

TO: All Bidders: DATE: April 29, 2025

Provide Horizon Performance Manager and Analytics Systems Support

Services

RFP# UH-P25-015

FROM: Giovanna DiGuglielmo **SUBJECT:** Addendum #2

Senior Buyer

Purchasing Services

ADDENDUM # 2

The following constitutes Addendum #2 to the above referenced solicitation. This addendum includes the following parts:

Part 1: Answers to questions asked by prospective bidders. Duplicate questions are responded to only one time in the addendum.

NOTE: Major revisions are included, please review carefully.

It is the bidder's responsibility to ensure that all changes are incorporated into the original RFP.

All other instructions, terms and conditions of the RFP shall remain the same.



ADDENDUM # 2 INTRODUCTION

This addendum is intended to answer questions that were asked during the question period.

PART 2

Answers to Questions

Note: Some questions have been paraphrased in the interest of readability and clarity. Each question is referenced by the appropriate RFP page number(s) and section, where applicable. Answers provided are to the best of our knowledge.

Number	Page #	RFP Section Reference	Question	Answer
1.	4	1.1	What would "success" look like at the end of this contract?	Costing is completed in each FY. Refer to section 3.2.1 of the RFP.
2.	4	1.2	What are the top 3 performance challenges UH is currently facing with Horizon Performance Manager (HPM)?	UH only has one challenge. Costing done in timely manner.
3.	4	1.2	What prompted the issuance of this RFP? (e.g., end of a previous contract, system performance gaps, change in leadership?)	This is a new RFP replacing the old contract #UH-P18-014.
4.	4	1.2	Will we be working alongside an internal analytics or IT team? If so, what are their roles and capabilities? What is your staff model today onshore vs. offshore? How many vendors to FTEs?	Internal analytics team consist of one manager and one analyst who are all onsite. Manager has 20+ years' experience, analyst is new to the role and requires training in HPM. No offshore permitted. One (1) FTE.



5.	4	1.2	What key business initiatives or transformations are planned in the next 1–3 years that we should align with (e.g., ERP migration, Epic optimization)?	ERP migration, Epic optimization.
6.	13	3.1	Is the scope of work involved around HPM?	Yes.
7.	13	3.1	Can you provide details on the current integration state between AllScript's HealthQuest, Epic Resolute, and Horizon Performance Manager (HPM)?	HealthQuest and AllScripts are sunsetting so just need support existing data. Resolute to HPM integration involves Flexible Interface.
8.	13	3.1	Are there any inaccuracies in the current data retrieval process?	Just implemented Epic Resolute and still vetting if there are inaccuracies to data retrieval process.
9.	13	3.1	Has UH conducted any recent data quality or integrity audits on HPM datasets? If so, what common anomalies or recurring issues have been identified?	Yes. Combined accounts with zero charges but with payments is one main anomaly that's recurring.
10.	13	3.1	How are the existing ETL pipelines for HealthQuest and Epic integrations to HPM managed? Are they fully automated, semimanual, or maintained by internal teams?	HealthQuest is sunsetting 6/1/25. There are Clarity extractions that are combined through SSIS package to create a single integration file. This is automated and maintained by analytics team.
11.	13	3.1	Are there known limitations in your current data extraction methods from Epic and HealthQuest that the contractor should be	Limitation consists of internal staff with no experience of SQL and SSIS.



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			prepared to address or enhance?	
12.	13	3.1	Can you provide examples of critical use cases where current system reports fall short, especially in service line profit/loss analysis or cost modeling?	Accts with multiple clinic visits are difficult to categorize into service lines.
13.	13	3.1	Are there any regulatory compliance frameworks that influence how data is stored, transformed, or reported in HPM?	No.
14.	13	3.1	Are there any available demonstrations of the integration between Horizon Performance Manager and data sources from HealthQuest and Epic?	No.
15.	13	3.1	How frequently are the source systems updated, and what impact does this have on reporting workflows or integration logic in HPM?	Systems are updated quarterly. Since Epic to PM is new, impact is unknown at this time.
16.	13	3.1	What is UH's future vision for the use of HPM and associated analytics tools in the next 3-5 years? Is there a roadmap that the selected contractor will need to support or help develop?	Assist will be needed with ERP and could use assistance and support in leveraging Epic data, HPM cost data with SliceDicer.
17.	13	3.1	How is cross-functional collaboration between healthcare, finance, IT, and clinical operations handled for cost/revenue reporting initiatives? Were there any	No formal process. HCF and IT is ok but HCF to clinical operations is difficult.



			historical collaboration gaps?	
18.	13	3.1	Do you have extracts from EPIC, Banner and AllScripts?	Epic and Banner.
19.	13	3.1	How many data sources are currently feeding into HPM (besides Health Quest and Epic)?	No other data sources.
20.	13	3.1	What version of HPM is currently deployed, and are there any plans to upgrade or migrate to Strata Jazz or another product?	Version 25, no current plans to migrate.
21.	13	3.1	How is the current data extraction, transformation, and load (ETL) process being handled? Is there an internal team involved or is it fully outsourced? A. Who is your hyperscaler? B. What is the current tech stack/databases (snowflake, databricks), ETL tools? C. Are there any schedulers and workflow tools? D. Do u have an FinOps metrics available that you can share? E. Do you have a Data Governance platform? F. What tools are you currently utilizing for Data Quality, data observability?	Internal and vendor A. Unknown B. SSIS C. No D. No E. No F. None



22.	13	3.1	Are there any technical	A. No		Form	natted: Left
			diagrams, process inventories, or playbooks available that can help us determine what kind of support model to propose? A. Is there a transition process outlined for moving from AllScripts to EPIC (ERP)? B. Are the existing reporting and dashboards built today expected to be supported for timely execution?	<u>B.</u> No			natted: Normal, No bullets or numbering
			Build any new as special project?	currently.	valia	\succ	natted: Normal, No bullets or numbering
23.	13	3.1	What tools or platforms (e.g., Power BI, Tableau, Excel, SQL) are used alongside HPM for data analysis or visualization?	Excel only, hoping to leverage SliceDicer th Cogito and Caboodl			
24.	13	3.1	Do you have any unstructured, textual data (e.g., contracts, emails, etc.)? If so, what type of data will we be working with?	No.			
25.	13	3.1	Are you expecting us to make recommendations on different aspects of the technology stack?	No.			
26.	13	3.2	Which KPIs are most important to UH leadership in evaluating financial	LOS, CMI, CM and P/I Service Line, Payor Mi			



			performance and analytics?	SLA – please see Section 3.0 scope of work.
			Are there any SLA we need to be mindful of?	
27.	13	3.2	Are there existing libraries of dashboards, reports, and models that the contractor will need to update, or will these need to be developed from scratch?	There's existing reports and models.
28.	14	3.2	Are there any recurring "special projects" that involve time-sensitive coordination with external vendors or partners?	No.
29.	14	3.2	Which of the support services listed have historically required the most customization or have posed the greatest technical or operational challenges?	Costing.
30.	14	3.2	What exactly are the "special projects" under the list of support services? Can you provide examples of previous cases? What factors contributed to their success, and what lessons should the contractor keep in mind?	Ad-hoc analysis for departments, service lines or business plans outside of norm.
31.	14	3.2	What frameworks are currently used for outlier identification? Are machine learning or statistical models used for trend analysis or anomaly detection, or is this a rules-based process?	No.



32.	14	3.2	How standardized is the current service line reporting? Are service lines fully defined across financial, clinical, and operational data dimensions? Are any changes expected?	Not fully defined across financial, clinical and operational.
33.	14	3.2	What tools or platforms, aside from Horizon Performance Manager, are currently used for statistical development and expense assessments? Should the contractor expect to update or change any of these tools at the start of the engagement or during the project?	No other tools.
34.	13	3.2	Can we get clarity on the structure and frequency of the reports/dashboards you expect? (e.g., weekly ops reports vs. monthly financial statements).	No set frequency.
35.	13	3.2	What is the average number of active Reports & Dashboards that require support on a monthly basis?	None currently.
36.	13	3.2	What is the average number of new Reports & Dashboards to be designed and created each month?	None currently.
37.	13	3.2	Are there expected volumes or SLAs for ad hoc reporting or dashboard requests?	No.
38.	13	3.2	Could you clarify whether UH expects the vendor to	Vendor needs to perform all the functions of cost



			provide full-scale financial modelling, accounting and analysis services (e.g., preparing P&L statements, performing cost and revenue modeling, and conducting audits etc.) or if the role is limited to supporting these functions?	accounting and revenue modeling to provide the cost and revenue data for P&L.
39.	13	3.2	If the requirement is primarily for financial support services, could you specify what type of support is expected (e.g., data extraction, report formatting, dashboards, reconciliation with source data) for the financial deliverables?	Possibly support data extraction from EPIC to PM, help develop dashboards, reconcile costing and revenue data.
40.	13	3.2	Does providing the financial support services as outlined in the RFP require the vendor to have specialized expertise in finance and accounting, particularly in healthcare-related financial management?	Need healthcare related cost accounting experience preferably.
41.	14	3.4	What KPIs are used to evaluate the completeness, accuracy, and timeliness of monthly progress reports? Will the contractor be expected to design or refine these KPIs over time? If so, how frequently?	Not available.
42.	14	3.4	Can you share examples of critical reconciliation issues that arose in past reports? How were these issues	Not available.



			escalated and resolved, and how did the previous contractor address them?	
43.	14	3.4	Who are the primary recipients of the monthly progress reports? Are they financial leadership, operational departments, IT stakeholders, or external auditors?	Manager of Decision Support.
44.	14	3.5	What level of documentation or knowledge transfer do you expect as part of the engagement?	Detailed documentation of costing process.
45.	14	3.5	Can you elaborate on the target audience for the training materials? Will they be aimed at financial analysts, clinical staff, IT support, or multiple tiers of users?	Manager and analyst of decision support.
46.	14	3.5	Is there a preferred format or structure that the contractor should align with when developing training materials?	No.
47.	15	3.6	How often has on-site support been required in past engagements, and under what circumstances was it most valuable or necessary?	Only when we needed to realign revenue to expense by dept and subaccount codes.
48.	15	3.6	Are there any large-scale transitions planned that would likely require significant on-site involvement?	Possibly need on-site visit when converting currently costing to new with ERP implementation.



49.	15	3.6	Are there any known constraints on scheduling on-site work or accessing	No.
			internal systems remotely?	
50.	18	4.7	Are there any current pain points in vendor communication, support responsiveness, or service delivery we should be aware of and aim to improve?	No. Refer to question # 26 regarding SLA.
			Are there any vendor SLAs, performance expectations from the vendors?	
51.	21	4.17	Do you foresee any special projects (e.g., P&L restatements, cost accounting redesign) in Year 1 of the contract? RFP says special projects engagement to be with consent from UH, assuming this will be a net new SOW?	Possibly.
52.	23	4.22	Would UH consider a hybrid staffing model (onshore + nearshore or offshore) to improve cost efficiency?	No.
53.	27	5.5	If a joint venture is utilized to address components of the support services, what additional requirements or documentation should be included in the bid proposal?	Refer to Section 1.4.8 of RFP.

ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL SPECIFICATIONS REMAIN UNCHANGED.



END OF ADDENDUM #2