state.

The VENDOR services include:

- **Data Collection and Analysis.** A network of quality improvement consultants reviewing medical records on- or off- site and electronically transmit information to the QIO for computerized analysis, allowing performance feedback to health professionals in "near real-time" intervals.
- **Data quality.** Vendor must study the quality, reliability and validity of the health care data. Studies of data quality encompass the entire data stream, from the data entry operator's work incentives to collection, processing and analysis.
- **Evidence-based Guideline, Criteria and Indicator Development.** Vendor will abstract, analyze and feed back performance data to health professionals, and also work with interdisciplinary groups of health care professionals to develop guidelines, criteria and indicators.
- **Quality Improvement.** The vendor must work with providers of care to improve administrative and clinical delivery systems.
- **Utilization Management and Utilization Review.** The vendor must have experience in developing and using appropriateness criteria to review medical interventions. Utilization management abilities should include prior-authorization, concurrent reviews, post-service evaluation and case management.
- **Medical and Peer Review.** Vendor should demonstrate a network of board-certified physician reviewers in all specialties and nurse specialists support utilization management services.
- **Audit and Validation Studies.** Vendor must review data and other records to validate and improve the quality of reporting and procedural coding.