



REQUEST FOR PROPOSALS (RFP)	Coding Consultant Services – Rural Health Transformation Program
RFP ID	RIHCA-RHTP-RFP-002
ISSUING ORGANIZATION	Rhode Island Health Center Association
ISSUE DATE	October 16, 2026
QUESTIONS DUE	October 23, 2026
RESPONSES POSTED	October 27, 2026
SUBMISSION DEADLINE	November 3, 2026
NOTIFICATION OF AWARD	November 10, 2026
POINT OF CONTACT	Michelle Burnett, Project Manager

About RIHCA

The Rhode Island Health Center Association (RIHCA) serves as the state’s primary care association and supports Rhode Island’s eight community health centers (CHCs). RIHCA’s support provides technical assistance to the health centers in the areas of chronic care collaboratives, emergency preparedness, recruitment and retention of staff, outreach and enrollment, and public policy. For more information visit: rihca.org

1. Purpose

Rhode Island’s CHCs have been building their capacity to be successful in value-based care (VBC) environments for several years. Efforts include participation in the RI Medicaid Accountable Entity Program (a total cost-of care model), and various capitated arrangements with Medicaid and commercial payors.

The Rural Health Transformation Program (RHTP) provides RI’s CHCs the opportunity to enhance and accelerate existing efforts. One area that has been identified as crucial to this transformation to VBC is coding.

As Rhode Island CHC’s are at different stages in VBC adoption, RIHCA seeks to facilitate CHC access to expertise in coding through a pre-qualified pool of available consulting firms.

2. Scope of Services

Each CHC will develop a scope of service with the selected firm that is unique to each CHC’s needs. This RFP seeks to identify those firms with the capabilities to meet the range of CHC needs.

Selected firms should be able to provide the following types of services:

- a. Coding audits and assessments
- b. Clinical documentation improvement
- c. Federally Qualified Health Center coding and billing optimization
- d. Support accurate coding of primary care services and evaluation and management (E&M) encounters
- e. Behavioral health and/or substance use disorder (SUD) coding
- f. Coding for other services (not required to be selected as a qualified firm)
 - i. Dental coding and billing services
 - ii. Women's health and specialty care coding
- g. Risk-adjustment and value-based care coding
- h. Quality reporting and population health documentation
- i. Revenue recovery and denial management
- j. Compliance and regulatory support
- k. Training and workforce development
- l. Technology, analytics, and coding infrastructure

3. Term of Engagement

Vendors selected will be engaged under a contractual professional services agreement with either RIHCA or individual CHCs. Funding for this work is authorized through June 30, 2027, with an option to renew for an additional one-year period at RIHCA's discretion.

4. Vendor Qualifications

Given the unique billing, documentation, and operational requirements of CHCs, experience working with CHCs will be a required qualification for all firms.

Vendors must demonstrate a clear understanding of how coding and documentation impact both day-to-day billing operations and value-based payment arrangements, including Prospective Payment System (PPS), Alternative Payment Models (APMs) and risk-adjusted reimbursement models.

All vendors must meet the following minimum requirements:

- Experience with behavioral health and SUD programs
- Certified coding credentials (CPC, CRC, CCS, RHIA, RHIT, etc.)
- Experience with Medicaid, Medicare, and commercial payers
- Risk adjustment expertise
- Value-based care expertise
- Support of EHR platforms (eClinicalWorks, Epic, NextGen)
- Training and change-management capabilities

- HIPAA-compliant data handling and secure transfer processes, with established protocols for safeguarding protected health information throughout the audit and training process
- Transparent pricing and clearly defined scope of work documentation, including itemized costs and deliverables
- Ability to meet project timelines and provide timely follow-up remediation, technical assistance, or additional training as needed to support CHC improvement efforts

5. Proposal Requirements

Interested vendors must submit the following:

A. Organizational Overview

- Description of the organization, including mission, years in operation, and relevant service lines.
- Summary of experience providing coding, documentation, and audit services to CHCs or similar primary care environments.
- Description of organizational capacity to support multiple CHCs concurrently, if needed.

B. Qualifications and Expertise

- Résumés or bios for all proposed consultants, including certified coding credentials (e.g., CPC, CCS, etc.).
- Demonstrated expertise in CMS requirements and AMA CPT documentation and coding guidelines.
- Evidence of experience with PPS, APMs, and risk-adjusted reimbursement methodologies.
- Description of prior work conducting chart audits, documentation improvement, and provider training.

C. Data Security and Compliance

- Description of HIPAA-compliant data handling, secure transfer processes, and privacy safeguards.
- Explanation of systems, tools, or platforms used for audit documentation, reporting, and communication.

D. References

- At least two references from organizations for which the vendor has provided similar coding, auditing, or documentation improvement services.
- Contact information and brief description of the work performed.

E. Additional Information

- Any value-added services, innovations, or tools the vendor proposes to enhance CHC readiness for value-based care.

6. Evaluation Criteria

Proposals will be evaluated using the following criteria:

Criteria	Weight	Description	Scoring Guidance (1–5)
Relevant Experience	40%	Demonstrated experience providing coding, documentation, and chart audit services in CHCs or comparable primary care settings; familiarity with CMS requirements, AMA CPT guidelines, PPS, APMs, and risk-adjusted reimbursement models.	1 = Minimal or no relevant experience; 3 = Adequate experience with some CHC or primary care exposure; 5 = Extensive, directly relevant experience with strong evidence of past performance.
Organizational Capacity	30%	Ability to support multiple CHCs, meet timelines, maintain HIPAA-compliant data practices, and provide sufficient staffing and infrastructure to complete assessments, audits, training, and follow-up reviews.	1 = Limited capacity or unclear processes; 3 = Sufficient capacity with moderate detail; 5 = Strong, well-documented capacity with proven systems and staffing depth.
Qualifications of Proposed Personnel	30%	Certified coding credentials (e.g., CPC, CCS, etc.), expertise in chart auditing and provider education, and clear documentation of technical skills and professional experience.	1 = Credentials incomplete or unclear; 3 = Qualified staff with standard certifications; 5 = Highly qualified team with advanced certifications and strong CHC-specific experience.

RIHCA reserves the right to modify evaluation criteria as appropriate.

7. Vendor Selection and Engagement

RIHCA will lead the development and management of a pre-qualified pool of coding consultant vendors by conducting a structured vetting process that evaluates each organization's technical expertise, certified coding credentials, experience with CHCs, and capacity to deliver high-quality audit and training services. As part of this process, RIHCA will review vendor qualifications, verify compliance with RHTP requirements, and confirm that each organization meets established standards for documentation accuracy, CMS and AMA guideline adherence, and value-based care readiness. RIHCA will maintain documentation of vendor approvals, ensure ongoing compliance, and update the pool as needed throughout the program period.

Once this pool of qualified vendors is established, CHCs will be able to select the pre-vetted consultant that best aligns with their operational needs, areas of focus, and preferred service model. This structure provides CHCs with flexibility and choice while ensuring that all available vendors meet RIHCA's standards for technical competence, compliance, and experience in CHC environments.

8. Reservation of Rights

RIHCA reserves the right to:

- Reject any or all proposals
- Request clarification or additional information
- Modify the scope of work
- Negotiate with one or more proposers
- Cancel or amend this RFP

Issuance of this RFP does not obligate RIHCA to award a contract or reimburse any proposer for costs associated with preparing or submitting a proposal.

9. Submission Instructions

QUESTIONS DUE	October 23, 2026
RESPONSES POSTED	October 27, 2026
SUBMISSION DEADLINE	November 3, 2026

Proposals must be submitted electronically to:

Contact: Michelle Burnett, Project Manager

Email: mburnett@rihca.org

Subject Line: Vendor Name – Response to RIHCA-RHTP-RFP-002

Responses to substantive questions may be shared with all prospective proposers as appropriate.