

Form A Crosswalk of changes. * Any section not identified on the crosswalk does not have any changes				
Section of DBidS	Current Language	Revised Language	Screenshot file name	
<b>Business Organization Information</b>	Indicate how your business organization will be bidding (choose only one).	Indicate how your business organization will be bidding.	DBidS Form A Screenshot 1	
<b>Contact person</b>	Provide the name(s) of the person(s) who should be contacted to answer questions regarding the business or network organization. You must click the <b>Add Contact Person</b> button in order for this information to be saved below. You may enter more than one Contact Person. (maximum 5). Once you have entered the names of your Contact Person(s) scroll down to verify the name(s) was entered correctly.	Provide the name(s) of the person(s) who should be contacted to answer questions regarding the business organization. You must click the <b>Add Contact Person</b> button in order for this information to be saved below. You may enter more than one contact person (maximum 5). Once you have entered the names of your contact person(s) scroll down to verify the name(s.)	DBidS Form A Screenshot 1	
<b>Authorized Official</b>	Provide the name(s) and title(s) of authorized officials or key personnel for the business organization or network. You must click the <b>Add Authorized Official or Key Personnel button</b> in order for this information to be saved below. Once you have entered the names of your authorized official or key personnel scroll down to verify that the names were entered correctly.	Provide the name(s) and title(s) of authorized officials or key personnel for the business organization . You must click the <b>Add Authorized Official or Key Personnel</b> button in order for this information to be saved below. Once you have entered the names of your authorized official or key personnel scroll down to verify the names.	DBidS Form A Screenshot 2	

<p><b>Accreditation Information</b></p>	<p>All locations must meet Medicare enrollment requirements, including being accredited for all items in the product category(s) and CBA for which the bidder is submitting a bid, by the close of the bid window. As required by 42 CFR §414.414 (c), each bidder must be enrolled, meet quality standards and be accredited in order to be awarded a contract. Individual locations of a supplier with multiple locations must separately meet these requirements to be included in a contract offer.</p> <p>Select the name(s) of the Medicare-approved organization(s) that has accredited your location(s).</p> <p>You must click the <b>Add Accreditation</b> button below for this information to be saved.</p>	<p>By the close of the bid window, all locations must meet Medicare enrollment requirements, including being accredited for all items in the product category(s) for which you are bidding. As required by 42 CFR § 414.414 (c), each bidder must be enrolled, meet quality standards, and be accredited in order to be awarded a contract. Individual locations must be accredited to be included on the contract.</p> <p>Select the name(s) of the Medicare-approved accreditation organization(s) that has accredited your business for the product category(s) for which you are bidding.</p> <p>You must click the <b>Add Accreditation</b> button below for this information to be saved.</p>	<p>DBidS Screenshot CreateSupplier4</p>	
<p><b>Accreditation Information- (acknowledgement statement)</b></p>	<p>I understand that each bidder must have a location or locations that are accredited to furnish the specific product(s) and service(s) included in the bid.</p>	<p>I acknowledge and understand that I, as a bidder, must be properly accredited to furnish the specific item(s) and service(s) included in the bid. This information must be on file in each location's Medicare enrollment record (i.e., Provider Enrollment, Chain and Ownership System (PECOS))</p>	<p>DBidS Form A Screenshot 2</p>	

<p><b>Licensure</b></p>	<p>All bidders must meet Medicare enrollment requirements, including possessing all applicable state license(s) for the product category (s) by the close of the bid window. Bidders will be disqualified if they do not meet all state licensure requirements for applicable product categories and for every state in the CBA. Every location of the bidder is responsible for having all license(s) for each state in which it furnishes items/services. If there is a multi-state CBA the bidder must collectively have all applicable license(s) for every state in the CBA. For bid evaluation purposes, each location is not required to have licenses for every state in the CBA as long as each state has a bidding location licensed for the product category.</p> <p>Some states may not require a license to furnish certain items in a product category. Please check the <a href="#">licensure directory</a> on the NSC website, which serves as a guide and the Licensure for Bidding Suppliers fact sheet on the CBIC website.</p>	<p>By the close of the bid window, all locations must meet Medicare enrollment requirements, including possessing all applicable state license(s) for the product category(s) and areas for which you are bidding. Bidders will be disqualified if they do not meet all state licensure requirements for the applicable product categories and for every state in a CBA. For bid evaluation purposes, each location is not required to have licenses for every state in the CBA as long as each state has a bidding location licensed for the product category. Every location of the bidder is responsible for having all applicable license(s) for each state in which it furnishes items and services. If there is a multi-state CBA, the bidder must collectively have all applicable license(s) for every state in the CBA.</p> <p>Some states may not require a license to furnish certain items in a product category. Please check the <a href="#">licensure directory</a> on the NSC website, which serves as a guide and the <a href="#">Licensure for Bidding Suppliers</a> fact sheet on the CBIC website.</p>	<p>DBidS Form A Screenshot 3</p>	
-------------------------	--	--	--------------------------------------	--

<b>Licensure-continued</b> (acknowledgement statement)	I understand that each supplier location is responsible for having all applicable state licenses for each state in which it provides services. Each location is not required to have licenses for every state in the CBA as long as there is a licensed location for each state.	I acknowledge and understand that I, as a bidder, have all applicable state licenses for every item in the product category and for each CBA for which I am bidding. This information must be on file in each location's Medicare enrollment record (i.e., Provider Enrollment, Chain and Ownership System (PECOS))	CreateSupplier5_seq_1.png	
<b>Business Information (the Blue Header on the Section)</b>	Business Information	Business Information- Years in Business	CreateSupplier5_seq_1.png	
<b>Type of Business</b>	Select the business type that describes your organization. Bidders must submit certain financial documents based on the type of business identified in this response. Refer to the Request for Bid (RFB) instructions a list of required financial documents. Go to <a href="http://www.dmecompetitivebid.com/financialrequirements">http://www.dmecompetitivebid.com/financialrequirements</a> for additional information.	Select the business type that describes your organization. Bidders must submit certain financial documents based on the type of business identified in this response. Refer to the Request for Bid (RFB) instructions for a checklist of required financial documents. Go to: <a href="http://www.dmecompetitivebid.com/financialrequirements">http://www.dmecompetitivebid.com/financialrequirements</a> for additional information .	DBidS Form A Screenshot 3	
<b>Service Delivery</b>	Retail Location with Home Delivery Mail Orders Home Delivery	Retail Location with Home Delivery Mail Order Home Delivery	DBidS Form A Screenshot 4	

<p><b>Competitive Bidding Area (CBA) and Product Category (the Blue Header on the Section)</b></p>	<p>Competitive Bidding Area (CBA) and Product Category</p>	<p>Select Competitive Bidding Area (CBA) and Product Category</p> <p>(Only changing the name on Blue Header )</p>	<p>DBidS Form A Screenshot 4</p>	
<p><b>Location Information Accuracy</b></p>	<p>Please review the information above for your primary location, if any data is inaccurate, select <b>No</b> and provide details in the text box identifying the inaccurate data and provide correct information</p>	<p>Please review the information above for your primary location. If any of the information is inaccurate, select <b>No</b> and provide the correct information in the text box.</p>	<p>DBidS Form A Screenshot 5</p>	
<p><b>Competitive Bidding Area (CBA) and Product Category</b></p>	<p>Select the CBA(s) and product category(s) for which your organization is submitting a bid(s).</p> <p>The CBA and product category combinations appear below. You must check the box in the right column for each combination for which you are submitting a bid. After you have made your selection, click the Add CBA/PCs button to save your selection(s).</p> <p>Later in the application, you will be required to identify the locations within a CBA that will provide competitively bid items.</p>	<p>The CBA and product category combinations appear below. You must check the box in the right column for each combination for which you are submitting a bid. After you have made your selection, click the <b>Add CBA/PCs</b> button to save your selection(s).</p> <p>Select the CBA(s) and product category(s) that your primary location will be servicing.</p> <p>The primary location must select at least one CBA/product category combination</p>	<p>DBidS Form A Screenshot 5</p>	

<b>CBA/ Product Category List</b>	Displayed below is a summary of the CBA(s) and Product Categories for which you intend to submit a bid. Please review for accuracy.	Displayed below is a summary of the CBA(s) and Product Categories that you have selected. Please review for accuracy.	DBidS Form A Screenshot 5	
<b>Form A: Primary location Specific Information (header)</b>	Please provide the requested information for your primary location. This is the location (PTAN) that you used when you registered for a User ID and password to access DBidS.	Please provide the requested information for your primary location. This is the location (PTAN) that you used when you registered for a User ID and password to access DBidS. The information provided is from your enrollment record in the Provider Enrollment, Chain and Ownership System (PECOS.)	DBidS Form A Screenshot 6	
<b>Competitive Bidding Area (CBA) and Product Category (the Blue Header on the Section)</b>	Competitive Bidding Area (CBA) and Product Category	Competitive Bidding Area (CBA) and Product Category- Primary Location  (Only changing the name on Blue Header )	DBidS Form A Screenshot 7	
<b>Form A: Assign Locations</b>	Your primary location is listed below. click View/Modify to go to the location to view, modify or complete information for the location.  If the location status is Update Available your PECOS record contains new information. Click <b>Refresh Location</b> to view updated information for the location.	Your primary location is listed below.  To view, modify or complete information for a location, click on <b>View/Modify</b> .  If the location status is Update Available, this means there has been an update to your PECOS record. Click <b>Refresh Location</b> to view updated information for the location.	DBidS Form A Screenshot 8	

<p><b>Form A: Summary</b></p>	<p>Displayed below is a summary for the location(s) for which you are submitting a bid. Please carefully review the information you provided on Form A application information for accuracy. You may modify your information or add a new location. If you do not wish to make any changes or add another location, select <b>NEXT</b>. Only locations identified by the PTAN listed on this summary page will be eligible to be awarded a contract and to receive payment under the DMEPOS Competitive Bidding Program. You cannot use the same 10-digit PTAN for each location. To make any changes, click <b>EDIT</b>.</p>	<p>Displayed below is a summary of all the information for the location(s) included on your bid. Please carefully review it for accuracy. You may modify your information or add a new location. If you do not wish to make any changes or add another location, select <b>Next</b>. Only locations identified by the PTAN listed on this summary page will be eligible to be awarded a contract and to receive payment under the DMEPOS Competitive Bidding Program. You cannot use the same 10-digit PTAN for each location. To make any changes, click <b>Edit</b>.</p>	<p>DBidS Form A Screenshot 9</p>	





--	--	--	--	--	--



