

State of Delaware
Delaware Veterans Home
Advanced Practice Nurse and On-Call Services
for the Delaware Veterans Home

Questions and Answers
May 2, 2011

In attendance: Randy Weikle, Jackson & Coker
Chris Descoteau, Healthspan Inc.
Paul Anderson, Liberty Healthcare Corp.
Sean Cummings, Pennhurst Group
David Neu, Maxim Staffing Solutions
Sandy Groff, Delaware Veterans Home
Bill Peterson, Delaware Veterans Home
Mike Talmo, Delaware Veterans Home
Patty Hildebrand, Delaware Veterans Home

Questions Received Prior to Pre-Bid Meeting

1. Is another contractor currently providing the Advance Practice Nurse (APN) services requested in this solicitation? If so, how much are they charging the government for these services?

No contractor is currently providing the service.

2. If there is not an incumbent contractor, how are the APN services being provided now?

APN is a merit position – 1 full time

3. We are more familiar with the term “Nurse Practitioner (NP)” instead of “Advance Practice Nurse”. The services that are being requested in the RFP are similar to what you would find in a Nurse Practitioner. Are we correct in assuming that the services you are requesting are those of a Nurse Practitioner?

Yes – NP and APN are the same

4. Would you consider a Physician’s Assistant instead of an APN or NP?
Yes. If you propose the PA position, state that in your proposal.
5. Section II, Page 2, Under “The proposal shall contain”, Number 4, “An hourly-rate for two (2) APN for 1,720 hours each per fiscal year (July – June)”, you seem to be requesting rates for 2 providers. Are you requesting a rate for a back-up provider, or are we expected to provide two APN’s during the shift?

We are looking to contract with one provider – it is not a multi-provider contract. We are looking for 2 full time APN’s to work 37.5 hours on site per week and provide off-site on-call services to share with the Medical Director contract position.

6. In the section noted in question 5, you only are requesting 1,720 hours, which appears to be short of a full time position. Since an FTE is normally between 1920-2000 hours a year (depending on holidays and other leave time), and the fact that On-Call services are required, could you please confirm that the provider will be working on-site Monday – Friday 8:00am - 4:30pm, 52 weeks per year, excluding state and federal holidays. If this is the case how will you account for the reduced hours?

Please correct hours to be at maximum 1950 hours each. These hours are for on-site only - Mon – Fri 8- 4:30. No weekend or holiday. (1950 = 37.5 for 52 weeks)

7. Section II, Page 3, Number 10, we are asked to provide a “Template and proposed process for Medicare B billing services appropriate to the APN services” with our proposal. In our experience with federal and state government hospitals we have never been required to bill for the services of our contract employees. Under what circumstances would we have to bill Medicare Part B?

The provider will not be billing for Med B services. The facility will be. For the facility to bill, we will need data from the APN’s. We are asking for a template of the form that you would submit to the facility billing office and the process that the APN’s will follow to submit the form.

8. Section D, Page 12, Number 1 a, “The term of the contract between the successful bidder and the State shall be for one (1) year with two (2) extensions for a period of one (1) year for each extension.” The contract term is for a base and 2 extension years (3 years total). Are we able to charge a separate rate for each year? If so, is there a bid page listing the base and 2 extension years that you would like us to fill out, or should we separate our rate for the three years (to allow us to factor in cost of living increases, etc.) in separate cost proposals for each year.

If you are proposing separate rates for the different years, that must be clearly presented in the budget proposal.

9. Same section noted in question 8, number 1 d, “The State of Delaware’s standard contract will most likely be supplemented with the vendor’s software license, support/maintenance, source code escrow agreements...” Please clarify if this is an error in the solicitation, as it does not seem to pertain to the services being requested.

The RFP is a standard template. This does not apply to this service agreement. The Department’s /Facility’s standard contract will be used. A copy will be attached to the Q & A’s on the web site and a paper copy is available today.

Questions/Discussion from Pre-Bid Meeting

1. Page 3 – Item #4 - Hours are 1,950 per APN per fiscal year not 1,720 per APN per fiscal year. The 1,950 is the maximum number of hours. The facility will not require additional APN coverage for vacations. Only include

- the number of hours that you will actually be providing services for up to the maximum of 1,950.
2. Page 21 – f. Insurance – Automobile Insurance is not required.
 3. APN hours – The hours are 8:00 am to 4:30 pm with a one-hour unpaid lunch period. Total hours per day equal 7.5, 37.5 hours per week.
 4. On-Call Rotation – On-Call rotation should be one week at a time. On-Call is off-site. On-Call shall be shared between contract APN's, merit APN and contract Medical Director. You can propose other rotation schedules, but clearly describe how you propose to cover if not one week at a time.
 5. The facility will give each APN access to its electronic medical record.
 6. The proposal shall include potential resumes of candidates. It is preferred that candidates are experienced in Family Practice or Gerontology as stated on page 3, item #5. The Veterans Home will screen the top 2 or 3 potential applicants that the successful bidder proposes.
 7. The APN's must have prescriptive authority as stated on page 2, item #2,
 8. If the current merit APN leaves the facility, the position will not be filled. This will leave two (2) contract APN's and one (1) contract Medical Director.
 9. The APN's will share a case load with the Medical Director. Each APN may be assigned to a particular unit, not assigned by patient complexity.
 10. The possibility exists that the Blue Wing will open in 2012. The opening of the 30-bed unit depends on funding approval.

Questions Received After Pre-Bid Meeting

1. Section III – A. Should the cost schedule include separate rates for on-call services (weekday nights, weekends and holidays) in addition to the regular service hourly rate?

Separate rates should be included in the cost proposal.

2. Section IV – D. Should the cost schedule include rate(s) that will apply for three (3) years or separate rates for the initial contract year (July `11 – June `12) and each extension period (July `12 – June `13 and July `13 – June `14)

If you are proposing different hourly rates in each of the three years, each year would have separate costs. (Year 1 hourly rate equals \$x.xx, Year 2 hourly rate equals \$x.xx and Year 3 hourly rate equals \$x.xx) If you are proposing one rate over the three year period, only one line item hourly rate is necessary.

3. Page 3, Item 8 – Please explain proof of Medicaid and Medicare participation. Is it the vendor that is a provider and must provide its numbers or is each APN a provider and you require their numbers?

The facility will be billing for the APN services under Medicare part B, therefore the provider does not need to supply proof of Medicaid and Medicare.

