

ADDENDUM #2
Clearview Therapy Services
Dodge County, WI
RFP #CLV 20-01

Supplemental information provided in response to bidder questions.

1. Community's Legal Name? **Marsh Country Health Alliance / Dodge County Medical Facilities**
2. Address? **198 County Road DF, Juneau, WI 53039**
3. Provider Tax ID number? **30-0634832 / 39-1803946**
4. Average daily Med A census for November 2020? **1.76/day**
5. Average Med A length of stay November 2020? **17.67 days**
6. Current CMI score? **PT=1.45, OT=1.45, SLP=1.49, NTA=1.32, Nursing=1.49**
7. Total Medicare Part A days for most recent complete month? **53**
8. Total Skilled Payer Days (other than Medicare Part A) for the most recent complete month? **121**
9. Medicare B seniors on caseload for November 2020? **39**
10. Medicare B Units Billed for November 2020? **726**
11. Medicare B amount billed for November 2020? **\$19,807.03**
12. Brain Injury patients on caseload in November 2020? **14.3**
13. Brain Injury minutes billed in November 2020? **56,997 minutes**
14. Brain Injury amount billed to Clearview and paid to Therapy Provider in November 2020? **\$58,706.91**
15. November 2020 therapy invoice amount for Medicare A? **\$12,430.04**
16. November 2020 therapy invoice amount for Medicare B? **\$29,983.46**
17. November 2020 therapy invoice amount for Brain injury? **\$58,706.91**
18. In-house therapy cost? **N/A**
19. Is Clearview currently undergoing any Medicare review related to therapy such as a Probe, CERT, ADR, or Denial? **NO**
20. Who is currently providing the Physical, Occupational and Speech Therapy services currently? **Achieve**
21. What are the rates paid for the Therapy Services received?
 - Medicare A = **\$1.03/minute**
 - Medicare B/Medicare B HMO/Managed Care = **77% of applicable CPT fee screen**
 - All other payers = **77% of applicable CPT fee screen**
 - Managed Care/Medicare Managed Care/County Service or Other Supported Residents = **\$1.03/minute**
 - All Non-Covered Services/Consulting = **\$70.00/hr.**
 - Brain Injury = **\$1.03/minute**
22. How many Vendors or Service providers do you anticipate selecting? **One**

Update to Addendum 1

Census:

<u>Clearview Unit</u>	<u>Capacity</u>	<u>2019 ADC</u>	<u>2020 ADC</u>
Skilled Nursing Facility	120	104.2	99.2
Individuals with Intellectual Disabilities	46	41	39.5
Brain Injury	30	15.9	17
Behavioral Health I	10	9.2	6.4
Behavioral Health II	10	7.4	7.5
Behavioral Health III	10	8.2	8.3
Behavioral Health IV	10	9.3	9.2
Northview Heights CBRF	20	18	18.1
Community Group Home	4	3.4	3.6
Trailview Group Home	4	3.8	3.9

Bed capacity for the Individuals with Intellectual Disabilities unit was incorrectly reported in Addendum 1 and the correct capacity for all licensed areas is reported above.