This addendum is issued for clarify a lot of questions that Bidder were asking.

Total Transports between 1/1/2015- 12/31/2015-
Approximately- 3100 Total Transports
Blue Cross- 183
Medicaid- 341
Medicare- 1710
Other Insurance- 591
Patients with No Insurance- 275
Approximately- 53% BLS Transports, 47% ALS Transports

1/1/2014- 12/31/2014
Approximately- 2815 Transports.

1/1/2013- 12/31/2013
Approximately- 2644 Total Transports

Approximately 99% of our calls are transported to either St. Vincent's Medical center located at 2800 Main Street in Bridgeport or Bridgeport Hospital located at 267 Grant Street in Bridgeport, CT.
*Proposals can be a $ per month rate, $ per month year and/or a % each month of the total revenue collected by billing service.

**PROPOSAL**

The undersigned hereby submit the following proposal for the request noted above and certifies that this proposal meets all the specifications and conditions requested herein. Any substitutions to the specifications requested are clearly and completely noted. Any alternate proposals are presented in a similar format to those requested and are attached herein. It is understood that the Town reserves the right to reject any or all proposals.

Please add in any way you see fit pricing (use separate proposal sheet if needed)

The Town with EMS will evaluate to give an equal opportunity. The Town reserves the right to accept all or any part of a proposal, reject any or all proposals and to waive any requirements, informalities or irregularities, technical defects or non-material deficiencies in a proposal.

**Total Proposed Price (all fees, supplies, etc.):** $___________________/month $____________________/year

$ _____________ per month (rate)

$______________ per month and /or year

$_______________ % of each month of the total revenue collected by billing service

Attach references, contact information and pricing methodology.

____________________________________  ______________________________________
Company Name       by (Signature)

____________________________________  ______________________________________
Address        Print Name

____________________________________  ______________________________________
City/town - Zip      Title

____________________________________  ______________________________________
Date       Telephone/Fax

____________________________________  ______________________________________
Email        Website

Proposal documents & Addendums can be accessed from the Town of Trumbull website (www.trumbull-ct.gov) in the Purchasing Department Section - link to “Bid Invitations”. 