



Dinwiddie County Procurement

14010 Boydton Plank Road

Dinwiddie, VA 23841

Phone: (804) 469-4500, Option 1, Ext 2150

E-Mail: hcasey@dinwiddieva.us

www.dinwiddieva.us/purchasing

ADDENDUM #1

Date: April 1, 2024

Request for Proposals: 24-031524

Third-Party Billing and Collection Administration Services

Deadline: April 12, 2024 at 2 p.m. EST

TO ALL POTENTIAL OFFERORS:

The following information is being provided for purposes of clarification or in response to questions received from potential offerors. In the event that any of these specifications conflict with previous specifications, the specifications in this addendum shall control. Prepare your proposals accordingly:

Answers to Questions Received:

1. Will the vendor be financially responsible for the cost of your ePCR software and hardware? If so, please provide all specifications.

Answer: No

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

Answers:

- For Dinwiddie County: NPP's are carried on the EMS Units and are given out at the time of service in most cases. The ePCR program has a tracking feature of whether or not they are received. If they are not given out at the time of service then the vendor is required to mail them.
- For Goochland County: NPP's shall be mailed out by the vendor with bills.
- For City of Colonial Heights: NPP's shall be mailed out by the vendor with bills.

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

Answer: Yes, the localities use lock boxes. The cost is passed on to the County/City by the vendor.

4. Will there be one contract agreement for all three agencies or will there be three separate contracts?

Answer: One contract will be awarded. There will be one contract for all three agencies.

5. The mailing address for submissions is a PO Box. Can you provide a direct address so proposals can be sent via Fedex or UPS?

Answer: See Section 4.1.A.i. of the RFP.

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

Answer: All localities on this joint RFP use Change Healthcare as the current vendor. We are satisfied with the vendor and have used them for many years. In February 2024, Change Healthcare provided notifications of termination of contracts to all three localities. The existing contracts will end as of June 30, 2024 for Dinwiddie County, August 31, 2024 for Goochland and June 30, 2024 for the City of Colonial Heights.

7. Does your agency(s) currently have a merchant account established with a credit card processing solution? If so, please provide the name of the solution. Will your agency pay for associated credit card processing fees?

Answer:

- For Dinwiddie: Yes, Dinwiddie County accepts credit card payments through Vantiv. The County holds an agreement directly with Vantiv. The County pays the fees. They are not passed on to the citizens.
- For Goochland: Goochland does not currently have a credit card payment option for EMS Billing.
- For Colonial Heights: Yes, Colonial Heights accepts credit card payments through Bridgepay for EMS Billing.

8. What is the fee charged by your current vendor for each agency?

Answer: See the Attachments to the RFP.

9. Please provide statistical data for each agency to include total annual charges, breakdown of ALS/BLS, collections, and revenue per transport.

Answer: See the Attachments to the RFP. For a full copy of the RFP, visit www.dinwiddieva.us/purchasing.

Note: A signed acknowledgement of this addendum must be received by this office prior to the due date and time, or must be attached to your proposal. Signature on this addendum does not constitute signature on the original proposal. The proposal must also be signed per RFP instructions.

Company Name: _____

Signature: _____

Type/Print Name: _____

Title: _____

Date: _____