DMEPOS Competitive Bidding Program

Bid Preparation Worksheet - Round 1 2017 Estimated Capacity & Bid Amount Calculations

Please read the important information provided on <u>page 1</u> before proceeding to the page(s) for a specific competitive bidding area

Negative Pressure Wound Therapy Pumps (NPWT) and Related Supplies and Accessories

Charlotte-Concord-Gastonia, NC	1
Chester, Lancaster & York Counties, SC	1
Cincinnati, OH	1
Cleveland-Elyria, OH	1
Covington-Florence-Newport, KY	1
Dallas-Fort Worth-Arlington, TX	1
Dearborn, Franklin, Ohio & Union Counties, IN	2
Kansas City, MO	2
Kansas City-Overland Park-Ottawa, KS	2
Miami-Fort Lauderdale-West Palm Beach, FL	2
Orlando-Kissimmee-Sanford, FL	2
Pittsburgh, PA	2
Riverside-San Bernardino-Ontario, CA	2





DMEPOS Competitive Bidding Bid Preparation Worksheet - Round 1 2017 Estimated Capacity & Bid Amount Calculations

This worksheet is provided to assist you with determining your bid amount and estimated capacity for each item in the product category. This information will be entered in DBidS, the online bidding system, on Form B. Your capacity is the estimated number of units that you believe you can provide in the competitive bidding area in a calendar year. All bid amounts must be bona fide (rational and feasible for you to furnish at the bid price). You must not submit a bid for an item at a loss in order to improve your chances of winning a contract. It is important for you to consider and include your cost to purchase the item, overhead, and profit when determining a bid amount for a unit. The Centers for Medicare & Medicard Services (CMS) will evaluate bids to verify that they are bona fide any ask you to submit additional and invoices or other documents, to validate the bid amount. Save a copy of your completed worksheet to use if CMS requests documentation to support your bid amount. Please review the Request for Bids (RFB) instructions and fact sheets for assistance with completed worksheet to use if CMS requests documentation to support your bid amount.

General Notes

- * The bidding units defined in this worksheet are for bidding purposes ONLY. Please carefully review the definition of a bidding unit for each HCPCS code or oxygen payment class and make sure you submit your bid amount correctly. In some cases, suppliers are required to submit purchase bids that are then used to generate monthly rental payments. Do NOT submit a rental bid amount when the definition of the bidding unit is for the purchase of a new item. The definition of a bidding unit (purchase or rental) is not necessarily an indication that this is how payment will be made for the item under the Competitive Bidding Program.
- * 2014 Beneficiary Count may exceed 2014 Allowed Units because the beneficiary may have used the item for less than 10 months. (For bidding purposes, 10 or more months of rental are calculated as one unit. Less than 10 months of rental would not be considered an allowed unit.)
- Items that are currently paid on a monthly rental basis will continue to be paid on a monthly rental basis under the Competitive Bidding Program.

How Purchase Bids Will Be Converted to Rental Payments

- * Capped Rental Durable Medical Equipment (DME) except power wheelchairs single payment amount for rental months 1 3 based on 10 percent of purchase bids and single payment amount for rental months 4 13 based on 7.5 percent of purchase bids.
- Inexpensive or Routinely Purchased (IRP) DME single payment amount for rental based on 10 percent of purchase of bids.

Product Category: Negative Pressure Wound Therapy (NPWT) Pumps and Related Supplies and Accessories				Reference Data for Background Informational Purposes Only	Reference Data for Background Informational Purposes Only	Bidder Data (You will enter your estimated capacity and bid amount information in DBidS on Form B)				
CBA Name	HCPCS Code	HCPCS Code Description	Definition of a Bidding Unit	Weight (The relative market importance of the item in the product category based on utilization)	2014 Beneficiary Count (Number of unique Medicare beneficiaries in the CBA that received the product in CY 2014)	2014 Allowed Units (Number of units for the CBA and HCPCS code paid by Medicare in CY 2014)	Bid Limit (2015 Fee Schedule: Bid amount must be at or below this amount)	Your Cost to Purchase One (1) Unit (Should be less than your bid amount)	Your Bid Amount (To provide one [1] unit as described in Definition of a Bidding Unit; should include overhead and profit)	Your Estimated Capacity (Number of units you can furnish in CBA for one [1] year)
Charlotte-Concord-Gastonia, NC	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	327	6.800	26.25			
Charlotte-Concord-Gastonia, NC	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	410	4,913	8.96			
Charlotte-Concord-Gastonia, NC	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	330	58	16420.9			
Chester, Lancaster & York Counties, SC	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	75	1,372	26.25			
Chester, Lancaster & York Counties, SC	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	96	1,076	9.12			
Chester, Lancaster & York Counties, SC	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	75	12	16420.9			
Cincinnati, OH	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	232	4,886	26.25			
Cincinnati, OH	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	298	3,382	8.62			
Cincinnati, OH	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	246	44	16420.9			
Cleveland-Elyria, OH	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	307	6,199	26.25			
Cleveland-Elyria, OH	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	401	4,391	8.62			
Cleveland-Elyria, OH	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	313	54	16420.9			
Covington-Florence-Newport, KY	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	71	1,775	26.25			
Covington-Florence-Newport, KY	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	88	1,290	9.12			
Covington-Florence-Newport, KY	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	72	14	16420.9			
Dallas-Fort Worth-Arlington, TX	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	976	19,247	26.25			
Dallas-Fort Worth-Arlington, TX	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	1,195	14,819	8.72			
Dallas-Fort Worth-Arlington, TX	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	999	170	16420.9			

CBA Name	HCPCS Code	HCPCS Code Description	Definition of a Bidding Unit	Weight (The relative market importance of the item in the product category based on utilization)	2014 Beneficiary Count (Number of unique Medicare beneficiaries in the CBA that received the product in CY 2014)	2014 Allowed Units (Number of units for the CBA and HCPCS code paid by Medicare in CY 2014)	Bid Limit (2015 Fee Schedule: Bid amount must be at or below this amount)	Your Cost to Purchase One (1) Unit (Should be less than your bid amount)	Your Bid Amount (To provide one [1] unit as described in Definition of a Bidding Unit; should include overhead and profit)	Your Estimated Capacity (Number of units you can furnish in CBA for one [1] year)
Dearborn, Franklin, Ohio & Union Counties, IN	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	25	420	26.25			
Dearborn, Franklin, Ohio & Union Counties, IN	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	28	343	8.55			
Dearborn, Franklin, Ohio & Union Counties, IN	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	25	4	16420.9			
Kansas City, MO	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	248	5,145	26.25			
Kansas City, MO	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	294	3,591	9.12			
Kansas City, MO	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	251	46	16420.9			
Kansas City-Overland Park-Ottawa, KS	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	166	3,378	26.25			
Kansas City-Overland Park-Ottawa, KS	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	202	2,457	9.12			
Kansas City-Overland Park-Ottawa, KS	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	174	34	16420.9			
Miami-Fort Lauderdale-West Palm Beach, FL	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	603	13,313	26.25			
Miami-Fort Lauderdale-West Palm Beach, FL	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	846	10,069	8.72			
Miami-Fort Lauderdale-West Palm Beach, FL	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	617	109	16420.9			
Orlando-Kissimmee-Sanford, FL	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	357	7,600	26.25			
Orlando-Kissimmee-Sanford, FL	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	428	5,067	8.72			
Orlando-Kissimmee-Sanford, FL	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	368	62	16420.9			
Pittsburgh, PA	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	264	5,646	26.25			
Pittsburgh, PA	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	279	3,360	7.97			
Pittsburgh, PA	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	264	45	16420.9			
Riverside-San Bernardino-Ontario, CA	A6550	Wound Care Set, For Negative Pressure Wound Therapy Electrical Pump, Includes All Supplies And Accessories	Purchase of one (1) new unit	0.3578562379	313	6,972	26.25			
Riverside-San Bernardino-Ontario, CA	A7000	Canister, Disposable, Used With Suction Pump, Each	Purchase of one (1) new unit	0.1802574512	456	5,521	9.12			
Riverside-San Bernardino-Ontario, CA	E2402	Negative Pressure Wound Therapy Electrical Pump, Stationary Or Portable	Purchase of one (1) new unit	0.4618863109	323	62	16420.9			