

# County of Winnebago

County Administration Building  
404 Elm Street  
Rockford, Illinois 61101

Ann Johns  
Director of Purchasing  
Phone: 815-319-4380  
Fax: 815-319-4381

April 4, 2018

## ADDENDUM ONE IFB 18B-2137

*Bidders are required to indicate on their Bid Form 18B-2137 that they have received and acknowledged this addendum.*

Any questions should be directed to the Purchasing Department, 404 Elm Street, Room 202, Rockford, IL 61101 or by telephone 815-319-4380, or email Ann Johns at [purchasing@wincoil.us](mailto:purchasing@wincoil.us)

## REVISED BID FORM

Use the attached Addendum One – **Revised Bid Form** when you submit your bid for 18B-2137. Include the pricing for each test or enter N/A. All the HC have been removed from the Descriptions on the Revised Bid Form pricing page(s).

## QUESTIONS RECEIVED FROM VENDORS

1. Do you have an idea of how often you have historically needed STAT testing?  
VERY RARELY IF EVER, SINCE OPTION IS NOT CURRENTLY AVAILABLE
2. Page 19 has RBNH. We assume this is for River Bluff Nursing Home.
  - a. Can you provide insight into what the HC stands for prior to the CPT description?  
HC IS A GENERIC CODING AND NOT RELEVANT FOR THIS BID. WE HAVE UPDATED THE PRICING PAGE OF THE BID FORM TO REMOVE THE HC FROM THE RBNH DESCRIPTIONS
3. We are still looking for a potential annual utilization of the CPT codes provided if possible.  
SEE THE CHART BELOW
4. Is there a way to be provided anticipated annual utilization for the tests requested?  
SEE THE CHART BELOW
5. Would you be open to signing our business agreement or using our verbiage?  
YES, AFTER AWARD AND A CONSULTATION WITH THE COUNTY LEGAL STAFF
6. What are the approximate annual volumes of the tests to be bid upon?  
SEE THE CHART BELOW. NOTE THAT HIV TEST STARTS ARE CURRENTLY UNAVAILABLE

7. What are the annual volumes and types of non-contracted tests that have been performed.  
SEE THE CHART BELOW

8. Currently, OSF Saint Anthony Medical Center Laboratory is the service provider for River Bluff Nursing Home. If we are not accepted for this bid, will we still be the laboratory provider for River Bluff or will this be awarded to the bid winner?  
MOST LIKELY THE BID WILL GO THE LOWEST PROVIDER.

Health Department tests for all of 2015, 2016, 2017		2015	2016	2017
Total Lab CPTs		Number of Tests	Number of Tests	Number of Tests
87491	Chylmd trach DNA amp probe	2180	1970	1224
80076	Hepatic Function Panel	8	4	0
80061	Lipid Profile	258	104	0
87591	N.gonorrhoeae DNA amp prob	191	260	60
86703	HIV Antibodies, HIV-1, HIV-2 Elisa with Reflex to Western Blot	1192	1145	787
86689	HIV Confirmatory – Western Blot	*	*	*
88142	Pap Smear (thin prep)	332	313	159
87255	Herpes Simplex Virus Culture with Reflex Typing	21	17	12
86481	T-Spot	327	272	97
87340	HBsAg (Hep B Antigen)	127	467	257
87491/87591	Chlamydia /N Gonorrhoeae DNA probe	2087	1729	1842
87177	Ova and Parasite-Stool	318	327	122
85025	CBC-automated	421	658	216
83655	Lead - Venous	198	292	128
83655	Lead - Capillary	0	0	0
81003	Urinalysis	461	444	209
86787	Varicella Titer	209	368	162
82253	Comprehensive Metabolic Panel (14)	574	658	225
86592	RPR with positive reflex to FTA-ABS	1542	1594	683
86780	FTA-ABS	0	0	0

- HIV CONFIRMATORY TEST STATISTICS ARE CURRENTLY UNAVAILABLE.

**River Bluff Nursing Home tests during March 2017 through Feb 2018**

CPT	RBNH-Description	Total
82570	CREATININE, OTHER SOURCE	1
87077	AEROBIC ISOLATE, DEFINITIVE ID, EACH	2
84156	ASSAY OF PROTEIN-URINE	1
84466	ASSAY OF TRANSFERRIN	3

84520	ASSAY OF UREA NITROGEN	1
80202	ASSAY OF VANCOMYCIN	1
82506	ASSAY OF VITAMIN D	3
84443	ASSAY THYROID STIM HORMONE	9
80048	BASIC METABOLIC PANEL W TOTAL CALCIUM	36
82248	BILIRUBIN DIRECT	1
85014	BLOOD COUNT; HEMATOCRIT	3
85018	BLOOD COUNT; HEMOGLOBIN	3
85027	BLOOD COUNT; HEMOGRAM & PLATELET COUNT	31
85025	CBC - BLOOD COUNT; DIFFERENTIAL WBC	11
80053	COMPREHENSIVE METABOLIC PANEL	12
86140	C-REACTIVE PROTEIN	1
82565	CREATININE; BLOOD	1
87088	CULT, W/ISOL & EA PRESUMP ID, UR	1
87086	CULTURE; QUANT COLONY COUNT, URINE	4
82607	CYANOCOBALAMIN (VITAMIN B-12)	1
80162	DIGOXIN	1
82728	FERRITIN	1
82746	FOLIC ACID; SERUM	1
83036	HEMOGLOBIN; GLYCOSYLATED	4
87804	INFECT AGENT DETEC OBSERV INFLUENZA	2
83540	IRON	3
80061	LIPID PANEL	3
83735	MAGNESIUM	3
83970	PARATHORMONE	3
84100	PHOSPHORUS	4
84155	PROTEIN, TOTAL	1
85610	PROTHROMBIN TIME	62
85045	RETICULOCYTE COUNT, AUTOMATED	2
85652	SEDIMENTATION RATE, ERYTHROCYTE; AUTO	1
87186	SUSCEPTIBILITY STUDIES, MICRODILUTION	1
85730	THROMBOPLASTIN TIME, PARTIAL (PTT)	1
99001	TRAVEL ALLOWANCE-1	74
99001	TRAVEL ALLOWANCE-1	21
81002	URINALYSIS, AUTO W/O SCOPE	2
81001	URINALYSIS, AUTO W/SCOPE	4
83036	HEMOGLOBIN (HB) A1c	3

**END OF ADDENDUM ONE**