

PUBLIC HEALTH NURSING BRANCH

REQUEST FOR PROPOSAL: RFP No.: HTH 580 FY 08-1

Orientation Session

Held on December 4, 2007, 9:00 a.m.

At Department of Health, Kinau Hale, 1250 Punchbowl St., 1st Floor Conference Room

RFP Timeline:

Proposal Submittal Deadline: January 15, 2008

- All mail-ins: Postmarked by US Postal Service no later than January 15, 2008 and received by PHNB no later than 10 days from submittal deadline.
- Hand Delivery accepted at PHNB, 1250 Punchbowl St. Room 210, by 4:30 pm
- Delivery by private mail service such as FEDEX shall be considered as hand deliveries

Any proposals received after the identified deadlines will be returned to the agency.

Template for RFP submittal: Agencies requested that PHNB Secretary email the templates for the RFP to all of the agencies on the RIF Orientation attendance list and RFP Orientation attendance list. DONE on 12/4/07.

Questions and Responses:

1. Is the last winning proposal available for view?

Response: The last RFP was issued 6 years ago with only one agency bidding. Historically, there has been only one agency bidding for the RFP and that agency was automatically selected.

2. Are there a limited number of bids?

Response: It depends on the number of agencies who submit proposals for review. A primary awardee will be selected for statewide services, and secondary awardees will be selected based on the agency's capacity to meet the requirements of the RFP.

3. Do we have nurses who work with two (2) students?

Response: The number per nurse depends on the complexity of needs of the students. There are some assignments for one nurse to two students or one nurse to one student, with the most complex needs such as ventilator, tracheotomy care, gastrostomy feeding, oxygen. It will depend on the complexity of the condition and needs of the students.

4. Are the PHNs still responsible to do the "Itinerant treatments?"

Response: Generally, the state LPNs are assigned to do the itinerant treatments. However, there may be instances when a contract nurse is requested particularly when students are placed at schools in close proximity for the contract nurse to serve the different schools. We have had instances where a contract nurse is assigned to a school all day and also to another school nearby to do a treatment. Travel cost to the schools is not covered by the purchasing agency.

5. If a nurse's visit is less than 30 minutes, what do we bill Medicaid?

Response: Medicaid allows for billing by the hour and not for half hour. Therefore, if a treatment is less than 30 minutes, Medicaid or PHNB is not to be billed. However, if the treatment is over 30 minutes, awardee bills for one hour. So in the end, it equals out.

6. How do we bill Medicaid?

Response: The applicant must be a Medicaid provider with the capacity to bill Medicaid following all of the rules and requirements of a Medicaid provider. Invoices, time sheets as records for Medicaid billing must be kept by the Awardee. Documentation of nursing services administered is kept on the purchasing agency's record. So if an audit is performed, the purchasing agency's records will be audited for services delivery; awardees' records for billing of Medicaid.

7. Who do we bill for children not under Medicaid?

Response: For students covered by private insurance (non-Medicaid), awardee is to submit the invoice and time sheet to purchasing agency for payment. Additionally, Awardee is to submit invoice and time sheet for select students (including those on Medicaid) for the following:

- Nurse on the bus as authorized by purchasing agency = payment for one way trip or round trip. Medicaid does not cover for services of nurse on the bus.
- Late notification of cancellation=there may be times when parents forget to notify the PHN or agency of child's absence. The contract nurse shows up and the child is absent and there is no other assignment for the nurse. Awardee is to bill the purchasing agency for the 2-hour late notification. PHNS will work with families so there is proper notification of absences.

8. Do you have numbers (population) of students served by island, statewide?

Response: Oahu has the majority of students. East Hawaii has 11 students; West Hawaii has 8; Kauai has 11 and Maui County 13.

9. How many agencies are bidding?

Response: Purchasing agency will not have this information until all the proposals are submitted by the deadline as earlier discussed.

10. Are the rates "set in stone" for six years?

Response: The rates for nursing services in the schools were developed by MedQUEST, Purchasing Agency and the current contract agency. If there is a need for any increases, discussions with MedQUEST must take place.

11. Are the majority of treatments G-tube and trach care?

Response: Majority of the treatments is gastrostomy feedings ranging from contiguous to bolus with time variations depending on the type of feeding.

12. Where are the areas most difficult to find staffing?

Response: The difficult areas for staffing are the rural geographic areas like the Leeward coast and Windward coast on Oahu, as well as rural areas on Hawaii like Kona, Waimea and Kohala.

13. Did Nursefinders have challenges in the last six years to provide services?

Response: This question was referred to Carl Pierce, who shared that there are many challenges with recruitment and staffing. However, Nurse Finders has a dedicate Clinical Director who goes out of her way to get the staffing even if she has to do the coverage herself; additionally Ruth has been great to work with.

Purchasing agency has also had many ongoing challenges with the many changes that occur with student placements; absences; rotation of staff due to complexities of student needs; leaves taken by state LPNs and immediate need for coverages. It is a labor intensive program to administer.

14. Do you provide orientation session once the service agency is established?

Response: The awardee is responsible to provide competent nurses when requested. Purchasing agency will orient the contract nurse to the school and to child specific needs.

Manuals will be provided to the Awardees.

15. Will the nurses actually receive the children when they get off the bus?

Response: Upon request by the purchasing agency, contract nurse will be on the bus with the student so will go to the classroom from bus to classroom. For majority of students who are transported by DOE or family, the responsibility to receive the children from the bus rests with the DOE – generally the Educational Assistant.

16. Are there any children that receive only medications?

Response: There might be some students in the class with a nurse assigned that have medications only. The more common medication is diastat prn. This student is included in the classroom count and billing done based on the Rate Schedule per child developed by MedQUEST (attached to the RFP). The expectation is that nursing assessment is done on these students included with the students in the classroom. There are a few instances where a student from another class goes to the contract nurse for medication, mainly insulin. For this situation, the charge is \$5.00 per dose for Medicaid and PHNB billing (specific code developed for this).

17. If there are 10 students in one class, does one nurse have to do all of the 10 students?

Response: It depends on the complexity of the needs of students. If all 10 students do not have complex needs, then it could be possible for one nurse to serve 10 students. Included in the 10 might be students with medications only. Assignments are made based on the complexity of the needs of students. If there are complex needs, there may be 2 nurses in the classroom.

18. Can a parent choose the agency among all other agencies?

Response: Generally this will present major difficulties. Again the primary agency is assigned the students based on their staffing capacity; assignments to secondary agency will be done if primary awardee is unable to find staffing at purchasing agency's request. So it would be very problematic to get into "parents choosing the agency." The essential principle is that awardees must provide competent staff and we will expect all of the awardees to work with parents to avoid insistence on any one particular agency.

Summarized by: Ruth Ota, RN, MPH, Chief, Public Health Nursing Branch