

OFFICIAL BID PRICE SHEET

710-22-0007 Comprehensive Residential Treatment/Sexual Rehabilitative Services

Bidder may only include pricing for each category of service that bidder can currently provide. In the event that Medicaid rates are applied, contractor must invoice the Arkansas Medicaid rates based on the date of service according to the current fee schedule.

Category 1: Acute Care - CRT

Please insert a dollar amount for Option A or check the box for Option B. Option A is a set daily rate at which services may be invoiced throught the duration of the contract. Option B is the Arkansas Medicaid rate that fluctuates based on the date of service.

<u>OPTION A</u>	
Per Diem Rate	\$ 1,017.00

<u>OPTION B</u>	
Medicaid Per Diem with W3 Specialty Default Rate	<input type="checkbox"/>

Category 2: Sub-Acute/Psychiatric Residential Care - CRT

Please insert a dollar amount for Option A or check the box for Option B. Option A is a set daily rate at which services may be invoiced throught the duration of the contract. Option B is the Arkansas Medicaid rate that fluctuates based on the date of service.

<u>OPTION A</u>	
Per Diem Rate	\$ 421.00

<u>OPTION B</u>	
Medicaid Per Diem with W3 Specialty Residential RTU Rate	<input type="checkbox"/>

Category 3: One-to-One Attendance - CRT

Please insert pricing for one-to-one therapy. Category 3 will not be considered in low price determination. Rate must not exceed the Arkansas Medicaid Rate for Outpatient Qualified Behavioral Health Professional.

Hourly Rate	\$ 23.00
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Category 4: Sexual Rehabilitation Services

Please insert a dollar amount for Option A or check the box for Option B. . Option A is a set daily rate at which services may be invoiced throught the duration of the contract. Option B is the Arkansas Medicaid rate that fluctuates based on the date of service.

<u>OPTION A</u>	
Per Diem Rate	\$

<u>OPTION B</u>	
Medicaid Rate	<input type="checkbox"/>

710-22-0007

United Methodist Behavioral Health Systems, Inc.

1.13 B Pricing Justification

Category 1 Acute Care and Category 2 Sub-Acute Care:

Rate setting for this bid was determined using an aggregate old and new hourly rate to calculate a percentage change that was applied to the existing contract rate held by United Methodist Behavioral Health Systems, Inc.

Necessary pay increases and staffing shortages have resulted in increased labor costs that we must pass on to be able to provide the requested services. This is a cost increase that we have no control over and have no margin, being a cost based reimbursed business, where we can absorb the increase.

There was a 10.80% increase in employee costs over the last year. These rates reflect that adjustment.

Category 3 – One to One Attendance

This hourly rate is determined using the hourly rate for non-licensed direct care staff, adding the hourly shift differential for twenty-four-hour care and adjusting for the gross pay.