

Public Purchase Questions Regarding RFP #: EMS-2019-7

Response August 9, 2018

<p>1. QUESTION regarding RFP page 13, section 2.2 C. (5) and 2.2 D. (1) ("Supplementary Documents" / "Price Proposal"):</p> <p>In the requested format for the proposer's "Supplementary Documents" (section 2.2 C.), the RFP has included a subsection for "Attachments, certifications, and forms." It is our understanding that any requested proposal forms/Enclosures should be completed and included here. However, based on the subsequent "Price Proposal" requirements (section 2.2 D.), it is clear that all cost and pricing data, including forms, must be included in a separate sealed envelope. Can the county confirm that Enclosures 12, 13 and 14 must be submitted in the separate sealed pricing envelope and not in the "Supplementary Documents" attachment section? Additionally, can the county confirm what other forms and information, if any, must be submitted in the separate sealed envelope and not in the "Supplementary Documents" attachment section?</p>	<p>Only Enclosures 13 &amp; 14 must be submitted in the separate sealed pricing envelope.</p>
<p>2. QUESTION regarding RFP pages 18-19, section 3.1 C. (1) (a)-(d) ("Minimum Qualifications"):</p> <p>In section 3.1 C, (1), should items "a", "b", "c", and "d" be numbered "2", "3", "4", and "5" (respectively), or is there text missing from the RFP document? These items currently appear to be a part of the "Legal History" requirement but do not relate.</p>	<p>Agree, section 3.1 C, (1), items "a", "b", "c", and "d" will be numbered "2", "3", "4", and "5" (respectively). Changes will be added as an addendum to the RFP.</p>
<p>3. QUESTION regarding RFP page 19, section 3.2 A. (2) ("Organizational Capacity"):</p> <p>In section 3.3 A., item (2) requests "Titles and names of staff members who will be on the team responsible for the service . . ." Can the County confirm this item (2) requirement is only pertinent to the Proposer's key leadership personnel, as is the case for items (1) and (3) in the same section?</p>	<p>Agree, 3.2 A., item (2) key leadership only.</p>
<p>4. QUESTION regarding RFP pages 19-20, section 3.2 B. (3) ("Organizational Capacity and Experience"):</p> <p>In section 3.2 B. (3), the RFP asks Proposers to provide "Details of any future or refusals to complete a contract." Can the County clarify what the "details of any future" language refers to?</p>	<p>Agree, "future or" will be struck from this section.</p>
<p>5. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 26, section 6.5 A. (6) ("Vehicles"):</p> <p>The language in 6.5 A. (6) describes a mileage maximum of 250,000, while also allowing vehicles currently in use to be utilized for implementation/start-up. We request the following alternative suggested language be used for this section: "Ambulance shall be limited to a maximum mileage of 250,000. Seventy five percent of any fleet not purchased new for this implementation shall not exceed 125,000 miles as of July 1, 2019 and then may be kept in service up to the mileage maximum of 250,000. Any ambulances not new at the start of this agreement must include a list of brand name, model, age and maintenance records."</p>	<p>Agree to amended language, "Ambulance shall be limited to a maximum mileage of 250,000. <del>Seventy five percent of any fleet not purchased new for this implementation shall not exceed 125,000 miles as of July 1, 2019 and then may be kept in service up to the mileage maximum of 250,000.</del> Any ambulances not new at the start of this agreement must include a list of brand name, model, age and maintenance records. The Proposal Review Committee will score proposals based on a blended mileage fleet to ensure ambulances do not reach maximum miles the same time."</p>

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<p>6. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP pages 26-27, section 6.5 B. (1) ("Bariatric ambulance"):</p> <p>Section 6.5 B. (1) states that "The bariatric ambulance shall have the capacity to accommodate a patient weighing up to 1000 pounds and shall include a bariatric stretcher, a ramp, and a bed winch." We request the following alternative suggested language be used for this section: "The bariatric ambulance shall have the capacity to accommodate a patient weighing up to 1,000 pounds and shall include a bariatric stretcher and a hydraulic lift."</p>	<p>Agree, will strike, "a ramp, and a bed winch" and add "a hydraulic lift."</p>
<p>7. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 27, section 6.5 C. (3) ("Proposer Supervisor Vehicles"):</p> <p>In section 6.5 C. (3), the RFP states "Supervisory vehicles must not exceed 200,000 miles or 7 years of age." As the RFP's maximum ambulance mileage limit is 250,000, should the supervisor vehicles also have the same mileage requirement? We request the following alternative suggested language be used for this section: "Supervisory vehicles must not exceed 250,000 miles or 7 years of age."</p>	<p>County declines to change language in RFP</p>
<p>8. QUESTION regarding RFP page 29, section 6.5 I. (7) ("Communications Equipment"):</p> <p>In section 6.5 I. (7), the RFP calls for each ambulance to have a mobile computer to handle all CAD and ePCR functions. As is the current practice in San Mateo County, ePCR mobile devices are generally a separate device from mobile devices supporting CAD functions in order to protect privacy of the patient care record. Can the County please clarify whether you will permit either two separate devices or a single device?</p>	<p>The County will accept the proposers best practice. One or two mobile computers will be accepted to handle these functions.</p>
<p>9. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 29, section 6.5 I. (8) ("Communications Equipment"):</p> <p>In section 6.5 I. (8), the RFP requires the bidder to "Provide mobile computers with the ability to send an ePCR to the receiving hospital for 53 Fire JPA response engines and 4 JPA supervisor vehicles." To ensure the latest technology and hardware is being used in the County system, we request the following alternative suggested language be used for this section: "Provide mobile computers or tablets with the ability to send an ePCR to the receiving hospital for 53 Fire JPA response engines and 4 JPA supervisor vehicles."</p>	<p>County declines to change language in RFP</p>
<p>10. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 29, section 6.6 B. (1) ("Ambulance Work Schedule and Conditions"):</p> <p>In section 6.5 B. (1), the RFP states "At least 51% of the personnel who staff ambulances shall be Proposer's full-time employees." As the headcount of part-time employees does not reflect in the percent of scheduled shifts staffed with full-time employees, we request the following alternative suggested language be used for this section: "At least 51% of the employer's proposed schedule shall be full-time positions."</p>	<p>Agreed. Section 6.6 B shall read, "At least 51% of the employers proposed schedule <del>personnel who staff ambulances shall be Proposer's full-time employees.</del>"</p>

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<p>11. QUESTION regarding RFP page 32, section 6.6 D. (2), (c) ("Training and Continuing Education"):</p> <p>In section 6.6 D. (2) (c), the RFP describes "Advanced Life Support". Should this instead read: "Advanced Cardiac Life Support"?</p>	<p>Yes, agreed; section 6.6 D (2) shall read "Advanced Cardiac Life Support"</p>
<p>12. QUESTION regarding RFP page 32, section 6.6 D. (2) ("Training and Continuing Education"):</p> <p>Section 6.6 D (2) only mentions "paramedic" personnel. Will EMTs be required to maintain AHA/ARC CPR certification?</p>	<p>Yes, this is current EMS Agency policy (see #PER2, <a href="https://www.smchealth.org/sites/main/files/file-attachments/per_2_emt_cert_renewal_reinstatement_10-10-2017_0.pdf">https://www.smchealth.org/sites/main/files/file-attachments/per_2_emt_cert_renewal_reinstatement_10-10-2017_0.pdf</a>)</p>
<p>13. QUESTION regarding RFP page 33, section 6.6 D. (6) (i) ("Training and Continuing Education"):</p> <p>On page 33, section 6.6 D. (6) (i), the RFP includes the phrase "previously employed by". Can the County please explain intent and exact meaning of "previously employed by"?</p>	<p>The County is interested in the previous employment history of EMS personnel who have been in your employment less than three years.</p>
<p>14. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 34, section 6.8 A. (3) ("Disaster Preparedness"):</p> <p>On page 34, section 6.8 A. (3), the RFP states "Proposer will ensure field staff responding to a MCI, disaster or other large-scale emergency are fully trained in the ReddiNet system." Today, only San Mateo County field supervisors and managers have access to use ReddiNet. As such, we request the following alternative suggested language be used for this section: "Proposer will ensure field supervisors and managers responding to a MCI, disaster or other large-scale emergency are fully trained in the ReddiNet system."</p>	<p>Decline, the intent of this section is for proposers to ensure all field staff are fully trained in the ReddiNet system. It is acknowledged there are different rolls for managers, supervisors and field staff in ReddiNet.</p>
<p>15. QUESTION regarding RFP page 36, section 6.9 D. (4) ("Quality / Performance"):</p> <p>RFP section 6.9 D. (4) (b) requires the Contractor's ePCR system to have in the field capability to search a patient's health care record for problems, medications, allergies, and end of life decision to enhance clinical decision making in the field. Does the County require the ability for Contractor to search within their own ePCR repository (historic patient information) or the ability to search within a centralized repository of healthcare facility records?</p>	<p>The County requires the proposer to have the ability to search their own ePCR repository and other health care repositories when available.</p>
<p>16. QUESTION regarding RFP page 36, section 6.9 D. (5) ("Quality / Performance"):</p> <p>RFP section 6.9 D. (5) requires the provision of patient care records at the receiving hospital facility. Does the County anticipate available funding for either Contractor or hospitals to support integration with each hospital's electronic medical record or a centralized repository of healthcare facility records?</p>	<p>The County does not anticipate any outside funds available for this requirement at this time.</p>

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<p>17. QUESTION regarding RFP page 36, section 6.9 D. (6) ("Quality and Performance"):</p> <p>In response to section 6.9 D. (6), most patients who receive an isolated dose of albuterol are not in critical condition (other procedures/medications listed in this section are). Will the County please consider removing albuterol from this list?</p>	<p>Agree, the County will consider this in the future.</p>
<p>18. QUESTION regarding RFP pages 36-37, section 6.9 D. (7) ("Quality and Performance"):</p> <p>In section 6.9 D. (7), are items "c" and "d" duplicates? It is understood that the expectation for any emergent (lights &amp; siren) "return" to the hospital would meet the requirement of this section. It is not clear why a Priority 1 patient "response" would meet the requirement of this section. Will the County please explain this different, or consider deleting "(c) Any Priority 1 patient, or equivalent" language to avoid confusion?</p>	<p>Agree, the County will strike through 6.9, D, (c) as follows, <del>"Any Priority 1 patient, or equivalent"</del></p>
<p>19. QUESTION regarding RFP pages 37-38, section 6.10 B. (3) ("Dispatch and Radio Communication"):</p> <p>For section 6.10 B. (3), can the County confirm that letters "a" to "g" are mislabeled? If not, is there text missing from the RFP document?</p>	<p>Agree, letters "a" to "g" are mislabeled. Changes will be added as an addendum to the RFP.</p>
<p>20. QUESTION regarding RFP pages 39-40, section 6.11 B. (1) and 6.11 B. (3) ("Financial and Administrative Requirements"):</p> <p>Can the County confirm that the proposer must submit its answers to the questions listed in subsection 6.11 within the separate sealed financial envelope (and not in its main proposal document), due to the financial nature of the questions? For example, 6.11 B. (1) and 6.11 B. (3) ask for the full costs of the proposed service and the proposed amount dedicated to reserve for contingencies, respectively.</p>	<p>Agree, enclosures 13 &amp; 14 need to be in a separate sealed envelope for the 9 printed hard copies.</p>
<p>21. QUESTION regarding RFP page 41, section 6.11 E. (1) ("Financial and Administrative Requirements"):</p> <p>Page 41 describes year-end financial reports, which "shall be available to the EMS Agency Director on an annual basis within ninety (90) calendar days of the close of Proposer's fiscal year." Will the County please consider making this reporting requirement "at the request" of the LEMSA, as is the practice today? The cost of said reports is approximately \$25,000 each audit. If this remains a requirement of the RFP, will the County please consider 180 days instead of 90 days, as this would be the time required to produce a year-end independent audit?</p>	<p>County declines to change language in RFP</p>

<p>22. QUESTION regarding RFP pages 42-43, section 6.11 G. (2) (b) (table) ("Financial and Administrative Requirements"):</p> <p>On page 43, section 6.11 G. (2) (b), the RFP has provided a table comparing the RFP response time standards with California state standards. In August of 2016, the ESC commissioned a Project Charter to study P1 responses in Zone 5. The result was a recommendation to change in the upcoming RFP the Remote response time in Zone 5 from 29:59 to 39:59. May we recommend making this change pursuant to the Project Charter? We are happy to provide additional supporting documentation at your request.</p>	<p>Agree, correction; the table for response zone time standards (page 43) will be amended to show response time of 39:59 for Remote areas.</p>
<p>23. ALTERNATIVE SUGGESTED LANGUAGE regarding RFP page 44, section 6.11 I. (1) ("Financial and Administrative Requirements"):</p> <p>On page 44, section 6.11 I. (1), the RFP describes the process for rate adjustments. While we know the County has a vested interest ensuring a fiscally sustainable and high-quality EMS services, we are confident that the RFP rate adjustment methodology does not achieve this goal as currently drafted. Due to the large percentage of government payers with fixed reimbursement, limiting increases to CPI-U, 50% Medical Care Index and 50% All Urban General Consumers will result in unsustainable operations during the life of this contract. Annual County cost increases for Dispatch Fees, CAD Maintenance, Radio System, EMS Agency Oversight and Monitoring, County Pager, JPA First Responder, in addition to contractor's labor rates, health benefits, insurance, fuel, supplies, etc., outpace actual rate increases provided under a traditional CPI formula. For example, if real costs increase 3%, the realized increase in revenue as a result of a 3% CPI ambulance fee increase is less than 0.60% in cash collections. Recent RFPs in Alameda County and Santa Cruz County addressed this issue.</p> <p>In order to adjust for the effect of government and other non-responsive payers, we request the following alternative suggested language be used for this section, as taken from the recent Alameda County, California ambulance RFP (due 18 July): "The EMS Director has final authority to set the CPI rate adjustment, which may vary from no adjustment to a CPI-based increase at the greater of the following percentages: (a.) 2% divided by the Contractor's average collection rate from the previous twelve (12) month period for which figures are then available; or (b.) 5% plus the percentage calculated from the following Consumer Price Index (CPI) as recorded by the Department of Labor, Bureau of Labor Statistics CPI as of the previous twelve (12) month period for which published figures are then available for all urban consumers, San Francisco-Oakland-San Jose: 50% of the Medical Care Group CPI; and, 50% of the Transportation Group CPI."</p>	<p>Agree, the County will amend Section 6.11, I, to state; "The rates proposed in this RFP may be increased annually to adjust for inflation. No later than forty-five days prior to each adjustment date, the Contractor may request the EMS Agency Director consider approval of a user fee adjustment.</p> <p>In order to ensure a fair and appropriate cost to residents and visitors to the County the EMS Director will have the final authority to set the CPI rate adjustment. The EMS Director's decision will be informed by documentation submitted by the provider to substantiate the need for a rate increase. Such documentation may include but are not limited to audited financial statements, collection rate and payer mix.</p> <p>The formula utilized by provider shall be based on the Consumer Price Index All Urban Consumers San Francisco-Oakland-San Jose" ("Bay Area CPI") index and the percentage of the average of the Contractor's collection rates in the most recent four (4) quarterly financial reports. The percentage increase to adjust for inflation shall be calculated using the following indices: Bay Area CPI divided by the average collection rate described above equals "Net" CPI adjustment.</p> <p>Example: If the Bay Area CPI inflation rate increases 2%, and Contractor's average collection rate is 50%, the Net CPI inflation rate adjustment shall equal 4%.</p> <p>Notwithstanding anything in this section, a rate increase request greater than 10% will require Board of Supervisor approval. Fees paid by the contractor will receive rate adjustments based on the Bay Area CPI rate."</p>

<p>24. QUESTION regarding RFP Enclosure 7, section (3) ("Financial Penalties"):</p> <p>On the second page of RFP Enclosure 7, under "(3) Other Repercussions", can the County please provide examples of how this section could be applied using both "response compliance level" and "extended time response" when determining breach?</p>	<p>Examples, please see page 4 of Enclosure 7: Response compliance level means any zone falling below 90% after application of allowable exemptions.</p> <p>Extended time response means any response over the specific zone requirement after application of allowable exemptions. Such as an Urban call taking greater than 22:59 is an extended response time.</p>
<p>25. QUESTION regarding RFP Enclosure 14, ("Proposed Operating and Start-Up Budget"):</p> <p>On the first page of Enclosure 14, in the budget table form, was Medi-Cal purposely omitted from the "REVENUES" list? Can the County please add this item to the table?</p>	<p>Agree, please see amended Enclosure 14 on Procurement website.</p>
<p>26. RFP 12. E</p> <p>Is there a limit to the number of a proposer's attendees during the pre-proposal conference and site visits? Will there be an opportunity for open dialogue or for proposer's additional questions at the pre-proposal? Does the County anticipate audio taping or video-taping the pre-proposal conference? Is it mandatory for a proposer to attend the pre-proposal conference?</p>	<p>There may be limited space at the Proposers Conference and the County asks proposers to consider this when planning attendance to this meeting.</p> <p>The County will attempt to record the Proposers Conference however the proposer should not rely on a recording of the meeting. Attendance is encouraged.</p>
<p>27. Pg. 18 3.1(A)(1) Experience: The San Mateo County RFP states that if the proposer's business is structured as an LLC, then each partner must have existed and provided ALS services for at least five (5) years.</p> <p>Question: If the proposer's LLC is a new operating company created after purchasing the assets of an existing, municipally contracted, high-performance, 9-1-1 ALS services ambulance company with more than five (5) years' experience, does the new entity qualify to bid since the operating experience and knowledge has transferred along with the experienced personnel to the new LLC entity? If San Mateo County's answer is yes, how would San Mateo County like the proposer to demonstrate and/or explain the new operating company's background? If no, how do you suggest an experienced proposer meeting all of the other criteria proceed</p>	<p>A purchase of company that has operated more than five years will qualify if the company has transferred without a change in operations; Proposer should provide relevant purchase documents that demonstrate the acquired company's uninterrupted experience.</p>

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<p>28. Pg. 18 3.1(B)(1)(a) Financial Condition. The San Mateo County RFP asks the proposer to provide externally audited financial statements for the most recent five (5) years...</p> <p>Question: If the proposing entity was acquired in an asset sale as recently as March 2018, then is it possible for this proposer to submit its previous parent's most recent five-year financials to satisfy this requirement, if the proposer is also shown separately in these previous parent company's statements? If no, how does the County suggest the proposer meet this criteria?</p>	<p>A proposer should submit the recently acquired company's financials for the past five years as required by the RFP. Proposer may also submit any financial information it deems relevant from the acquiring entity.</p>
<p>29. Pg. 18 3.1(B)(1)(a) Financial Condition. The San Mateo County RFP asks the proposer to provide externally audited financial statements for the most recent five (5) years...</p> <p>Question: If the proposing entity was acquired in an asset sale as recently as March 2018, then is it possible for this proposer to submit its previous parent's most recent five-year financials to satisfy this requirement, if the proposer is also shown separately in these previous parent company's statements? If no, how does the County suggest the proposer meet this criteria?</p> <p>If San Mateo County would like to see the new parent company's financials, please note the proposer will not be noted in these statements. How would the county like the proposer to handle this circumstance?</p>	<p>Yes, however proposer still needs to submit acquired company information.</p> <p>The proposer can submit any financial information deemed relevant, but must include the acquired entity information for the past five years.</p> <p>Additionally, the current parent company should submit a cover letter explaining the financial statements and relationship of the recently acquired company.</p>
<p>30. Pg. 19 3.2(A)(3) All applicable licenses and license numbers relevant to delivery of services;</p> <p>Clarification: Please provide a detailed list of the types of licenses the County would like the proposer to supply.</p>	<p>This section pertains to Medicare, Medi-Cal billing, and any other pertinent licenses required to be an ambulance provider in California.</p>
<p>31. Pg. 20 3.3(A) Reference Letters</p> <p>Question: Must each of the reference letters be responsive to all eight of the enumerated categories or is the County asking for five letters for each listed category?</p>	<p>No, the County is requesting five letters of reference. The sum of responses from the five letters must address the eight areas described in this section.</p>

<p>32. Pg. 25 A. (4) Zone Boundaries and/or Deployment Strategies</p> <p>Question: If proposers are required to maintain the current zone boundaries and/or deployment strategies.... Does this mean the proposer must use the same posting plan and deployed unit hours as the current provider?</p>	<p>Agree, see clarification: Proposers are required to maintain the current zone boundaries <del>and/or deployment strategies</del> that result in consistent excellent response time compliance in hard to serve areas.</p>
<p>33. Pg. 25 6.4(A)(1) Ambulance System Status Plan (SSP) will be approved by the EMS Agency....</p> <p>Question: To provide a competitive response to San Mateo's RFP, we need to have historical ambulance run data to make an accurate assessment of the San Mateo County EMS system.</p> <p>Please provide the last 12 months of run data including the following crucial information:</p> <ul style="list-style-type: none"><li>* All time-stamps for calls by hour-of-day and day-of-week;</li><li>* The priority of each call;</li><li>* The problem nature;</li><li>* Whether the call resulted in a transport or not,</li><li>* The transport destination of the transport</li><li>* Cancellation reason, and</li><li>* The latitude and longitude of each response.</li></ul> <p>Additionally, please provide a list of the current EMS Agency-approved posting locations.</p>	<p>CAD data will be available on the Procurement website.</p>
<p>34. Pg. 26 6.5(A)(6) Ambulances</p> <p>Question: The RFP states that a contract ambulance's maximum mileage is limited to 250,000 miles. Seventy-five percent of fleet shall not exceed 75,000 miles. This mileage restriction imposes a penalty for any proposer that offers to bring a new ambulance fleet to the San Mateo County EMS system.</p> <p>Does the 75,000 -mile limitation apply only to the first year of the contract or for the life of the contract? (If the limit applies during the life of the contractor's contract, it's likely that nearly the entire fleet will have to be replaced within two (2) years.)</p> <p>Please provide the peak number of ambulances that are currently deployed in San Mateo County service areas.</p>	<p>Please see response to question #5.</p>



<p>35. Pg. 28 G. (1) Equipment and Supplies</p> <p>Question          The RFP states that the proposer will stock 53 first responder ALS JPA vehicles at no cost to the first responder, with the same durable medical equipment and expendable supplies as used by proposer.          Who owns the equipment used by the JPA today?          Considering the sensitivity of the federal government's concern with kickbacks and quid pro quo arrangements, has the County obtained a legal opinion concerning this requirement?</p>	<p>The contractor owns the durable medical equipment.          Based on review of OIG opinions the county is satisfied that the RFP does not violate Fed anti-kickback statutes.</p>
<p>36. Pg. 28 H. (1) Equipment and Supplies/ JPA and EMS Field Supervisor Vehicles.</p> <p>Question          The RFP states that the contractor will provide four, ALS-equipped Field Supervisor JPA vehicles with a cost up to \$50,000 or will provide funding for these vehicles for the exclusive use of the JPA fire supervisors for the term of this agreement.          * Is the ALS equipment for these vehicles included in the 53 vehicles stipulated on Pg. 28 (G)1?          * Who maintains and insures the vehicles?          * Are these vehicles leased to the JPA?          * Are there mileage restrictions regarding these vehicles?          * Considering the federal government's concern with kickbacks and quid pro quo arrangements, has the County obtained a legal opinion concerning these requirements?</p>	<p>No. 53 JPA fire apparatus plus 4 JPA supervisor vehicles.          The JPA city/district maintains &amp; insures vehicles          No          Mileage restrictions are on page 27, C (3).          Based on review of OIG opinions the county is satisfied that the RFP does not violate Fed anti-kickback statutes.</p>
<p>37. Pg. 28 H. (2) Equipment and Supplies/Supervisor Vehicles</p> <p>The RFP states that the contractor will provide one BLS equipped Field supervisor EMS Agency vehicle.          * Is the BLS equipment for these vehicles included in the 53 vehicles stipulated on Pg. 28 (G)1?          * Who maintains and insures the vehicles?          * Are these vehicles leased to the JPA?          * Are there mileage restrictions regarding these vehicles?          * Considering the federal government's concern with kickbacks and quid pro quo arrangements, has the County obtained a legal opinion concerning these requirements?</p>	<p>No          EMS will maintain &amp; insure BLS unit only          No, this vehicle is for the EMS Agency          Yes, please refer to page 37, 6.5, C, (3) of the RFP          Based on review of OIG opinions the county is satisfied that the RFP does not violate Fed anti-kickback statutes.</p>
<p>38. Pg. 29 (6) Equipment and Supplies/ Radios</p> <p>Question:          The RFP states that each ambulance must have two portable radios, one for each crew member for medical communication, and one fire portable radio to communicate on fire channels when necessary.          How many portable radios must be on an ambulance, two or three?</p>	<p>The current provider utilizes two EMS portables and one Fire portable in addition to mobile radios in each ambulance. If the proposer chooses to provide multi band radios capable of transmitting and receiving on both 700 MHz and VHF Fire, this will be an acceptable alternative to providing three portable radios.</p>

<p>39. Pg. 29 6.6(B)(2) Unit Hour Utilization</p> <p>Question:                  The RFP states that the maximum unit hour utilization for a 24-hour ambulance unit shall not exceed 0.40 without prior approval by the EMS Agency.                  Is the County's stated UHU a typo?</p>	<p>No, the 2013 contract extension for the current contractor (dated October 8, 2013, page 6, item III, 5, b) contains the language, "Average unit hour transport utilization ratios for Contractor's ambulance crews regularly scheduled to work in excess of twelve (12) hours must not exceed 0.40. The County desires to maintain this standard.</p>
<p>40. Pg. 30(C)(1) Comfort Stations:</p> <p>Question:                  The RFP states that the contractor is required to provide "comfort stations" located at strategic posts that are accessible to on-duty field-based personnel 24/7.                  Are comfort stations provided today and if so what are their locations?</p>	<p>This is not a requirement of the current contractor.</p>
<p>41. Pg. 33 6.7(A)(4) Educational Events:</p> <p>Question:                  The RFP states that the proposer will sponsor, at least annually, educational events which include the entire EMS multidisciplinary team including emergency department physicians, nurses, dispatchers, fire service and ambulance paramedics and EMTs.                  Are these educational events being currently provided? If so, please provide a list of the events provided.                  Please indicate the number of events the County expects the contractor to sponsor and an example of the type and scope of the desired event(s).</p>	<p>This is a new RFP requirement</p>
<p>42. Pg. 36 (D)(2) Electronic Patient Care Records (ePCR).</p> <p>Question:                  This RFP states that the contractor-provided ePCR product must be available to all fire department EMT and paramedic personnel.                  What is the current product used today?                  How many of these devices must be provided to the JPA?                  Who maintains the hardware/software?</p>	<p>The current contractor is using MEDS ePCR                  53 mobile computers or tablets plus an additional 4 for JPA supervisors.                  The proposer will be responsible to maintain all hardware and software.</p>

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<p>43. Pg. 37 6.10(A)(3) Dispatch and Radio Communication.</p> <p>Question: The RFP states that the proposer will be required to enter into a written agreement with PSC that is approved by the EMS Agency. Is there a written agreement in place today? If so, please provide a copy of the agreement.</p>	<p>No agreement currently in place</p>
<p>44. Pg. 38 (B)(3)(b) Proposer Requirements.</p> <p>Question: The RFP states that the contractor will be responsible for the ambulance deployment plan or provide updates to selected third-party deployment software. Is there currently a third-party deployment software in use? If so, please provide the specifications for this software. Does the county or the provider purchase this software?</p>	<p>The purchase of the third-party deployment software will be made through the County's purchasing process and contract with the new CAD vendor. A selection of third-party software has not yet been made. The County will be responsible for this purchase.</p>
<p>45. Pg. 39 (6)(a) CAD.</p> <p>Question: The RFP states the PSC will continue to use the current Northrop Grumman CAD until the County procures a new CAD (expected October 2019); Proposer may incur additional costs related to proposer's change order requests. This a budget issue. What are the additional costs that could be incurred by the proposer?</p>	<p>The County cannot provide additional information at this stage of the CAD process.</p>
<p>46. Pg. 39 (6)(b) CAD.</p> <p>Question: This proposer acknowledges that it will incur costs associated with integrating Proposer's vehicles with AVL/GPS to interface with incoming CAD system. Will the County ensure that the selected CAD will allow interface with Proposer's needs?</p>	<p>AVL/GPS is expected to be managed through the use of mobile devices or MDC's connected with the new CAD as required in Pg. 38 (3)(a). It should not need to be a separate "system".</p>
<p>47. Pg. 39 (6)(c) CAD.</p> <p>Question: Proposer will acknowledge that it will incur costs associated with equipment and licensing cost for Mobile Data Computers or other devices connected to the new CAD system. Does this statement anticipate Proposer paying for the JPA's connectivity?</p>	<p>No, the JPA pays their costs for MDC connectivity.</p>

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<p>48. Pg. 39 (b) Radio System.</p> <p>Question: This proposer acknowledges it will be responsible for entering into a service level agreement with ISD radio services to include programming of portable/mobile radios and connectivity to County radio system. Is there a contract between ISD radio services and the current provider? If so, please provide the agreement?</p>	<p>No, there is no formal agreement.</p>
<p>49. Pg. 41 D (3) Financial Hardship Policy and County's ACE Program.</p> <p>Question: The RFP states for patients who are members of County's ACE Program, Proposer shall fully discount their 9-1-1 emergency transport bill when it is presented with evidence that the patient is an ACE Program member. What is meant by "fully discount"?</p>	<p>The contractor will not bill the patient or County for this transport</p>
<p>50. Pg. 41 (D)(4) Financial Hardship Policy and County's ACE Program.</p> <p>Question: The RFP states, for patients in custody at the county jail, proposer will fully discount bill when requested by the Sheriff's Office. What is meant by "fully discount"? What is the criteria for requests such discount?</p>	<p>The contractor will not bill the patient or County for this transport Please refer to page 41, item D, (3) for this information.</p>
<p>51. Pg. 42 (G)(2)(a)</p> <p>Question: The RFP asks the proposer to identify and calculate the estimated annual savings that will be recognized by providing the RFP's stated ambulance-on-scene times as compared to the California standard as set forth in the chart below. Please provide the current contractor's current financial and operational performance of the incumbent contractor as compared to the California Standard so other proposers can make accurate and realistic projections</p>	<p>This is a calculation the proposer is required to make independent of any prior cost estimates.</p>
<p>52. Enclosure 4 III - Current EMS Program Description: Fire Services.</p> <p>Question: The first paragraph of this RFP enclosure describes an "Operating Agreement" between the JPA and AMR. Please provide this agreement.</p>	<p>The agreement can be found on the EMS Agency's website under Fire / First Responders Contracts &amp; Amendments <a href="https://www.smchealth.org/ems">https://www.smchealth.org/ems</a></p>

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<p>53. Request: We believe the EMS Agency desires a "level playing field" for all bidders competing for this contract. And, we fully recognize and accept that Incumbents inherently have an advantage in these processes. However, all bidders, but for the incumbent will perform extensive due diligence to provide San Mateo County a responsive and responsible proposal. Answer to the Proposers' written questions and those question posed at the Proposers [sic] Conference will not be available until at the earliest August 15, 2018. Developing a proposal for any bidder is an extensive process. Please consider publishing an extension of at least 45 days beyond the current published due date for proposal.</p>	<p>The County intends to follow the published RFP timelines</p>
<p>54. 1. Section 3.1(A)(1)- We propose to modify the language in this section in RED below: "Five years continuously engaged in providing services as required by a high-performance contract in the United States to a primary 911 Ambulance services provider and capable of performing at the ALS level for an operating area of population greater than 700,000, with size, geographical spread, population densities, and call volume appropriately similar to those of the County of San Mateo's EOA."  Falck California, through its operating entity, CARE Ambulance, has significant and relevant experience providing high quality services in a high-performance emergency ambulance service contract with several counties that are comparable, or larger in size, population densities and call volume with San Mateo County. These services are provided in partnership with local Fire Department agencies at the ALS level. By making the proposed changes, San Mateo will ensure a competitive process by confirming the ability of Falck to qualify for this RFP process. Furthermore, the County has listed "emergency ambulance service" in Section 3.1(C)(1)(d), which supports the suggested modification.</p>	<p>County declines to change language in RFP</p>
<p>55. 2. Section 3.1(C)(1)(d): Does the County want information on just 911 contracts, or contract information for all contracts of the proposing entity?</p>	<p>All 911 contracts</p>
<p>56. 3. Section 3.2 (B)(2): We propose to modify the language in this section in RED below: "The number of years providing service as an 911 emergency ambulance provider"</p>	<p>County declines to change language in RFP</p>
<p>57. 4. Section 3.2 (B)(7): We propose to modify the language in this section in RED below: "Organization's local and/or national reputation as a contractor of emergency ambulance service"</p>	<p>3.3 A, (7), County declines to change language in RFP.</p>
<p>58. 5. Section 3.4: Will pricing be considered and used in the evaluation criteria in Enclosure 2? If so, what section will pricing be included in and what methodology will be used to score pricing?</p>	<p>Pricing will be considered as described in Enclosure 2, Proposal Section Financial &amp; Administrative with a total of 40 points.</p>
<p>59. SECTION IV - INSURANCE: The limits listed in the table conflict with the insurance limits listed in Enclosure 3 - General Terms of Contract. Which limits will be required?</p>	<p>Use the limits indicated in the RFP.</p>

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<p>60. 7. Section 6.4(A): In order to develop and propose a sophisticated Ambulance System Status Plan and ambulance station locations, comfort station locations and post locations, as required by the RFP, can the County provide historical call volume data including; Priority level, location of call (address, or GPS coordinates), time of day, date and disposition?</p>	<p>Please see response to question 33.</p>
<p>61. 8. Section 6.5(A)(6): The stated requirement of seventy five percent of fleet not exceeding 75,000 miles would create excessive cost to the system. We request the County allow maintain the current requirement of placing ambulances in reserve status at 195,000 miles and removed from service at 250,000 miles</p>	<p>Please see response to Question #5</p>
<p>62. Falck deploys bariatric capable ambulances in other large 911 emergency ambulance service areas. Due to advancements in design and technology, the use of these bariatric services does not include ramps, or winches. Would the county allow for an equivalent, with County approval?</p>	<p>Please see response to Question #6</p>
<p>63. 10. Section 6.5(G)(1): Who owns the existing durable medical equipment that is currently used by the 53 first responder ALS JPA vehicles?</p>	<p>The contractor will own the durable medical equipment</p>
<p>64. 11. Section 6.5(G)(1): Will the equipment remain in service and employed by the EMS system if a change in ambulance providers occur?</p>	<p>No, the contractor owns the durable medical equipment.</p>
<p>65. 12. Section 6.5(G)(1): Can the County provide a standard list of the durable medical equipment (including brand, model, and age) and supplies that is currently provided and/or expected to be provided to the 53 first responder ALS JPA vehicles?</p>	<p>Please see the agreement between the JPA and the County available on the County EMS Agency website  <a href="https://www.smchealth.org/ems">https://www.smchealth.org/ems</a></p>
<p>66. 13. Section 6.5(G)(1): Who currently maintains the durable medical equipment that is provided to the 53 first responder ALS JPA vehicles?</p>	<p>The proposer will be required to maintain all durable medical equipment.</p>
<p>67. 14. Section 6.5(I)(6): Is the requirement for each ambulance to have two (2) portable radios for the County owned 700 MHz trunked system and one (1) portable radio for the fire service radio system, for a total of three (3) portable radios per ambulance?</p>	<p>Please see response to question # 38.</p>
<p>68. 15. Section 6.5(I)(8): What brand, operating system and type of mobile computer are currently provided to the 53 first responder ALS JPA vehicles?</p>	<p>This section refers to ePCR. Current practice in San Mateo County is one MDC connects to CAD and one MDC or tablet runs ePCR. The County does not have information on the brand of ePCR tablet currently in use.</p>
<p>69. 16. Section 6.5(I)(8): Who owns the existing mobile computers that is currently used by the 53 first responder ALS JPA vehicles?</p>	<p>This section refers to ePCR. The contractor owns ePCR tablets.</p>

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<p>70. Section 6.5(I)(8): Will the equipment that is currently used by the 53 first responder ALS JPA vehicles remain in service and employed by the EMS system if a change in ambulance providers occur?</p>	<p>No</p>
<p>71. Section 6.5(I)(8): How (through what connectivity) do current computers in the 53 first responder ALS JPA vehicles send PCR's to receiving hospitals?</p>	<p>Connectivity is through commercial wireless networks.</p>
<p>72. Section 6.6(C)(1): Can the County provide a current list of comfort stations and locations?</p>	<p>This is not a requirement of the current contractor.</p>
<p>73. Section 6.6(C)(3)(a): Can the County provide copies of all current CBAs and/or labor agreements with incumbent workforce?</p>	<p>The County is not in the possession of current collective bargaining agreements.</p>
<p>74. Section 6.7(A)(1): What system is currently being used by the current provider and hospitals for the electronic transmission of 12-lead EKGs obtained in the pre-hospital setting?</p>	<p>Currently, hospitals have a LifeNet receiving center and are able to receive EKGs from the field. Each hospital sets up their profile and can add users to either simultaneously receive the EKG or forward the EKG as desired. The provider also is able to view the EKG upon transmission.</p>
<p>75. Section 6.9(D)(12): How (through what connectivity) do current computers in the 53 first responder ALS JPA vehicles send PCR's to receiving hospitals?</p>	<p>Currently, when the ePCR is finalized and hits the MEDS server, it is auto-faxed to the receiving hospital. The receiving hospital also has access via a secured web view (MEDS Viewer).</p>
<p>76. Section 6.10(B)(6)(a): How about this instead of 22 and 23 below. CAD interfaces and related costs are a significant expense to a 911 provider. With the expected change to a yet-to-be-determined CAD, will the county consider a rate adjustment to directly offset the actual expense of changing CADs after the start of the contract?</p>	<p>It is expected the awarding proposer will work with PSC to develop an effective system. Section 6.11, H, (1) allows for the following: In the event that changes occur within the County that substantially impact the Contractors cost of providing services, such that CPI-based rate adjustments do not compensate for the increased cost of operating the 911 ambulance service the Contractor may request an additional rate increase, which shall be subject to approval by the San Mateo County Board of Supervisors.</p>
<p>77. Section 6.11(B)(7): Can the provided forms in Enclosure 14 be modified to show other pertinent system expenses, such as station rent, etc.?</p>	<p>Agree, County will add Rent and Other for system expenses. An addendum will be added to the County Procurement website.</p>
<p>78. Section 6.11(D)(3): Can the county provide call volume data (number of transports annually) of ACE Program members? If so, can the County provide the number of transports by year for the previous 3 years?</p>	<p>2015 – 193 transports 2016 – 70 transports 2017 – 99 transports</p>

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<p>79. Section 6.11(D)(3): What is the discounted fee amount (or fee schedule) the County requires the provider to discount to</p>	<p>Fully discount means the contractor will not bill the patient or County for the transport.</p>
<p>80. Section 6.11(G)(1)(b): Can the County provide historical call volume data, including call priority type, time and date of request, time and date of ALS provider on scene, time and date of transport provider on scene and disposition of call?</p>	<p>Please see response to question 33.</p>
<p>81. Section 6.11(G)(1)(d): Can the County provide the historical information (last fiscal year) and methodology of savings of current contractor from ALS services provided by the JPA?</p>	<p>Please see response to question 51.</p>
<p>82. ENCLOSURE 4: Can the County provide the average mileage of transport for FY 2016/2017?</p>	<p>The County does not have this information.</p>
<p>83. ENCLOSURE 4: Can the County provide historical collection percentages, by payor category (Medicare, Medi-Cal, Commercial Insurance, Private Pay)?</p>	<p>Please see page 7 of Enclosure 4.</p>
<p>84. ENCLOSURE 7: Can the County provide historical data of penalties paid by the current provider, including penalty fee, category and/or description?</p>	<p>The contractor has been compliant in all zones.</p>
<p>85. ENCLOSURE 12: Does the Schedule of Charges listed in the table of ENCLOSURE 12 include all charges used by the current contractor for services provided in the current contract? If not, can the County provide a list of all charges used by the current contractor for services provided in the current contract?</p>	<p>Yes</p>
<p>86. ENCLOSURE 14: Can this form be modified by a proposer to convey other expenses associated with and Operating and Start-Up Budget?</p>	<p>Start-Up Budget is included in column one. No changes can be made accept for the changes agreed to in questions 25 and 77.</p>
<p>87. Pg. 13, 2.3 A. 1</p> <p>The RFP states:                  2.3 PROPOSER SUBMISSION                  A. Submit proposals as directed below.                  (1) Electronic Submissions                  Include the proposer name and the RFP title and number in each filename. Submit proposals via the Public Purchase website, allowing sufficient time for the upload to complete by the Due Date and Time. Partial uploads will automatically terminate and proposals will be rejected. The Public Purchase submission will be date and time stamped and will be the official submission time. Contact Public Purchase with technical questions regarding the site. The County will not be responsible for and may not accept proposals that are late due to slow internet connections or for any other failure of the Public Purchase system.</p> <p>Question: Are there any file size restrictions for the electronic submission</p>	<p>There are no limits, no restrictions on file size in Public Purchase website; proposers may submit multiple files.</p>



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