



1112 Manatee Avenue West  
Bradenton, FL 34205  
[purchasing@mymanatee.org](mailto:purchasing@mymanatee.org)

## Solicitation Addendum

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Addendum No.:	1
Solicitation No.:	22-TA004017BLS
Solicitation Title:	Emergency Medical Services (EMS) Billing
Addendum Date:	March 25, 2022
Procurement Contact:	Bonnie Sietman

**Request for Proposal (RFP) No. 22-TA004017BLS is amended as set forth herein. Responses to questions posed by prospective bidders are provided below. This Addendum is hereby incorporated in and made a part of RFP No. 22-TA004017BLS.**

**The deadline to submit all inquiries concerning interpretation, clarification or additional information pertaining to this RFP was March 23, 2022 at 3:00 PM EST.**

### CHANGE TO:

#### **EXHIBIT 2, PROPOSAL RESPONSE REQUIREMENTS; 2.02, PROPOSAL FORMAT; TAB 2- MINIMUM QUALIFICATION REQUIREMENTS; ITEM 3**

The Proposer has provided EMS billing services for at least three (3) Florida clients since November 1, 2018 in which Proposer is billing ~~over 40,000 transports per year~~ a minimum of 30,000 transports per year for each client (total of 90,000).

### QUESTIONS AND RESPONSES:

**Q1. Does Manatee County EMS utilize a “lockbox” for collections?**

R1. Yes, County’s lockbox.

**Q2. Under the new contract will the billing provider be required to pay the lockbox fee or will the cost be covered by the County?**

R2. Cost shall be covered by the County.

- Q3. If you are requiring the vendor to pay, can you provide the current cost of the lockbox?**  
R3. Not applicable.
- Q4. Does Manatee County have its own merchant account for processing credit cards?**  
R4. No.
- Q5. As part of the contract is the new vendor required to mail patient surveys or will an online survey be acceptable?**  
R5. The billing provider will be required to mail patient surveys.
- Q6. In the two most recent fiscal or calendar years, what was the actual number of billable transports provided by Manatee County EMS? (Please list each year individually.)**  
R6. Calendar Year 2020 – 31,157  
Calendar Year 2021 – 34,586
- Q7. In the two most recent fiscal or calendar years, what was the total amount of cash posted by Manatee County EMS for ambulance transports? (Please list each year individually.)**  
R7. Fiscal Year 2020 - \$10,257,639  
Fiscal Year 2021 - \$10,625,617
- Q8. In the two most recent fiscal or calendar years, what was the total amount of gross charges generated by Manatee County EMS for ambulance charges? (Please list each year individually.)**  
R8. Fiscal Year 2020 - \$19,485,137  
Fiscal Year 2021 - \$21,217,809
- Q9. Please provide the number of emergency and non-emergency transports broken down by service level.**  
R9. Fiscal year 2021  
a) ALS Emergency – 22,864  
b) ALS Non-emergency – N/A  
c) BLS Emergency – 10,293  
d) BLS Non-emergency – N/A  
e) ALS 2 – 509  
f) Specialty Care Transport – N/A  
g) Paramedic Intercept – 90 transfers to air ambulances  
h) Treat No Transport – 356

**Q10. Please provide your current rates for each of the service levels.**

- a) **ALS Emergency**
- b) **ALS Non-emergency**
- c) **BLS Emergency**
- d) **BLS Non-emergency**
- e) **ALS 2**
- f) **Specialty Care Transport**
- g) **Paramedic Intercept**
- h) **Treat No Transport**

R10. Schedule A, 2014 - Current Fee Schedule is attached to this Addendum No. 1.

**Q11. How much does the County charge per mile?**

R11. \$10.00 per mile.

**Q12. What is the average loaded mileage?**

R12. 5.1 miles.

**Q13. Please provide the charge mix, i.e., the total percentage of charges that were billed to the following four main payer groups in the two most recent fiscal or calendar years.**

- R13.
- a) Medicare
    - Fiscal Year 2020 – 68%
    - Fiscal Year 2021 – 69%
  - b) Medicaid
    - Fiscal Year 2020 – 5%
    - Fiscal Year 2021 – 6%
  - c) Commercial Insurance
    - Fiscal Year 2020 – 22%
    - Fiscal Year 2021 – 18%
  - d) Self-Pay Accounts
    - Fiscal Year 2020 – 2%
    - Fiscal Year 2021 – 3%

**Q14. Does the County use a collection agency? If yes, what is the name of the collection agency?**

R14. Revco Solutions.

**Q15. Does Manatee County EMS participate in any supplemental payment programs? If so, can you describe the role and payment structure arrangement?**

R15. Medicaid and Medicaid MCO PEMT – the billing provider role is to provide necessary reports to the County.

**Q16. How many ePCR records would the County want included in the annual Billing Compliance Audit?**

R16. 1-2% of our annual transports.

**Q17. What is the anticipated GO Live date for the new provider to begin billing transports for Manatee County EMS?**

R17. October 1, 2022.

**Q18. What is the term of the resulting contract?**

R18. Three (3) years with one (1) renewal option of three (3) years plus an additional six (6) months to complete any outstanding A/R.

**Q19. What ePCR software is the County currently using?**

R19. ESO Solutions.

**Q20. Will the County consider changing Minimum Requirement #3 to the following to increase marketplace completion?**

**The Proposer has provided EMS billing services for at least three (3) clients since November 1, 2018 in which Proposer is billing over 40,000 transports per year.**

R20. Refer to "Change To" section of this Addendum No. 1.

**Q21. Please provide the following information for 2021:**

Level of Service	Charge	Number of Transports Billed
ALS Emergency	\$600	22,860
ALS 2	\$700	509
BLS Emergency	\$500	10,290
Treatment No Transport	\$500	356
Mileage (per loaded mile)	\$10	Avg loaded miles/trip: 5.1

Payer Type	Number of billable Transports Payor Mix	Gross Charges	Net Charges	Net Collections
Medicare	69%	\$	\$	\$
Medicaid	6%	\$	\$	\$
Commercial Insurance	18%	\$	\$	\$
Self-Pay (uninsured)	3%	\$	\$	\$
Totals		\$21,217,809	\$	\$10,625,617

R21. Information provided in table (indicated in blue).

- Q22. How do you receive payments – do you use a lockbox or are payments processed by the billing contractor?**  
R22. Refer to R1.
- Q23. How do you handle distribution of HIPAA Notice of Privacy Practices?**  
R23. These are mailed out by the billing provider with our patient surveys.
- Q24. Do you contract with a collection agency for delinquent accounts?**  
R24. Refer to R14.
- Q25. Can you provide the name of the vendor and the fee you are being charged currently for these services?**  
R25. Ambulance Medical Billing; 3.9%.
- Q26. Are you currently using an electronic patient care (ePCR) reporting system? If so, which system are you currently using? Are you interested in different ePCR options?**  
R26. The ePCR system is ESO Solutions. The County is not interested in using different options.
- Q27. Will the vendor be financially responsible for the cost of your ePCR software and hardware? If so, please provide all specifications.**  
R27. No.
- Q28. Can you please provide the net charges for your most recent complete fiscal year?**  
R28. Net charges for Fiscal Year 2021 were \$16,602,038.
- Q29. Can you please provide the total collections for your most recent complete fiscal year?**  
R29. Refer to R7.
- Q30. Can you please provide the average revenue collected per transport for your most recent complete fiscal year?**  
R30. \$309.09.
- Q31. Can you please provide a breakdown of your most recent complete fiscal year transports by primary payor for the following categories?**  
R31. a) Medicare – 16,784  
b) Medicaid – 3,202  
c) Commercial Insurance – 4,363  
d) Patient Pay – 7,491
- Q32. Can you please provide the average loaded mileage per transport?**  
R32. Refer to R12.
- Q33. Can you please confirm how many invoices do you require and at what interval?**  
R33. Patient statements are sent out accordingly with an initial “this is not a bill”, then any balances should be 30 days either after DOS if uninsured or after insurance payment. There should be a total of three (3) statements at a 30-day interval.

**Q34. Can you please provide the number of transports for each call type for your most recent complete fiscal year?**

R34. Refer to R9.

**Q35. Can you please provide the current charges for each level of service?**

R35. Refer to R10.

**Q36. Please describe your current practice for managing Notice of Privacy Practice (NPP). Will the successful vendor be responsible for mailing NPP's?**

R36. Refer to R23.

**Q37. Do you currently use a lockbox for all payments and correspondence? If so, who will be responsible for the cost of the lockbox?**

R37. Refer to R1 and R2.

**Q38. If potential bidders currently bill for multiple clients with over 40,000 annual transports, but not 3 clients in Florida, will that disqualify them?**

R38. Refer to R20.

**Q39. How satisfied are you with your current EMS billing vendor? What is the reason for your RFP?**

R39. To evaluate the current market for EMS billing services.

**Q40. Will the bid bond stipulated in the sample contract be required under the contract resulting from this RFP?**

R40. No.

**Q41. Please clarify whether it is a total of 40,000 transports per year among a minimum of 3 Florida clients, or if it is 40,000 transports for each service (meaning 120,000+ transports per year)?**

R41. Refer to R20.

**Q42. Number of billable transports for 2019, 2020, 2021?**

R42. Calendar Year 2019 – 34,134

Calendar Year 2020 – 31,157

Calendar Year 2021 – 34,586

**Q43. Gross charges for 2019, 2020, 2021?**

R43. Fiscal Year 2019 - \$20,700,534

Fiscal Year 2020 - \$19,485,137

Fiscal Year 2021 - \$21,217,809

**Q44. Gross Payments for 2019, 2020, 2021?**

R44. Fiscal Year 2019 - \$10,541,554

Fiscal Year 2020 - \$10,257,639

Fiscal Year 2021 - \$10,625,617

**Q45. Percentage or number of transports broken out by financial class (Medicare, Medicaid, Commercial Insurance, Private Pay)?**

R45. Refer to R13.

**Q46. Name of current vendor and current vendor fees (% and flat Medicaid fee)?**

R46. Ambulance Medical Billing; 3.9%; \$8.00/Medicaid claim.

**Q47. How many Medicaid accounts were invoiced by the County by the current vendor in 2021?**

R47. 1,839 Medicaid claims.

**Q48. Is your current vendor handling the PEMT services? If so, what fee is being charged? If not, who is providing those services and what fees are being charged by the vendor?**

R48. PCG is handling our PEMT services; 6%.

**NOTE:**

Deleted items will be ~~struck through~~, added or modified items will be underlined. All other terms and conditions remain as stated in the RFP.

**INSTRUCTIONS:**

Receipt of this Addendum must be acknowledged as instructed in the solicitation document. Failure to acknowledge receipt of this Addendum may result in the response being deemed non-responsive.

**END OF ADDENDUM**

AUTHORIZED FOR RELEASE

Attachment: Schedule A, 2014-Current Fee Schedule

SCHEDULE A

**AMBULANCE FEES**  
Effective January 01, 2014

<u>ITEM</u>	<u>CHARGE</u>
<u>TRANSPORT SERVICES</u>	
Basic Life Support Non-Emergency Transport.....	\$ 400
Basic Life Support Emergency Transport.....	\$ 500
Advanced Life Support Non-Emergency Transport.....	\$ 500
Advanced Life Support Emergency Transport, Level 1.....	\$ 600
Advanced Life Support Emergency Transport, Level 2.....	\$ 700
Interfacility Transport.....	\$200
(one way)	
Specialty Care.....	\$800
Patient Deceased – treated but not transported.....	\$407
(If transported, level of service rendered is charged)	
<u>MILEAGE RATES</u>	
Mileage, charge per loaded mile.....	\$ 10
<u>SERVICES WITHOUT TRANSPORT</u>	
Advanced Life Support Level 1 services rendered without transport are billed at the Advanced Life Support non-emergency rate.....	\$ 500
Advanced Life Support Level 2 services rendered without transport are billed at the Advanced Life Support Level 1 amount.....	\$ 600
Emergency Helicopter Response Preparation in addition to charges for Advanced Life Support services.....	\$ 300
<u>MULTIPLE TRANSPORTS</u>	
For two patients transported simultaneously, the charge will be equal to 75 percent of the charge for the level of care given, plus 50 percent of the mileage charge.	
For three or more patients transported simultaneously, the charge will be equal to 60 percent of the charge for the level of care given, plus the applicable mileage charge divided by the number of patients on board.	



Resolution R-13-196

Schedule A

Page Two

ITEM

CHARGE

SPECIAL EVENTS AND MISCELLANEOUS RATES

Stand-by Time for ambulance and crew, per hour .....	\$ 160
Minimum charge will be for three hours and charges will Be rounded up to the next hour.	
Stand-by Time for staff without ambulance, per person per hour.....	\$ 60
Minimum charge will be for three hours and charges will be rounded up to the next hour.	
Wait Time for ambulance and crew, per half hour.....	\$ 50
Minimum charge will be for half hour and charge will be rounded up to the next half hour.	
Medical Record Release.....	\$ 5