# ADDENDUM NO.1 for

REQUEST FOR PROPOSAL (RFP)

AMBULANCE BILLING SERVICE

# TOWN OF LONGMEADOW MASSACHUSETTS

May 20, 2019

This document serves as Addendum No.1 for the Request for Proposal (RFP) for Ambulance Billing Service. This Addendum forms part of the RFP and modifies the original document. Proposers should acknowledge the receipt of addendum with their Technical Proposal submission.

The following changes and/or additions are to be made to the original Request for Proposal dated May 9, 2019:

#### TECHNICAL PROPOSAL SUBMISSION FORM, ADDENDA ACKNOWLEDGEMENT

Provided is the Technical Proposal Submission Form, page 5 of 5. Please include the attached form with your technical proposal submission and acknowledge the receipt of issued addenda numbers.

# **QUESTION & RESPONSE:**

# 1 QUESTION:

From my understanding- there was a previously released RFP that was due back in May of 2016. Comstar was the vendor before the 2016 RFP and happened to respond to the 2016 RFP- I was wondering if they were awarded the 2016 RFP?

# **RESPONSE:**

Yes

# 2 QUESTION:

If so, can I please obtain the contract execution date, awarded amount and how the need was funded?

#### **RESPONSE:**

July 1, 2016. Compensation to Comstar based on 3% of actual receipts delivered to the Town.

#### 3 OUESTION:

What is the estimated cost of the Ambulance Billing Services project?

# **RESPONSE:**

Estimated \$23,000.

#### 4 QUESTION:

Has the Department allocated funding for the Ambulance Billing Services yet? If so, through which source (budget, CIP, state/federal grant etc)?

#### **RESPONSE:**

**Budget** 

# 5 QUESTION:

How is the Department currently meeting this need?

# **RESPONSE:**

Ambulance billing service.

Which vendor provides the incumbent Ambulance Billing Services?

#### **RESPONSE:**

Comstar.

# 7 QUESTION:

Who is the technical contact and/or project manager for the Ambulance Billing Services?

#### **RESPONSE:**

The fire department contact will be provided upon contract award.

#### 8 QUESTION:

Would it be possible to name the three greatest challenges the Department is having with the current solution?

# **RESPONSE:**

There are no issues currently.

#### 9 QUESTION:

Which other systems will have to integrate or interface with the Ambulance Billing Services, and will the State provide incumbent vendors for each system?

#### **RESPONSE:**

Yes, the state will provide incumbent vendors for each system.

#### 10 OUESTION:

Whether companies from Outside USA can apply for this?

(like, from India or Canada)

# **RESPONSE:**

Any proposer can submit a proposal. The successful contractor will be required to have a physical presence in the USA which means they will be required to have a US mailing address. The successful contractor will be required to have a knowledgeable staff representative that manages the account that is regularly able to attend in person onsite meeting at the Longmeadow Fire Department with a reasonable notice provided (48 hours). The Town will not pay for additional contractor expenses associated with on-site travel and meetings with the Contractor. Current and previous service providers have not performed these services from an international location to our knowledge, so the Town is unaware if there are any compliance issues related to this question. Full legal and regulatory compliance is expected of the successful Contractor.

#### 11 QUESTION:

Whether we need to come over there for meetings?

#### RESPONSE:

Yes, see the response to the question above. On site meetings will be required as requested and scheduled by the Fire Chief.

Can we perform the tasks (related to RFP) outside USA?

(like, from India or Canada)

#### **RESPONSE:**

The proposer will need to provide evidence that local, state and national regulations and laws are being complied with for municipal ambulance billing service scope of work to be performed internationally and the Town reserves the right to verify. Current and previous service providers have not performed these services from an international location to our knowledge, so the Town is unaware if there are any compliance issues related to this question. Full legal and regulatory compliance is expected of the successful Contractor.

# 13 QUESTION:

Can we submit the proposals via email?

#### **RESPONSE:**

No, submit the proposal as instructed in the Request for Proposal document.

#### 14 QUESTION:

Please reconfirm the due date for this procurement by providing it in response to answers to questions.

#### **RESPONSE:**

Reference the Request for Proposal, page 3, legal notice for the due date. This addendum results in no change in request for proposal deadline.

#### 15 QUESTION:

Please describe your level of satisfaction with your current or recent vendor(s) for the same purchasing activity, if applicable.

#### RESPONSE:

Very satisfied.

# 16 QUESTION:

What estimated or actual dollars were paid last year, last month, or last quarter to any incumbent(s)?

#### **RESPONSE:**

Approximately \$7,300 last quarter.

# 17 OUESTION:

What were your annual gross charges last year or for the last 12 months?

#### RESPONSE:

Approximately \$2,300,000.

What were your annual total adjustments for last year or for the last 12 months?

#### **RESPONSE:**

Approximately \$1,300,000.

# 19 QUESTION:

What were your annual contractual allowance write offs for last year or for the last 12 months?

#### **RESPONSE:**

Information not available.

# 20 QUESTION:

What were your annual gross collections last year or for the last 12 months?

#### RESPONSE:

Approximately \$800,000

# 21 QUESTION:

What were your annual billable transports last year or for the last 12 months?

#### RESPONSE:

Approximately 1,500

# 22 OUESTION:

What are your per-mile ground transport charges?

#### RESPONSE:

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

#### 23 QUESTION:

What are your advanced life support charges?

#### RESPONSE:

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

#### 24 OUESTION:

What are your advanced life support emergency level 1 charges?

#### RESPONSE:

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the

successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

# 25 QUESTION:

What are your advanced life support emergency level 2 charges?

#### **RESPONSE:**

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

# **26 QUESTION:**

What are your basic life support charges?

#### **RESPONSE:**

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

#### 27 QUESTION:

What are your basic life support emergency charges?

#### **RESPONSE:**

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

#### 28 OUESTION:

What are your specialty care transport charges?

# **RESPONSE:**

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

# 29 QUESTION:

What are your treatment without transport charges?

#### **RESPONSE:**

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

#### 30 OUESTION:

What is your average per-trip charge?

#### RESPONSE:

Billing rate structures are currently being reviewed and updated for the next fiscal year so actual rates are unknown at this time. Compensation on this contract is based on the successful proposing contractor's percentage of actual receipts delivered to the Town of Longmeadow.

# 31 QUESTION:

When were the last changes to your transport rates, and are you considering raising any of the rates currently charged?

# RESPONSE:

July 1, 2018. New rates are currently being reviewed and updated for the next fiscal year, July 1, 2019.

# 32 QUESTION:

Are there any other charges you assess not otherwise covered by our questions?

#### **RESPONSE:**

No.

# 33 QUESTION:

What percentage of your patients are residents versus non-residents, and do you charge the two groups differently?

#### **RESPONSE:**

Information is not available.

#### 34 OUESTION:

Do you operate any shared services agreements with any other municipal or county governments in the region and, if so, with whom?

#### **RESPONSE:**

East Longmeadow, Massachusetts, and Agawam, Massachusetts.

#### 35 OUESTION:

What were your transports per year for life support for last year or for the last 12 months?

#### **RESPONSE:**

Unknown.

#### **36 QUESTION:**

What were your transports per year for advanced life support emergency level 1 for last year or for the last 12 months?

#### RESPONSE:

Approximately 1,000

What were your transports per year for advanced life support emergency level 2 for last year or for the last 12 months?

#### **RESPONSE:**

Approximately 20

# 38 QUESTION:

What were your transports per year for basic life support for last year or for the last 12 months?

#### **RESPONSE:**

Not available.

# 39 QUESTION:

What were your transports per year for basic life support emergency for last year or for the last 12 months?

#### **RESPONSE:**

Approximately 400.

#### 40 OUESTION:

What were your transports per year for specialty care transport for last year or for the last 12 months?

#### **RESPONSE:**

One

#### 41 OUESTION:

What were your transports per year for treatment without transport for last year or for the last 12 months?

# **RESPONSE:**

Not available.

#### 42 QUESTION:

What is your payer mix expressed as percentages of 100% billed?

# **RESPONSE:**

Unknown

#### 43 QUESTION:

What is your payer remit mix expressed as percentages of 100% of what you typically receive?

#### **RESPONSE:**

Unknown

44 QUESTION: How many total transport vehicles do you now operate?
RESPONSE: Three
45 QUESTION: What is your average loaded miles per trip?
RESPONSE: Eight
46 QUESTION: What is your average revenue per call?
RESPONSE: Unknown
47 QUESTION: Do you have a lockbox provider and, if so, which provider?
RESPONSE: Not applicable.
48 QUESTION: If you have a lockbox provider, will that provider remain in place as a result of this procurement?
RESPONSE: Not applicable.
49 QUESTION: Do you have an EPCR provider and, if so, which provider?
RESPONSE: Yes.
50 QUESTION: Do you have a collection agency provider and, if so, which provider?
RESPONSE: Yes
51 QUESTION: Which local hospitals or care facilities typically receive most of your patients?
RESPONSE: Multiple, no breakdown is available.

# TECHNICAL PROPOSAL SUBMISSION FORMS REQUEST FOR PROPOSAL (RFP): AMBULANCE BILLING SERVICE TOWN OF LONGMEADOW

# ACKNOWLEDGEMENT OF ADDENDA

The Proposer acknowledges to 1	he receipt of the following issued Request for Proposal Addenda:
CERTIFICATE OF NON-C	
	penalties of perjury that this bid or proposal has been
•	
made and submitted in good faith ar	nd without collusion or fraud with any other person.
As used in this certification, the wor	rd "person" shall mean any natural person, business,
partnership, corporation, union, con	nmittee, club, or other organization, entity, or group of
individuals.	
. · · —	(Signature of person signing bid or proposal)
	(Name of Business)
	(Name of Business)
_	(Date)
OEDTHEKATION ACTO DAVIM	ENT OF CTATE TAVEC
CERTIFICATION AS TO PAYM	ENT OF STATE TAXES
Pursuant to M.G.L.v.62C, S49A, I c Commonwealth of Massachusetts re	ertify under the penalties of perjury that the Contractor has complied with all laws of the lating to taxes.
Social Security Number or Federal Identification Number	Signature of Individual or Corporate Name
	By:Corporate Officer
	(If applicable)

(END – Addendum No. 1)