

**SCHOOL DISTRICT OF PALM BEACH COUNTY
PURCHASING DEPARTMENT
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June 12, 2007

ADDENDUM NO.: 1

REQUEST FOR PROPOSAL NO.: O7C-012B

TITLE: REQUEST FOR PROPOSAL FOR SPEECH AND LANGUAGE SERVICES

RETURN DATE: June 28, 2007, 2:00 P.M. EST

Responses to questions received from proposers are as follows:

Question: Should our company state specific towns/cities/zip codes of Palm Beach county and specific student population in the proposal that we are able to serve?

Answer: Section 9.0 B states that proposers can choose to provide services for some or all of the identified District needs. The intention and parameters must be clearly stated in the proposal submitted.

Question: What is the Certified School Match Medicaid Program?

Answer: The purpose of the Medicaid Certified School Match program is to provide reimbursement for medically necessary services provided by or arranged by a school district for Medicaid-eligible students. Medicaid is financed by state and federal public funds. School Districts participating in Medicaid as providers certify quarterly that they have used non-federal education funds for health care services as the state share. Medicaid then reimburses the school district provider the federal share of its payment for the health care service to disabled students who are eligible under Part B or C of IDEA or who have Medicaid eligible services referenced in their IEP. This reimbursement process is termed "certified school match". All speech-language pathologists in the District are required to submit documentation for Medicaid eligible students as part of their workload.

Question: Why was RFP 07C-011B rejected with no awards granted?

Answer: RFP 07C-011B was rejected in order to clarify Medicaid billing requirements. RFP 07C-012B was released with this clarification.

Question: If a group consists of one or two Medicaid billed children and one or two School Board billed children, then are both Medicaid and School Board billed? For example in this case would each Medicaid child be billed for \$26 for the hour and School Board be billed for the remainder in order to make up for the agreed upon school board hourly rate?

Answer: As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status.

Question: If one or two of the Medicaid children are absent would School Board pay so that the session will be reimbursed at the School Board agreed rate? If not, the provider will receive a considerably lower rate than what was agreed upon.

Answer: As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status.

Question: If the Medicaid child has HMO Medicaid insurance then the contractor may not be able to bill for the therapy. Will the School Board pay for these children?

Answer: As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status.

Question: If the child is receiving speech therapy after school hours again the contractor may not be able to be reimbursed. Will School Board pay for these children?

Answer: If a Medicaid eligible student is receiving therapy outside of school, the private provider gets priority for billing. This is arranged between the District provider and the private provider as long as Release of Information is signed by the parent.

Question: Will School Board check each Medicaid child's Medicaid number each month to determine if they still have Medicaid? This is something that is checked electronically and is billed to the provider per number that is checked. If School Board checks the numbers then how will the provider find out if a child is still ineligible?

Answer: The District's Medicaid Specialist manages eligibility lists and shares this information directly with the school sites.

Question: If a child becomes third party insurance through Medicaid then will School Board reimburse for this child?

Answer: As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status.

Question: If the provider does the billing there is important information which must be made available: social security#, Medicaid #, diagnosis, parent's name address and phone number, primary care physician's name, physician's authorization number, POC, prescription, etc. Will the School Board provide this information?

Answer: As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status. Required documentation for submission to the District's Medicaid Specialist includes data readily available at school sites.

Question: Who is the current provider?

Answer: There are 3 current providers; Boca Speech, Inc., Interim Healthcare, and Rehabworks.

Question: How many therapists are required?

Answer: We cannot guarantee an exact number as the needs change continually. During FY 07, 18-20 full time SLPs were needed in K-12 schools. Pre-K and Private School services used 15-20 speech-language pathologists to serve private daycares, complete diagnostics, and to serve eligible students at participating private schools.

Question: Will you consider Bachelor's level assistants?


Answer: No.

Question: What is the current rate being paid for this service?

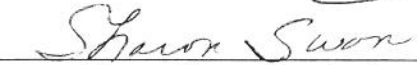
Answer: Current rates are \$ 53.00 - \$ 70.00 per hour.

- Question: Do we have to bill Medicaid directly or provide the proper documentation only?
Answer: No, providers will complete required documentation for submission to the District's Medicaid Specialist. The District submits billing directly to Medicaid. As stated in section 10.3 of RFP 07C-012B, the proposer will bill the District for services rendered to all students, regardless of Medicaid status.
- Question: Under section 10.3 B,C can you clarify the billing. Are we to bill Medicaid for services rendered to students with Medicaid or would we bill the school directly for all services provided?
Answer: Contracted providers will bill through the District's Certified School Match Program, Medicaid's public school program. Providers will bill the District for all services provided.

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



Karen L. Brazier, Purchasing Agent



Sharon Swan, Purchasing Director