

**Board of Commissioners:**

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ADDENDUM # 9

March 18, 2016

RFP# SB01-15R – Transportation for Non- Emergency Medicaid, Pregnancy Related & Healthchek Services

To All Registered Providers:

The deadline for HCJFS to issue Final RFP answers or Addenda is extended to March 21, 2016.

Section 3.4 RFP Conference (D) currently reads:

Only Providers who register for the RFP Process will receive copies of questions and answers.

Changed to read:

Providers will not be e-mailed questions and answers. Providers must access HCJFS.org or Bidsync.com.

Questions and Answers:

1. Question:

Section 1.2 Scope of Service M. Withholding Amounts Paid for Trips

Are mechanisms in place for Providers to recoup withheld payment if they can show the trip was performed and the missing information can be provided?

Answer:

These situations are addressed on a case by case basis.



2. Question:

Section 1.2.J, pg. 9 - Per the RFP: "Transportation to Day Treatment/Partial Hospitalization locations must be completed by Provider, and may not be subcontracted. This transportation is in the form of dedicated van transportation for groups of children going to the same location. Groups of children that are all under the age of eight (8) will require an additional driver/monitor. If a child or group of siblings is traveling alone, the driver may act as the driver/monitor."

- a. Please confirm the percentage of trips in this category.
- b. Please provide the maximum number of passengers associated with these trips.
 - i. Section F, page 17 qualifications – Please describe the average length of time for an employee to receive results back from the central registry.
 - ii. If an employee moves from the incumbent service provider(s) to a new service provider, please confirm that a new central registry check does not need to be completed or that the employee is approved to perform service while the registry is in process.

Answer:

- a. See 1.2.1, A. Population
- b. Per a mass mailing on 12/03/15, 724 individual children were involved in DT/PH from 8/1/15 to that date.
 - i. Process is dependent on many factors, however, 30-60 days is the expectation.
 - ii. New Provider is required to obtain a new central registry check.

3. Question:

Section 2.2.2.J, pg. 27 - Per the RFP: "Provider Brochures - A copy of the Provider's brochures which describe the services being proposed, including a rider's guide."

Please confirm that the service provider is not responsible for providing passengers with a riders guide.

Answer: Provider is responsible for providing this guide to adult passengers and facilities requesting transportation services for minors.

4. Question:

Section 1.3.1, pg. 18 - Per the RFP: "The current Provider and two sub-contractors have a total of 208 vehicles, 98 drivers and 28 monitors providing the transportation services." Per Add #3, Q&A #6 - Question: How many vehicles does each operate? Answer: Meda-Care - 98, UTS - 30, Ride Right – 80

- a. Please confirm the total number of vehicles used to operate only the services contemplated in the RFP (SB01-15R).
- b. In regards to the 98 drivers and 28 monitors stated, please confirm the total number of drivers required to run the services for this project as this driver count does not appear to match the number of vehicles (208).
 - i. Please break down the number of drivers and monitors that are assigned by each provider (prime and both subcontractors), and used solely to provide service for the work addressed in this RFP (SB01-15R).

Answer: The numbers represent the total number of vehicles currently used for this contract. There is no match between the number of drivers and vehicles.

As of June 2015, the current Provider, utilizing 80 vehicles, trains individuals as drivers/monitors to maximize flexibility. Some of these individuals also perform other administrative functions.

Subcontractors may utilize drivers/monitor/vehicles on other contracts; however, individual trips may not combine HCJFS NET/PRS consumers with any other riders. Monitors are not currently utilized by the subcontractors.

5. Question:

Section 2.3.A, pg. 28 - Per the RFP: "In the event a fuel surcharge is included in Provider's proposal, please submit the following: (1) The proposed base price of fuel per gallon used in calculating the Unit Rate, as well as the methodology used to determine the Unit Rate. (2) Average miles per gallon fuel consumption per vehicle type. (3) The following method will be used to determine when the fuel surcharge will apply. NOTE: HCJFS will only allow fuel surcharge compensation if the price per gallon of fuel exceeds the base price of fuel per gallon used by Provider in calculating the Unit Rate by 10% or more ("fuel surcharge threshold price").

Would HCJ&FS consider providing a base fuel rate per gallon to give all proposers the same base rate in calculating costs?

Answer: No

6. Question:

Please provide 3 months of invoices

Answer: See Exhibit 1 below

7. Question:

Can you provide a one week sample of daily trip log, in Excel format?

Answer:

Attachment A - Ride Right trip logs

Attachment A - Meda Care trip logs

Attachment A - UTS trip logs

8. Question:

Please provide copies of dispatch sheets for a seven (7) day period for both the prime contractor and both subcontractors.

Answer:

Attachment A - Ride Right trip logs

Attachment A - Meda Care trip logs

Attachment A - UTS trip logs

9. Question:

How many round trips are scheduled and how many round trips are will call?

Answer:

In the month of February, there were 37,216 total round trips and 4,350 were scheduled with a will-call for the return ride

10.Question:

Section 1.2, Scope of Service F 2. Some authorizations may be made a minimum of two (2) hours prior to the trip time, as deemed necessary and appropriate by HCJFS.

How many trips per month are performed on this basis?

Answer: Trips requested within two hours are rare- approximately two per month. However; we average 80+ trip change requests per month with no more than two hours' notice.

11.Question:

Section 1.2.2.A, pg. 11 - Per the RFP: "Provider shall have a toll free telephone number accessible and answered 4:00 A.M. through 10:00 P.M seven (7) days per week for consumers calls."

For staffing purposes, please provide the number of calls received by the contractor by day and by hour.

Answer:

Attachment B.

12.Question:

For the purposes of insurance and wage costing, please provide the current revenue miles and revenue hours; current total miles and total hours; and current deadhead miles and deadhead hours for the provision of these services for the prime contractor and both subcontractors.

Answer:

This information is not tracked for subcontractors. Prime contractor information for January 2016:

Current Revenue Miles	87,862
Current Revenue Hours	5,126
Current Total Miles	133,233
Current Total Hours	7,349
Current Deadhead Hours	2,222

13. Question:

Please provide a copy of the current pull out times and return to yard times for each route.

Answer

Attachment C

Please see Attachment C for pull out and return to yard times for Ride Right. This information is not available for subcontracted providers.

14. Question:

Please clarify the amount of vehicles used in revenue service by day of week, as well as the maximum number of vehicles used at peak service time for each of the services described in the RFP.

Answer:

The number of vehicles used by Ride Right in revenue service for the most recent week are as follows:

Monday 3/7/16: 61 vehicles

Tuesday 3/8/16: 63 vehicles

Wednesday 3/9/16: 68 vehicles

Thursday 3/10/16: 63 vehicles

Friday 3/11/16: 60 vehicles

Peak service time for the week (3/9/16) required 68 vehicles. Peak vehicle usage by subcontractors is not tracked.

15. Question:

Section 1.2.1.A, pg. 11 - Per the RFP: "Transportation for Non-Emergency Medicaid Services – From July 2012 through October 2015 - scheduled one way transports for Non-Emergency Medicaid were approximately 1,817,075 for medical, therapy, dental, and pharmacy appointments. Approximately 48% of scheduled traditional Non-Emergency Medicaid trips involve group transportation of minor Consumers to or from partial hospitalization or day treatment services." "Transportation for Pregnancy Related Services and Healthchek services - From July 2012 through October 2015 - scheduled one way transports for Pregnancy Related Services and Healthchek transportation were approximately 28,441. HCJFS will determine whether a guardian accompaniment is necessary and will notify Provider"

a. Trip Data questions:

- i. Please provide the number of reimbursable trips performed by:
 - c. Day of the week – total trips on average
 - d. Hour of day
 - e. Total trips per month –
 - i. Scheduled and performed
 - f. Total miles and live miles driven by trip (live miles representing the time a passenger is on a vehicle)
 - g. The average amount of time spent and miles driven per trip
 - h. Total number of authorized passengers transported per day
 - i. Average number of passengers transported per vehicle hour (productivity)

Answer:

Attachment D and E.

16. Question:

From Q&A Addendum 4 - Question: Can we get a 4 week list of pick up points? Answer: Please reference RFP Attachment N and RFP Attachment O for the list of Medicaid Provider and Consumer pick up locations (pick up points).

- a. In order for proposers to price correctly, please provide a listing of actual trips by day for a four week period, if possible. Please provide in an electronic or excel format which will allow proposers to properly gauge miles, hours and staffing.
- b. Please provide /confirm the estimated number of trips that all proposers should use for developing pricing.

Answer:

Attachment D.

17. Question:

Please provide 3 months of any management reports submitted by the incumbent.

Answer

Attachment F



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 2997

Invoice Date: 12/8/2015
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
TRIP	October 2015 Services- Medicaid	25,482	\$31.23	\$794,303.82
MISC	PO #561381	1	\$0.00	\$795,802.86
MISC	Tax ID [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 115,783.58	1	\$0.00	\$0.00

OK to pay
 \$794,303.82
 PO # 561381
 Rosemary B. Hain
 12/11/15

Invoice Total: \$794,303.82
 \$795,802.86



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 2999

Invoice Date: 12/8/2015

Customer Number: 004

Terms:

Service Type	Description	Quantity	Price	Amount
TRIP	October 2015 Services - Pregnancy Related	27	\$31.23	\$843.21
MISC	PO #561382	1	\$0.00	\$0.00
MISC	Tax ID [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 122.68	1	\$0.00	\$0.00

OK to pay
 \$843.21
 PO # 561382
 Rosemary J. Hain
 12/11/15

Invoice Total: \$843.21



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 2998

Invoice Date: 12/8/2015
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
TRIP	October 2015 Services - Non Medicald	1,000	\$31.23	\$31,198.77
MISC	PO #561383	1	\$0.00	\$31,230.00
MISC	Tax ID [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 4,543.74	1	\$0.00	\$0.00

OK to pay
 \$ 31,198.77
 PO# 561383
 Rosemary Hain
 12/11/15

Invoice Total: \$ 31,198.77
\$31,230.00



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3051

Invoice Date: 1/12/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	November 2015 Services - Medicaid	22,191	\$31.23	\$692,119.26
MISC	PO #561381	1	\$0.00	\$693,024.93
MISC	Tax ID# [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 91,342.80	1	\$0.00	\$0.00

OK to pay
 \$692,119.26
 PO# 561381
 Rosemary Hain
 1/20/16

Invoice Total: \$692,119.26
 \$693,024.93



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3053
 Invoice Date: 1/12/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	November 2015 Services-Pregnancy Related	22	\$31.23	\$687.06
MISC	PO #561382	1	\$0.00	\$0.00
MISC	Tax ID# [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 90.56	1	\$0.00	\$0.00

OK to pay
 \$687.06
 PO # 561382
 [Signature]
 1/20/16

Invoice Total: \$687.06



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3052

Invoice Date: 1/12/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	November 2015 Services - Non Medicaid	780	\$31.23	\$24,359.40
MISC	PO #561383	1	\$0.00	\$0.00
MISC	Tax ID# [REDACTED]	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 3,210.64	1	\$0.00	\$0.00

OK to pay
 \$24,359.40
 PO# 561383
 [Signature]
 1/20/16

Invoice Total: \$24,359.40



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3111

Invoice Date: 2/15/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	December 2015 Services - Medicaid	22,226	\$31.23	\$694,117.98 \$693,680.76
MISC	PO #561381	1	\$0.00	\$0.00
MISC	Tax ID #	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 50,055.84	1	\$0.00	\$0.00

OK to pay \$693,680.76
 PO # 561381
 Rosemary Hain
 2/22/16

Invoice Total: ~~\$694,117.98~~
 \$693,680.76



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3113

Invoice Date: 2/15/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	December 2015 Services - Pregnancy Relat	18	\$31.23	\$562.14
MISC	PO #561382	1	\$0.00	\$0.00
MISC	Tax ID #	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 40.54	1	\$0.00	\$0.00

OK to pay \$562.14
 PO # 561382
 Rosemary Han
 2/16/16

Invoice Total: \$562.14



16 Hawk Ridge Drive
 Lake St. Louis MO 63367
 Billing Dept: 636.561.5686 ext 5588

Bill To:
 Hamilton County Jobs & Family
 222 E Central Parkway
 Cincinnati OH 45202

Invoice Number: 3112

Invoice Date: 2/15/2016
 Customer Number: 004
 Terms:

Service Type	Description	Quantity	Price	Amount
CAP	December 2015 Services - Non Medicald	994	\$31.23	\$31,042.62
MISC	PO #561383	1	\$0.00	\$0.00
MISC	Tax ID #	1	\$0.00	\$0.00
MISC	Aggregate Gross Profit Earned 2,238.62	1	\$0.00	\$0.00

OK to pay \$31,042.62
 PO # 561383
 Rosemary Hair
 2/22/16

Invoice Total: \$31,042.62