**Addendum #1**

**RFP #31198:
Taxi transportation services for patients who do not require medical transport**

The due date has been revised from August 1, 2025 at 3:00 PM CT to August 8, 2025 at 3:00 PM CT.

**Questions:**

1. Will any federal, state, or other government funds be used to pay for these rides? What is the funding source and annual budget?

No, this is department funded.

We cannot disclose the annual budget.

1. What is the estimated volume of rides on a daily/ monthly basis? What is the estimated volume of wheelchair rides?
Regarding multiple questions around volume our averages are below. Please keep in mind these are estimates only. Currently only rides during business hours are being tracked, rides outside of normal business hours are not accounted for.

Estimated Monthly Averages:
91 rides per month

59 rides <25 Miles

31 rides >25 Miles

Approximately 2 wheelchair rides per month

Approximately 2,988.33 Miles per month

1. When does MUHC expect to begin implementing these services?
Mutually agreed upon date at time of award
2. Is there a current vendor for this scope of work? If yes, why is MUHC pursuing a different vendor? What are the pain points with the current solution and/or workflow? Who is the current vendor?
We are unable to disclose who the current vendor is.
The RFP process is being completed to align with procurement guidelines and to address contract terms. Please refer to the RFP as this outlines the mandatories and desirables outline by the department which address their pain points and needs.

1. MUHC has asked for a “flat rate for destinations within 25 miles,” which is likely to be more expensive than a dynamic pricing model that factors in mileage and local demand at the time of the ride request. We request that the fixed-price requirements be removed from the RFP to allow for alternative pricing models that are beneficial to MUHC.
The request for flat rates will not be removed from the RFP. However the department is willing to entertain other pricing options.
2. Transportation network company drivers in Missouri are not required to have a Class E driver’s license. We request this requirement be removed from the RFP specifications, so that MUHC can take advantage of a larger driver pool.
No, this mandatory requirement will not be removed.
3. There is no requirement for transportation network companies to display a decal/trade dress in Missouri (or any locality within Missouri), and there is also no requirement for transportation network company drivers to wear a uniform and badge when driving in Missouri. We request these requirements be removed from the RFP specifications.
Due to the nature of our transport and the safety of our patients it is import that we know who is picking up our patients. We need vendors to be identifiable for safety reasons so we know we are putting our patients in the right vehicle.
4. Can you please share a list of vendors that are providing the service today?
We are unable to disclose this information.
5. What technology is currently being utilized for scheduling and dispatching trips? Is it expected that a new vendor would provide its own technology? Will there be any technology integrations required as a part of this service?
No, we are not utilizing technology at this point, we are still on paper. We do not plan on integrating vendor technology into our system.
6. How are rides distributed across vendors? Do vendors have the ability to indicate specific geographic locations where it can serve trips?
Today it is distributed geographically and by availability. Yes, vendors may indicate their specific geographic locations and limitations or radius.
7. Are you able to provide the approved annual budget for the total program and the average cost per ride today?
We are unable to disclose this information.

1. Can you please provide a sample of two weeks of data (origin, destination, number of passengers, mobility aids, departure time and date)?
No we currently don’t have this data
2. Will any rides be requested outside the 8:00 AM – 6:00 PM, Monday–Friday service window? If so, how frequently?
We do have a need for rides after 6PM and on weekends.
3. What is the expected maximum wait time before a ride is considered a no-show?
We do our best to align discharge with time of pick up however there is some variability that can delay discharge. Currently we don’t have any established no-show time frames for transportation companies.
4. Are there preferred formats or templates for submitting monthly productivity reports?
No
5. Does MUHC currently use or plan to use any dispatch or patient-facing ride tracking software that vendors should integrate with?
No
6. Will MUHC provide the required training modules (PHI, ADA, wheelchair transport), or are vendors responsible for developing them?
Vendor responsibility
7. What are the credential requirements for drivers, including drug and alcohol testing?
Our expectations are that vendors have drug and alcohol testing to provide safe transportation and are in alignment with Class E license requirements and DOT requirements.
8. Will the contract be awarded to a single vendor or multiple vendors by facility, geography, or trip type?
Yes, the department is willing to multi-award if needed in order to meet the transportation needs.
9. What is the evaluation weight between the technical/functional and financial proposals?
This is determined during the scoring meeting and not released.
10. Page 7, item 20, notes that the coverage of the solicitation could extend to affiliates of the MU Health.  Can you clarify if there are any arrangements like this and what daily trip volume and details could be attributed to this as part of any other information request responses.
This is not applicable to these services.
11. Page 13, item 9. Can you clarify if the MBE, WBE, and SDVE targets listed are the same as current conditions or are there changes?
These are current.
Can you clarify how current contractors are seeking to achieve these requirements.
No
 Do they subcontract or use suppliers?
Unknown
Can you provide the most recent annual reporting and recent monthly reporting to provide insight as to how this is being achieved today?
No
12. Page 15, item 2. Regarding taxi pass and advanced scheduling and booking procedures.  Can you clarify how trips are scheduled today and the process to communicate to contractor and subsequent booking.  Do you use a portal where contractors see all trips, they get to pick trips, or are the trips directly assigned to the contractors?
We schedule via phone call to see if the vendor is able to meet the needs. We do not have a portal.
13. As it relates to force majeure and indemnification.  Would the agency be willing to provide mutual coverage of the items for the contractor.
Those terms would have to be negotiated with our Risk and Insurance Management team. Respondents can redline the RFP terms or further negotiate during contracting if awarded.
14. Page 16, item 4.  Would the agency consider making this a longer term such as a three year initial term to aide with capital investment for fleet and technology?
Term details can be further negotiated upon award.
15. Page 23, item 10. Can you clarify the RFP states earlier that service is Monday through Friday and this section speaks of 7 day a week. What are the current arrangements? Are you looking to expand services
We do have a need for rides after 6PM and on weekends.
16. Page 23, item 10 B.  This notes car seats may be required. Can you clarify if parents are transported with young children (similar for any personal assistants) and if those seats get billed as well?
We do have pediatric patients that may have one or both parents with them who will need a ride. It is requested that the vendor provide a car seat.
17. Page 23, item 10 C.  Do you or any of your current contractors have a software platform to meet this objective ?  Have you explored any specific software platforms to provide this service and have any preferred sources?
No
18. Can you clarify who the current contractors are for the service. Their fleet volume of dedicated and other non-dedicated fleet that may be available for service.

No

1. Do any of the contractors use subcontractors?  If so, can you clarify those arrangements?
Unknown, our organizational preference is that the vendors don’t use subcontractors.
2. Can you provide the three most recent invoices including all billing details.

We are unable to disclose this information.

1. Can you provide a copy of the current contracts including any extensions or memorandums of understandings.  Please include any pricing schedules provided as part of the contracts.
We are unable to disclose this information.
2. Can you please provide a typical day’s route manifests (weekday and weekend) including detail of scheduled/completed trips with pick-up and drop-off locations?
We have diverse needs, there are no set pick up or drop-off locations. It all depends on patient needs and locations presented to us daily. There are no patterns, each day is different.
3. If not included with the invoices, please provide a summary of all the non-performance damages or performance incentives incurred by the contractor for the current and past two fiscal years.
We are unable to provide this information.
4. Do you have any specific fleet needs or fleet age requirements.

Our specific needs are all listed in the Mandatory Criteria

1. Do you have a need for wheelchair accessible vehicles or a contractor to provide a dedicated fleet of wheelchair
Yes