

Item	Question	Response
1.	re: Question #10 (company's safety practices and protocols related to equip delivery & installation)	Please disregard this item.
2.	As you look at the first 60-90 days post-launch, are there specific operational or clinical risks you're most focused on mitigating early?	Ensuring PCHCteam & patients have solid understanding of vendor's capabilities. Need clear process in place for billing. What if services do not meet individual patient needs? Plan is to transition all patients. IT Security, visibility to data analytics & reporting - want to see demo, User Management, logistics for equipment management. Clinical Risk: aim is to alleviate PCHC staff workload. Clinical escalation & protocols of the RPM data. i.e. How do we get help when we need it? (IT in particular)
3.	At go-live, which EMR will be considered the system of record for enrollment, documentation, and billing workflows?	AthenaOne
4.	Should APCM be included in scope for 2026 planning, or is that something PCHC expects to evaluate later in the year?	Only CCM & RPM for now
5.	Similarly, is PCHC planning to participate in ACCESS in 2026, and should we be factoring that into program design and reporting from day one?	No.
6.	Pg. 5, Item 10 in RFP Letter: : Requests safety protocols for 'equipment delivery and installation.' Was this item also in reference to dental equipment and performance bonds and can be disregarded?	Yes, please disregard this item.
7.	PCHC Responsibility: Use the provided report to submit the appropriate CPT codes directly to Medicare or applicable payers for reimbursement. Vendor Responsibility: Maintain all necessary clinical documentation and audit trails within the Vendor's system, accessible as needed for any Medicare or payer audits. Clarification Requested: Does this workflow align with your current billing SOPs, or do you have a different preference for task ownership?	Yes, aligns with current billing SOPs.
8.	IT requirements & EHR integration regarding IT infrastructure, the primary requirement from PCHC is to grant Vendor authorization to integrate with your EHR. Clarification Requested: Beyond this authorization, are there any specific IT security protocols or internal requirements we should be prepared to meet?	Have you worked specifically w/ AthenaOne? (this is critical) Also standard HIPAA considerations, Multi-Factor Authentication, etc.
9.	Are there any additional technical details or specific PCHC SOPs we should incorporate into our final proposal?	How will we run reports, where does data live, how is it transferred over, etc., does it live in AthenaOne or is there a separate reporting system? PCHC needs to know your Compliance & internal auditing procedures - and can PCHC access those results?
10.	Billing Responsibility: Regarding the requirement on Page 5 to "Provide complete billing service and support," does PCHC expect the vendor to act as the third-party biller (claim submission and processing, payment & denial management, compliance & reporting, reconciliation), or is the vendor expected only to provide the necessary coding and documentation files for PCHC's internal team to submit the claims?	Depending on scale (# of patients), PCHC may need assistance. What is your SOP with billing for FQHCs comparably sized to PCHC?
11.	Were any Q&As or amendments posted subsequent to the issued date of 12/29/2025?	This list includes all bidder questions and PCHC responses thus far.
12.	Are there page limit requirements?	No.
13.	Are resumes required or summaries of qualifications acceptable?	Summaries are acceptable.