

1. Confirm due date and time:  
**Due date is July 1, 2019 at 10:00 a.m. MST**
2. Please describe your level of satisfaction with your current or recent vendor(s) for the same purchasing activity, if applicable.  
**No contract or vendor in place, currently billing in house.**
3. If this is a term contract subject to renewal, what is the term and the maximum number of option periods  
**No contract or vendor in place, currently billing in house.**
4. Has the current contract gone full term?  
**No contract or vendor in place, currently billing in house.**
5. Have all options to extend the current contract been exercised?  
**No contract or vendor in place, currently billing in house.**
6. Who is the incumbent, and how long has the incumbent been providing the requested services?  
**No contract or vendor in place, currently billing in house.**
7. To what extent will the location of the bidder's proposed location or headquarters have a bearing on any award?  
**None**
8. How are fees currently being billed by any incumbent(s), by category, and at what rates?  
**Current rates are listed in the RFP document.**
9. What estimated or actual dollars were paid last year, last month, or last quarter to any incumbent(s)?  
**No contract or vendor in place, currently billing in house.**
10. Net revenue collected the previous two years:  
**CY 2017 – \$946,920; CY 2018 - \$839,708**
11. What were your annual billable transports last year or for the last 12 months?  
**2,800+**
12. What are your per-mile ground transport charges?  
**Current rates are listed in the RFP document.**
13. What are your advanced life support emergency level 2 charges?  
**Current rates are listed in the RFP document.**

14. When were the last changes to your transport rates, and are you considering raising any of the rates currently charged?

**2017. These are regulated by the state of New Mexico.**

15. What percentage of your patients are residents versus non-residents, and do you charge the two groups differently?

**Unknown. Charge is the same**

16. Do you operate any shared services agreements with any other municipal or county governments in the region and, if so, with whom?

**No**

17. What were your transports per year for advanced life support emergency level 1 for last year or for the last 12 months?

**349**

18. What were your transports per year for advanced life support non-emergency level 1 for last year or for the last 12 months?

**450**

19. What were your transports per year for advanced life support emergency level 2 for last year or for the last 12 months?

**12**

20. What were your transports per year for basic life support emergency for last year or for the last 12 months?

**545**

21. What were your transports per year for basic life support non-emergency for last year or for the last 12 months?

**449**

22. What were your transports per year for specialty care transport for last year or for the last 12 months?

**0**

23. What were your transports per year for treatment without transport for last year or for the last 12 months?

**215**

24. What is your payer mix expressed as percentages of 100% billed?

**See attached Payor Activity Report**

25. How many total transport vehicles do you now operate?

**5**

26. Do you have an EPCR provider and, if so, which provider?

**NMEMSTARS, through the State of New Mexico. This software is a product of ImageTrend.**

27. Do you have a collection agency provider and, if so, which provider?

**Transworld Systems.**

28. Which local hospitals or care facilities typically receive most of your patients?

**Nor Lea General Hospital.**

29. Does the City of Lovington provide ALS intercept for any other BLS ambulance services?

If so who are they?

**Tatum EMS**

30. What is the breakdown of 911/interfacility transports?

**Average 911 – 1,700; Interfacility transports - 948**

31. What is the average loaded mile per run?

**911 – 2 miles; Interfacility – 104**

32. When are you anticipating the start date for the vendor?

**August or September 2019**

33. Why have you chosen to go out to bid at this time?

**Reduce operating costs.**

## Payor Activity Report

Date: 6/10/2019 Time: 4:29:17PM

Lovington Ambulance Service  
213 South Love Street  
Lovington, NM 88260-4238

<u>Payor Name</u>	<u>Total Times Payor Used In the Past 12 Months</u>	<u>Last Date Payor was used</u>
ACS Consultec Medicaid	4	2/21/2019
Aetna	5	5/10/2019
All Savers	1	2/27/2019
Allegiance	1	3/29/2019
Blue Cross and Blue Shield of Texas	2	4/18/2019
Blue Cross Blue Shield of NM	164	5/31/2019
Blue Cross Community Centennial	134	5/31/2019
Centennial UHC Community Plan	1	12/13/2018
Cigna Healthcare	11	4/22/2019
FirstCare Health Plans	2	4/16/2019
Group Administrators	1	12/13/2018
Health Choice +	1	2/21/2019
Health Smart	3	5/31/2019
Humana Claims	3	5/9/2019
Insurance Management Services	1	4/17/2019
MDC Electronic (J4)	662	5/31/2019
Meritain Health	2	3/7/2019
Molina Healthcare	94	5/30/2019
New Mexico Association of Counties	1	3/18/2019
New Mexico County Insurance Authority	1	5/10/2019
New Mexico Health Connections	6	4/29/2019
NM Mutual	1	3/11/2019
NM Workers Compensation	1	10/15/2018
Pan American Life Insurance Co	1	5/28/2019
Patient	1,088	6/3/2019
PMB Insurance Corporation	1	3/26/2019
Presbyterian Behavioral Health	86	5/30/2019
Presbyterian Health Plan	43	5/30/2019
Tricare	1	5/13/2019
UMR	1	5/10/2019
United Healthcare	38	5/31/2019
United Healthcare Choice	3	3/26/2019
UnitedHealthcare Shared Services	1	4/5/2019
Veterans Affairs	5	5/30/2019
Western Sky Community Care	20	4/22/2019