

SCHOOL DISTRICT OF PALM BEACH COUNTY
PURCHASING DEPARTMENT
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April 12, 2007

ADDENDUM NO. 1

REQUEST FOR PROPOSAL NO.: 07C-006B

TITLE: REQUEST FOR PROPOSAL FOR NURSING SERVICES

RETURN DATE: April 25, 2007, 2:00 P.M. EST

Responses to questions received from proposers are as follows:

Question: What is the current hourly rate being paid for RN and LPN?

Answer: RN @ \$31 & \$38 and LPN @ \$25 & \$28.

Question: Is the contractor responsible for billing Medicaid directly, or furnishing proper documentation for Medicaid billing?

Answer: The contractor would be responsible for billing Medicaid directly for Medicaid eligible children, and providing documentation to the District on invoice of hours billed to Medicaid and hours billed to the District.

Question: Section 5.1 - Under the current contract, did PBCSD grant an increase?

Answer: No.

Question: Section 5.1- What constitutes documentation of market increase(s)?

Answer: An example of documentation for a rate increase might be the Florida Agency for Workforce Development, Labor Market Statistics for the West Palm Beach- Boca Raton MSA. The contract awarded proposer must submit the request for rate increases with documentation to the District for approval and the decision of the District's Purchasing Director, or designee, shall be the final binding determination for approval or denial of the request.

Question: Section 5.1-What were the current contractors paid per hour for RNs & LPNs?

Answer: RN @ \$31 & \$38 and LPN @ \$25 & \$28.

Question: Section 5.1- Were the two current contractors paid the same rates during the past contract period?

Answer: Each contractor submitted their own rate with their response to the RFP.

Question: Section 9.2.4 - Does Medicaid pay vendors directly for school nursing? If not, is the guarantee to bill Medicaid first applicable?

Answer: Medicaid is responsible to pay all hours the child is eligible for under their program. Once all Medicaid billable hours are used the district would pay balance, if any. The child's school attendance is not an allowable rationale for a decrease in Medicaid hours. Refer to IDEA revisions "In general, the revised regulation, Section 612(a)(12); 300.142, restates the new statutory provisions regarding interagency agreements established under the authority of the Chief Executive Officer of the State or his or her designee. Thus, the regulation specifies that the financial responsibility of each non-educational public agency, including

the State Medicaid agency and other public insurers of children with disabilities, must precede the financial responsibility of the LEA (or the State agency responsible for developing the child's IEP). The revised regulation specifies that a non-educational public agency may not disqualify an eligible service for Medicaid reimbursement because that service is provided in a school context."

Question: Section 9.2.4 & 9.4.1 - Do students, who are billed to Medicaid, need to have their Plans of Treatment prior authorized by KeyPRO?

Answer: Any process the agency currently follows for Medicaid/KeyPRO would continue. That the location where services are provided is a school should have no impact. See above answer.

Question: Section 9.2. 4 - Will the county's school board be responsible for determining the children's eligibility for Medicaid? Will they also be responsible for obtaining KEPRO (Medicaid's authorization service) authorization? Our concern is, in the past KEPRO has denied Medicaid eligible children during school board hours, please advice on these circumstances.

Answer: The district does not authorize Medicaid services. We are requesting that students already identified as Medicaid eligible be billed to Medicaid. See above answer.

Question: Section 9.2.5 - If staff has a current FBI clearance already, is another clearance thru the PBCSD Police Department required?

Answer: We cannot use an FBI clearance. The person has to be printed under our number (ORI) for us to receive any subsequent arrests.

Question: Section 9.3.1 - How many RN Supervisors are provided under the current contract?

Answer: We are currently utilizing the services of two supervisors per contracted agency. This number is subject to change at any time as it is based on fluctuating needs of the district which change as student needs change.

Question: Section 9.3.3 - What specific paperwork is currently required? Are samples available?

Answer: Daily and weekly logs are the time sheets used by the agency to verify where the contracted nurses are, for how long, providing services to whom; each agency has prepared their own. District forms are pdf files and may be viewed at www.palmbeach.k12.fl.us under FORMS searching by keyword (IEP, 504, Parent Consent, etc.). These forms are completed by District personnel; the nurses should have access to a copy. The physician authorization forms are Health Department documents and can be requested by physicians at the School Health office at 561-355-3159. At times the contract nurse needs to consult with student's parents, student's physician, and district contracted physician, in order to obtain and/or clarify procedures listed on authorization forms as these forms are completed by the doctor's office.

Question: Section 9.6.2 - Are there instances where the school day and the bus transportation time exceed 37.5 hours per week?

Answer: Yes.

Question: Section 9.6.8 - Is there currently a QAP being used? If so, is a copy available?

Answer: Yes, see page 4.

Question: Section 11.8 - Define a Visiting Nurse? What is the classification (RN or LPN) and what

are the duties?

Answer: A nurse who would visit a school to complete an individual procedure daily; most commonly a sterile catheterization. Classification would depend on needed procedure.

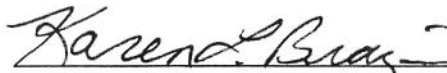
Question: Section 21.4, B - For General Liability Insurance, if insurance is on a claims-made basis with retroactive coverage, would this insurance be an acceptable substitute for the occurrence form that is called for in the RFP?

Answer: General Liability must only be an Occurrence Form Policy.

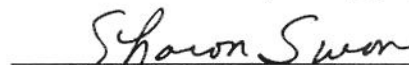
Question: Section 21.4, D - For Professional Liability Insurance, if insurance includes a deductible or self-insured retention in an amount greater than \$5,000, would this be acceptable to meet the requirements of the RFP, or would it disqualify a potential bidder?

Answer: Exceptions might be granted based on the size and financial strength of the proposer. This is subject to review and approval by the District's Risk Management office.

This addendum is for information only and need not be returned with your RFP. By virtue of signing the Request for Proposal, proposer agrees to this addendum.



Karen L. Brazier, Purchasing Agent



Sharon Swan, Purchasing Director

ESE CONTRACT NURSING SPRING 2006 - SPRING 2007**TRENDING DATA SUMMARY**

	Spring 05-06	Summer 05-06	Fall 06-07	Spring 06-07	TOTALS	AVERAGE	PERCENTAGE	
SCHOOL DAYS	19	18	20	16	73	18.25		
NUMBER STUDENTS	26	19	25	26	96	24		
TREATMENTS ORDERED	319	274	430	344	1367	341.75		
TREATMENTS ADMINISTERED	319	274	410	328	1331	332.75	97%	*
MEDICATIONS ORDERED	541	391	643	449	2024	506		
MEDICATIONS ADMINISTERED	541	391	623	417	1972	493	97%	*
FEEDINGS ORDERED	277	242	342	291	1152	288		
FEEDINGS ADMINISTERED	277	242	342	282	1143	285.75	99%	**
PRN MEDICATIONS	47	28	23	17	115	28.75		

* medication not provided by parent

** feeding done at home by parent