COUNTY OF ALAMEDA

Questions & Answers

to

RFP No. 902216

### for

**ADVANCED LIFE SUPPORT (ALS)**

**AMBULANCE TRANSPORT SERVICES**

**Networking/Bidders Conference Held on October 20, 2022**

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| **This County of Alameda, General Services Agency (GSA), RFP Questions & Answers (Q&A) has been electronically issued to potential bidders via email. Email addresses used are those in the County’s Small Local Emerging Business (SLEB) Vendor Database or other sources. If you have registered or are certified as a SLEB, please ensure that the complete and accurate email address is noted and kept updated in the SLEB Vendor Database. This RFP Q&A will also be posted on the GSA Contracting Opportunities website located at** [**Alameda County Current Contracting Opportunities**](https://gsa.acgov.org/do-business-with-us/contracting-opportunities/)**.** |

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Thank you for your participation and interest in the County of Alameda RFP No. 902216 for Advanced Life Support (ALS) Ambulance Transport Services.

All the questions are taken verbatim from written questions emailed by potential Bidders. The County of Alameda shall be noted as “County” in the answers to these questions. The Questions and Answers are the final stances of the County. Please consider this document in preparation for your bid response.

**Questions and Answers**

1. (General/EOA) What areas within Alameda County are excluded in the EOA for which ACFD intends to bid? In the past, and in the recent EMS Plan reference in your RFP the Cities of Alameda, Albany, Berkeley and Piedmont are excluded, and listed as non-competitive for exclusivity. Do you intend to recruit these Cities to join the program? With AB387 in place, do cities continue to have "201 rights" or must they also comply with the new standard imposed by the law?
   1. **ACFD does not intend to recruit these cities. These four cities report directly to the Alameda County LEMSA.**
2. (Page 6/Partnerships) If ACFD is successful in recruiting some or all of the Fire Departments to join this initiative, how will the contract with the subcontracted ambulance service provider be governed? Do you anticipate ACFD as a lead agency, or do you anticipate a joint governance or JPA type structure?
   1. **ACFD will be the lead agency. Any contract with other fire departments will be separate from this contract.**
3. (Page 6/ Scope and Additional Background) Subsection 1.b. notes non-emergency responses are included in the EOA. Is that limited to non-emergency response to 911, received at ACRECC, or does this suggest exclusivity for inter-facility transports as well?
   1. **Only responses received by ACRECC through the 911 system which does not include non-emergency inter-facility transport requests received outside of the 911 system.**
4. (Page 8/Bidder Requirements) The RFP requires all licenses. But a bidder from outside the community would not have all the licenses that would be required and in place prior to operations. Is a commitment to obtain licenses and permits, and evidence of the viability of the promise, an adequate response to this requirement?
   1. **Page 8 of the RFP, Section D (BIDDER MINIMUM QUALIFICATIONS), Item 2, states:**

**Bidder must also possess all permits, licenses, and professional credentials necessary to supply products and perform services specified under this RFP. Unless explicitly stated otherwise in this RFP (including any Addendum or Q&A documents), Bidder is not required to submit copies or verification of the permits, licenses and credentials; however, Bidder must provide such proof if requested by ACFD or the County.**

**If there are any permits, licenses, and/or other professional credentials necessary to provide services that the Bidder will need to obtain post-award, the Bidder should identify these in the *Exceptions and Clarifications* page in the Exhibit A – Bid Response Packet while explaining their commitment, the time necessary to obtain them, and how that may impact services if at all. The County is under no obligation to accept such exceptions and clarifications, and these may be the basis for disqualification**

1. (Cover/SLEB) Since the Proposer will be a subcontractoir to the ACFD does the SLEB purchasing prefernce and 20% of purchases from a SEB subcontractor still apply as a County Procurement standard??
   1. **The SLEB Program requirements still apply for this RFP. If a Bidder is not a certified SLEB, or is not otherwise exempt from meeting the SLEB requirement, the Bidder must subcontract 20% (cumulatively) to one or more certified SLEBs.**

**The County does understands that not every procurement lends itself neatly into the SLEB Program requirements. For assistance in meeting the SLEB requirement, please contact:**

**Ratha Chuon, Contract Compliance Officer**

**Office of Acquisition Policy**

[**ratha.chuon@acgov.org**](mailto:ratha.chuon@acgov.org)

**Bidders that are unable to meet the SLEB requirement should use the *Exceptions and Clarifications* page in the Exhibit A – Bid Response Packet to take exception while also providing an explanation. The County is under no obligation to accept such exceptions and clarifications, and these may be the basis for disqualification.**

**However, vendors are strongly encouraged to submit bids regardless of their ability to meet the SLEB Program requirements.**

1. (Page 8/MIH) The RFP notes that "The County RFP may include other services such as Inter-facility Transfers (IFTs) and Mobile Integrated Health (MIH)." But the evaluation criteria does not seem to include bidder experience and qualification in MIH as part of the evaluation. Dis I miss something (short time to review) or is there interest in including this attribute as part of the selection process?
   1. **At this time, ACFD does not intent to evaluate Bidders’ experience for the services mentioned (IFTs and MIH).**
2. (Page 36/Performance Security Bond) A $15 million Performance Bond is unusually high and may not be available. It exceeds the cost of replacing the contractor in the event of default. What performance deficits would warrant a release of any or all of these funds to ACFD?
   1. **Trends in California are higher performance bonds with some at or above $20 million dollars. The expectation is that ACFD wants to secure its risk to the same level as the County wants to secure their risk.**
3. (Page 9/General Requirements) There are several areas where the expectations of the contractor include participation in activities that are not directly associated with ambulance service. For example, "participate in drills, training, activities, public education, etc. as directed by ACFD.". Since the only revenue to the contractor is the unit hours requested by ACFD and provided, would these activities also be invoiced as a requested Unit Hour?
   1. **No. Any provider to the County will be expected to participate in County organized drills, educational programs, etc. The same applies to ACFD drills and activities. These would be done with units that are in the system. Activities that require an additional unit(s) to provide coverage will be at the negotiated rate between the Contractor and ACFD**.
4. (Page 11/General Requirements) The RFP states *"For any Agreement resulting from this RFP, Contractor shall have and maintain a one hundred percent (100%) compliance to the response time standards specified to all areas of ACFD and its operational areas"*. However, the County RFP will have response time standards and measures that are not 100%, because the cost would be astronomical. ow do you envision the contractor meeting this requirement?
   1. **ACFD will adopt the response time standards provided by the County Ambulance RFP which will be a 100% compliance expectation of the Contractor.**
5. (Page 8/Cost Proposal) The RFP indicates that prices are final, but the County RFP may include attributes that require a different cost assumption as compared to the current system. We know that the current and previous ambulance service provider to Alameda County were unsuccessful in the business of serving the previous system, and therefore anticipate there may be changes in expectations. We fully recognize that this system design, with ACFD as the provider and the private sector partner as subcontractor is a very different arrangement, with distinct advantages. however, it is nearly impossible to accurately predict a binding cost estimate until the County RFP is released, as ell as some discussions between ACFD and its selected private sector partner help finalize operating plan. So, is it acceptable to submit for the purposes of comparison, a reasonable estimate given current information, but leave finalization of the price for review after the County RFP is available?

The Bid Form is the only compensation to the Contractor. The RFP includes a significant capital investment for Contractors (e.g., ambulances, medical equipment, medical supplies and possibly information technology systems). In addition, there are some direct operating expenses that do not neatly fit into the structure of a per man hour or per ambulance cost structure (e.g., surge ambulances, consumable medical supplies, inflation impacts.). Finally there are indirect expenses for administration, financing costs as well as an adequate profit margin to ensure sustainability. How do you want proposers to handle these costs? Do you want all these costs estimated and then distributed on a per unit basis? If so, should proposers either assume all 1,150 unit hours are awarded to a single organization, or should Proposers provide a sliding scale based on actual unit hours purchased?

To clarify, while direct operating expenses (e.g., labor per joint hour) are marginal and fluctuate based on volume, there are indirect expenses that are fixed or step-fixed and do not adjust well to volume changes (e.g., IT systems, real-estate, single person liaison in Alameda county and some administrative processes). So, the cost per unit hour (as an example) would vary greatly comparing 1,150 unit hours per week and 500 unit hours per week.

* 1. **The County expects Bidders to respond to the RFP, including pricing, based on the information contained in the RFP and any subsequent bid documents. Bidders should complete the Bid Form/Cost Sheets to the best of their ability and include all costs associated with providing a turnkey operation to support 1,150 daily unit hours. However, as noted on page 7 of the RFP, Section C (SCOPE and ADDITIONAL BACKGROUND), Item 3:**

***NOTE: This RFP is in anticipation of an Alameda County EOA contract for ambulance services. Therefore, even as the Successful Bidder of this RFP, there is no guarantee of the subcontracted ambulance services set forth in this RFP.***

***While there are specifics in this RFP, the intent of this solicitation is to secure a competent partner in providing effective ambulance services. The final contract will reflect the County RFP award. Therefore, it is the expectation that the Successful Bidder will be willing to modify the terms and corresponding content and pricing to mirror the contract resulting from the County Ambulance RFP. Should ACFD not be selected as the County’s ambulance provider, this solicitation and subsequent contract is null and void.***

1. (Exhibit P/Sample Professional Services Agreement) The sample agreement is designed for use to contract with a consultant which provides services that can be replaced or terminated. That is not the case with ambulance services. For example, Section 14 Termination for Convenience. The contractor is expected to make significant capital investments and develop an operating system of significant complexity. Termination with 7 days notice is unreasonable and not in the best interest of with ACFD or the contractor. Please explain the logic of this standard Consulting Agreement here and any flexibility.
   1. **In the event that the County or State took action that prohibited the ability to service the contract, or a change in Scope and manner were to occur, ACFD may terminate the contract.**

**The sample Professional Service Agreement (Exhibit P) is provided for general template terms and conditions. Final terms and conditions will be part of the negotiation process. However, Bidders should follow the instructions on page 35 of 40 of the RFP, Section R (AWARD), Item 3.b.(1), which states:**

**b. A contract must be fully executed by the recommended awardee and the ACFD prior to any services and goods being provided or work being performed. The ACFD will negotiate a Professional Services Agreement, including all terms and conditions, with the Successful Bidder. A Professional Services Agreement template is attached as Exhibit P.**

**(1) Any terms that are not acceptable to a Bidder must be identified on the Exceptions and Clarifications form in Exhibit A – Bid Response Packet.**

**The County is under no obligation to accept such exceptions and clarifications, and these may be the basis for disqualification.**

1. (Exhibit P/Insurance) Insurance policies that protect the Community, any person damaged, as well as the Contractor have evolved in recent years. Can a Proposer submit for consideration an alternative approach, that meets and exceed the underlying protections in the draft Agreement, but that is structure more efficiently.

Our existing insurance program easily meets or exceeds the coverage requirements. We would like to insert a provision stating that the insurance requirements can be satisfied through a combination of primary, excess and/or umbrella policies. If we are the successful proposer, final insurance requirement language for Certificate of Insurance would need to be confirmed with our insurance carriers to confirm the requested COI language is consistent with industry standards and their customary practices in issuing COIs.

We know that additional insured status is achievable under our General Liability and Auto Liability; we would need to confirm with our worker’s compensation and Professional Liability carriers whether additional insured status is allowed under those policies.

* 1. **As indicated on page 31 of 32 of the Exhibit A – Bid Response Packet (INSURANCE REQUIREMENTS):**

***Instructions: Insurance certificates are not required at the time of submission; however, by signing the Bid Response Packet and submitting a bid proposal, the Bidder agrees to meet the minimum insurance requirements and provide any documentation requested by County upon request, including any insurance requirements specified in the County Ambulance RFP.***

***Insurance documentation must be provided to the County before award and include an insurance certificate and additional insured certificate, naming the Alameda County Fire Department.***

***The following page contains sample insurance limits that are intended to be used for estimating cost on the Bid Form.***

**At this time, the County is requesting Bidders to adhere to the instructions above. While it is potentially possible for the Successful Bidder to negotiate alternate insurance requirements and/or a different structure, the Contractor will have to meet all insurance requirements dictated by the County.**

1. (Page 39/Non-compete) The RFP states: *"Competitive Activities. Successful Bidder(s) will be required to enter into a non-disclosure, non-circumvention, and non-competition agreement with ACFD before beginning negotiations of the Professional Services Agreement with ACFD. "* However we believe that the non-compete aspect should be cancelled in the event ACFD elects to not participate in the County RFP process. While unlikely, technically the proposing subcontractor would not be competing if ACFD elected to not participate in the County RFP.
   1. **The non-compete is to prohibit the Successful Bidder from submitting a separate bid competing against ACFD. Therefore, should ACFD not participate in the County Ambulance RFP, the non-compete aspect would not be enforced.**
2. (Page 42/3a. Scope of Work.) The RFP specifies 1,150 unit hours per day. Can you provide the underlying rationale behind this quantity, and how ACFD is confident that is the quantity of unify hours needed to satisfy performance expectation in the as of yet released Alameda County LEMSA RFP?
   1. **The 1,150 is the base number of hours to submit a proposal. Actual number of hours for deployment will be based on the County Ambulance RFP.**
3. (Cost Sheet Vehicles) The Cost Sheet does not include many of the costs of the system detailed in the RFP P (e.g., radio charges, equipment costs and replacement) So, do the omitted costs not included on the cost sheet become the responsibility of the ACFD? Or are you requested that we submit those costs separately?
   1. **Costs not included on the Bid Form/Cost Sheets are NOT the responsibility of the ACFD. The Bid Form/Costs Sheets have additional line items (the ones highlighted in yellow) that Bidders should use to include costs that are not already identified in the Bid Form/Cost Sheets.**

**Bidders should complete the Bid Form/Cost Sheets to the best of their ability and include all costs associated with providing a turnkey operation to support 1,150 daily unit hours.**

1. (ACRECC) In prior contracts for emergency ambulance service, there was a cost recovery for ACRECC to serve the contractor. However, since ACFD and ACRECC are one department, does that mean there are no costs to the contractor for ACRECC? That make logic sense to us, but just wanted to verify. IN a related question, if there are other respondents to the County RFP, will ACRECC require other bidders to pay a fee to ACRECC? If so, have you considered that as an unfair advantage? If so a solution of course is for ACRECC to charge ACFD Alliance the same as it would any other respondent to the County RFP. If that becomes the strategy, please confirm there is no expected cost born by the private sector partner to ACFD.
   1. **Ambulance dispatching costs are not part of this contract. ACRECC will require other Bidders that respond to the County Ambulance RFP to pay a fee to ACRECC (with the exception of ACFD being awarded the contract). ACFD does not consider this an unfair advantage. There is no expected cost born by the private sector partner to ACFD.**
2. \*Please provide the above requested call data in the following formats (listed in order of preferred format).

· Microsoft Access Database

· Microsoft Excel

· Comma Delimited Text File

· Tab Delimited Text File

* 1. **See answer to Question #19 below.**

1. Please provide shape files of the service area, including all EOAs and other geographic response time boundaries.
   1. **Shapefiles and a PDF graphic have been provided on the County’s** [**website**](https://gsa.acgov.org/do-business-with-us/contracting-opportunities/current-bid/?bidid=2613)**:**

[**https://gsa.acgov.org/do-business-with-us/contracting-opportunities/current-bid/?bidid=2613**](https://gsa.acgov.org/do-business-with-us/contracting-opportunities/current-bid/?bidid=2613)

**Please note, in order to properly view the shapefiles, an appropriate software application, reader, or tool will be necessary. Possible software/tools might include ArcGIS, QGIS, or Google Earth—ultimately, vendors are responsible for acquiring and using appropriate software.**

1. Please provide three to five years’ worth of call data that includes the following elements:\*

o Unique identifier – encounter / incident number

o Date of the encounter / incident

o Longitude and Latitude or X and Y coordinates of encounter / incident

o Street address of encounter / incident

o City of encounter / incident

o State of encounter / incident

o Zip code of encounter / incident

o Dispatch Zone (or contract area or first due station)

o Unit ID

o Type of call (Emergency Non-Emergency)

o Resource Needed (ALS or BLS or SCT)

o Resource Sent (ALS or BLS or SCT)

o MPDS triage / dispatch code / chief complaint

o Call priority

o Encounter / Incident disposition (e.g. Cancel reason, transported, etc.)

o Date/Time call received by PSAP

o Date/Time call received by dispatch center

o Date/Time transport service requested (request for non-emergency transportation services)

o Date/Time of dispatch

o Date/Time end route

o Date/Time arrived on scene

o Date/Time departed scene

o Date/Time arrived at destination

o Date/Time cleared destination

o Date/Time cancelled

o Transport destination (facility name or address)

* 1. **The County is assuming the data requested here (Question #19) is also the same data referenced in Question #17 above. At this time, all available data can be found and downloaded from the** [**link**](https://dni.sharefile.com/d-s7d2787236c8a437ca8d1a53c718ad018) **provided below:**

**Download site:** <https://dni.sharefile.com/d-s7d2787236c8a437ca8d1a53c718ad018>

**Please note, there may be multiple rows of data for a single incident due to multiple time values for ambulance dispatches (unit exchanges based on closest or available unit). There are some duplicates created for the time dispatch received the call during processing.**

**Some of the values were not available or they were combined/included in other field:**

* **Resource Needed (ALS, BLS, SCT) – All responses are ALS, All MPDS values were included and broken out by Card, MPDS Code, MPDS Description, MPDS Determinant & Dispatch Priority (1-4)**
* **Resource Sent – Same as above**
* **Type of Call = Nature of Call with Priority (1-4) and Determinant Levels (A = Alpha, B=Bravo, etc.)**
* **Call Priority = 1-4**
* **Destination = CAD Destination Values. They may have the Hospital abbreviation or both the address and abbreviation as generated.**

1. The current county contract allows for the use of BLS services in the 911 system. What is the ACFD’s intent for the utilization of BLS?
   1. **This RFP requests ALS transport units. If the County Ambulance RFP allows the use of BLS units, these will be considered and the contract between the Contractor and ACFD will be adjusted as needed.**
2. Would the ACFD please provide detail on how it determined minimum daily ALS staffing of 1,150 unit hours? Would the department please confirm this total does not include BLS unit hours?
   1. **Bidders should submit their best proposal using the daily number of unit hours requested at the ALS level.**
3. Does the ACFD expect the contractor to solely provide the 1,150 unit hours per day?
   1. **Yes.**
4. Does the 1,150 unit hours include any fire-staffed ambulances?
   1. **No. The 1,150 unit hours does not include any fire-staff ambulances. Bidders should submit their best proposal using the daily number of unit hours requested at the ALS level.**
5. Would the ACFD confirm whether they intend to award the contract to one ambulance provider?
   1. **Yes. ACFD intends to award the contract to a single Bidder.**
6. Would the ACFD confirm who is responsible for system status management (SSM) & deployment?
   1. **ACFD will determine the SSM. However, the Successful Bidder will be expected to participate in the deployment strategy for the county RFP bid submission.**
7. Would the department clarify which key personnel positions expected in Alameda County’s RFP would be provided by the contractor and which, if any, the ACFD would manage?
   1. **Bidders should submit their proposals with the expectation that they will be providing a “turnkey” operation outside of ACFD personnel. However, where opportunities exist to enjoy an economy of scale for personnel those will be explored.**
8. Historically, in a fixed-fee model, the contractor does not determine the number of unit hours in a system and is only held accountable for delivering unit hours, not response times. Would the ACFD clarify their intent?
   1. **The approximate unit hours of 1,150 must be met in any bid response, and the response time requirements will match the County Ambulance RFP.**
9. Traditionally, with large capital and personnel investments, contract language allowing termination without cause or for convenience is not reasonable and not included in contracts. Would the ACFD consider amending the RFP to better align with this standard practice?
   1. **The sample Professional Service Agreement (Exhibit P) is provided for general template terms and conditions. Final terms and conditions will be part of the negotiation process. However Bidders should follow the instructions on page 35 of 40 of the RFP, Section R (AWARD), Item 3.b.(1), which states:**

**b. A contract must be fully executed by the recommended awardee and the ACFD prior to any services and goods being provided or work being performed. The ACFD will negotiate a Professional Services Agreement, including all terms and conditions, with the Successful Bidder. A Professional Services Agreement template is attached as Exhibit P.**

**(1) Any terms that are not acceptable to a Bidder must be identified on the Exceptions and Clarifications form in Exhibit A – Bid Response Packet.**

**The County is under no obligation to accept such exceptions and clarifications, and these may be the basis for disqualification.**

1. Alameda County’s current contract does not include CCT or NICU ambulance services. Would the ACFD shed light on its inclusion in this RFP?
   1. **The County assumes this component may be in the County Ambulance RFP and can be negotiated once confirmed.**
2. Is the Performance Security Bond meant to secure the Contractor’s obligations pursuant to its agreement with ACFD or ACFD’s obligations pursuant to its eventual agreement with the County?
   1. **ACFD will likely need to provide a security bond if awarded the County Ambulance RFP. In turn, the Contractor resulting from this RFP will need to provide a security bond to ACFD.**
3. Would the ACFD consider removing the joint and several/personal liability (Section 29 of the sample Professional Services Agreement)? Given the language, one could interpret that an individual would be personally liable for damages incurred in the contract.
   1. **The section will not be removed. Please see the answer to Question #28 above for additional information.**
4. The RFP seems to both forbid subcontracting (page 11 of 40) and require that 20% of the contract be subcontracted to a SLEB (page 7 of 33) while the SLEB language is crossed out of the sample Professional Services Agreement (Section 21 of the sample Professional Services Agreement).  Can the ACFD confirm if 20% of the contract is required to be subcontracted to a SLEB?
   1. **Please see the answer provided to Question #5 above.**
5. On page 24 it states that the maximum scoring for any RFP Is 550, however the scoring points provided add up to 110. Will the County please clarify the scoring for this proposal?
   1. **Page 23 of 40 of the RFP, Section J (EVALUATION CRITERIA / SELECTION COMMITTEE), Item 6, states:**

***Evaluation Scores. Proposals will be evaluated and scored on the zero to five-point scale within each Evaluation Criteria below. Scores for all Evaluation Criteria (see below) will then be added, according to their assigned weight (see below), to arrive at a weighted score for each proposal. A proposal with a higher-weighted total will be deemed of higher quality than a proposal with a lesser-weighted total.***

**The score for each criterion is multiplied by the weight. Collective, the Evaluation Criteria add up 100 points in *weight* (not score). Each criterion has a maximum score of five (5) points; so perfect scores across all criteria add up to 500 weighted points (or 5 \* 100). A weighted score of 550 is only achievable when including the maximum 10% preference points for a certified SLEB vendor.**

1. We seek clarification about the applicability and usage of the Small Local Emerging Business language. While SLEB was discussed during the October 20, 2022 bidders conference and a SLEB information sheet was included in the RFP (RFP pg. 54), the draft contract language included in the RFP packet has SLEB language struck through (RFP pg. 91). Given the conflicting written information, will the County please clarify in the SLEB language will be included in this RFP or if a waiver will be issued?
   1. **Please see the answer provided to Question #5 above. In addition, the SLEB Participation language in the Exhibit P should not have been stricken.**
2. Should the language requiring 20% of the work to be subcontracted to a SLEB be included, we see two potential issues and seek clarification, a waiver, and additional language from the County.

First, the services are of a unique a specialized nature, that is, 911 emergent ambulance services. Specific quality standards, consistency, and uniformity of operations are essential. Second, the existing 911 ambulance workforce performing approximately 100% of the proposed services is covered by a local union – NAGE Local 510. Subcontracting 20% of the existing work to a subcontractor may result in fewer union jobs or a situation where multiple unions are providing the same services each with separate pay, benefits, and working conditions.

* 1. **Please see the answer provided to Question #5 above.**

1. In RFP Exhibit A, page 20 of 32, the Qualifications and Experience section requests a list of all current and previous contracts,” as well as “copies of the organization’s ethical standards, confidentiality policies,” etc. Can the County confirm if these lists and document attachments will count against the suggested maximum length of 5 pages?
   1. **The suggested maximum length is just a *suggestion*. Bidders, however, should provide all the information requested in the RFP and Exhibit A – Bid Response Packet.**

**Bidders are reminded that Proposals should be straightforward and concise. Proposals shall be prepared simply and economically, avoiding the use of elaborate promotional material beyond those sufficient to provide a complete, accurate, and reliable presentation.**

1. In RFP Exhibit A, page 23 of 32, the Staffing section states, “Suggested Maximum Length: 15 pages (not including resume and/or CV and Table(?)).” Can the County confirm if the resumes and key personnel table will count against the suggested maximum page limit?
   1. **Résumés, CVs, and the Table do NOT count against the suggested maximum page limit.**
2. General Question: We understand that the Contract Ambulance will be controlled by the ACFD. Who is responsible for system deployment plans and system status management?
   1. **ACFD will determine the deployment plan as well as the system status plan. However, the Contractor will be expected as the partner agency to assist in the development of the final plan.**
3. General Question: The current county contract includes potential monetary penalties for noncompliance and/or lack of performance to certain criteria. Should the future county contract include these types of financial penalties, who would be responsible for paying them, ACFD, or the Contractor?
   1. **For any penalties incurred under the County Ambulance RFP contract that are a result of noncompliance and/or lack of performance by the ACFD’s subcontractor (i.e., the Successful Bidder of this RFP), ACFD intends to contractually obligate its subcontractor to pay those penalties. If ACFD does have to pay such penalties directly to the County, then ACFD will assess and recoup such monetary penalties from its subcontractor.**
4. STATEMENT OF WORK Section E – REQUIREMENTS OVERVIEW states: *Contractor shall provide adequate staffing for approximately 1,150 unit hours per day with one (1) Paramedic (EMT/P) and one (1) Emergency Medical Technician (EMT) per ambulance.*

Does the estimated 1150 daily unit hours reflect what the expected maximum number of unit hours will be?

* 1. **The 1,150 daily unit hours is considered the base number of hours to service the system for purposes of responding to this RFP. Once the County Ambulance RFP is released, these numbers may be adjusted as needed for the final deployment.**

1. STATEMENT OF WORK Section E – REQUIREMENTS OVERVIEW states: *Contractor shall provide adequate staffing for approximately 1,150 unit hours per day with one (1) Paramedic (EMT/P) and one (1) Emergency Medical Technician (EMT) per ambulance.*

If 1150 daily unit hours per day is not the maximum, what would the maximum number of unit hours be?

* 1. **Please see the answer provided to Question #40 above.**

1. STATEMENT OF WORK Section E – REQUIREMENTS OVERVIEW states: *Contractor shall provide four (4) 24-hour Field Supervisors strategically located throughout the service area.*

Are these Supervisors to be staffed on 24 hour shifts, or on 12 hour shifts with 24 hours per day of coverage?

* 1. **The expectation is that there are four (4) field Supervisors on duty each day. Bidders should provide their staffing plan to meet the 24-hour staffing for these positions.**

1. STATEMENT OF WORK Section E – REQUIREMENTS OVERVIEW states: *Contractor shall provide one (1) critical care ambulance (CCT) staffed with one (1) EMT and one (1) Registered Nurse (RN) 24 hours per day/7 days a week; and*

Why is CCT included as a part of this RFP/plan for services?

* 1. **The County assumes this component may be in the County Ambulance RFP and can be negotiated once confirmed.**

1. STATEMENT OF WORK Section E – REQUIREMENTS OVERVIEW states: *Contractor shall provide one (1) EMT staffed neonatal CCT 24 hours per day/7 days a week.*

Why is neonatal CCT included as a part of this RFP/plan for services?

* 1. **The County assumes this component may be in the County Ambulance RFP and can be negotiated once confirmed.**

1. Section F – GENERAL REQUIREMENTS states: *Time Standards. For any Agreement resulting from this RFP, Contractor shall have and maintain a one hundred percent (100%) compliance to the response time standards specified to all areas of ACFD and its operational areas*.

In Section G, SPECIFIC REQUIREMENTS, The RFP states that the Contractor must meet the time standards at a compliance rate of 90%. Will the expectation be 100%, or 90%?

* 1. **Whatever the County Ambulance RFP requires, the Contractor will have to meet those requirements 100% of the time. Issues regarding deployment compliance and responsibility are addressed above.**

1. Section G – SPECIFIC REQUIREMENTS states: *Contractor shall ensure that employees have the appropriate PPE that meets national safety standards for EMS personnel, including helmet, reflective vest, eye protection, and ear/hearing protection.*

What is currently required for employee PPE and are there any changes to what is expected to be required in the new County Contract? Can a complete list of PPE be provided?

* 1. **A complete list cannot be provided. Bidders—and the eventual Contractor—must meet the ACFD and County Ambulance RFP requirements to whatever is more. However, the minimum standard will be the one listed above.**

1. Section G – SPECIFIC REQUIREMENTS states: *Contractor may use any type ambulance in its fleet for contract purposes so long as it meets or exceeds the requirements of the California Highway Patrol, the California Department of Motor Vehicles, the United States Department of Transportation, and the Alameda County Emergency Medical Services Agency. All ambulances shall meet the standards of the California Code of Regulations, Title 13, Division 2, Chapter 5, Article 1. All vehicles are subject to the approval of ACFD.*

Is there a vehicle type that is envisioned, or preferred for service? (example: Type 1 vs Type 2 vs Type 3)

* 1. **The County does not have a preference as current supply chain logistics will dictate what is available.**

1. COUNTY PROCEDURES, TERMS AND CONDITIONS Section J – EVALUATION CRITERIA / SELECTION COMMITTEE states: *The final maximum score for any procurement is 550 points, including the possible 50 points for local and small, local and emerging, or local preference points (maximum 10% of the final score; derived from 5% for local preference and 5% for either Small and Local or Emerging and Local preference). Proposals will be ranked by their final scores.*

The point total in the Evaluation Criteria is 100 points, is the total 100, or is there another equation/methodology to get to the 500 total (excluding the 50 points for SLEB)?

* 1. **Please see the answer provided to Question #33 above.**

VENDOR BID LIST

**RFP No. 902216**

**for**

**Advanced Life Support (ALS) Ambulance Transport Services**

This Vendor Bid List is being provided for informational purposes to assist bidders in contacting other businesses as needed to develop local small and emerging business subcontracting relationships to meet the [Small Local Emerging Business (SLEB) Program](https://gsa.acgov.org/do-business-with-us/vendor-support/small-local-and-emerging-businesses/) requirement.

This RFP is being issued to all vendors on the Vendor Bid List; the following revised vendor bid list includes contact information for each vendor attendee at the Networking/Bidders Conferences.

| **Business Name** | **Contact Name** | **Phone** | **Address** | **City** | **ST** | **Email** |
| --- | --- | --- | --- | --- | --- | --- |
| America Ambulance | Todd Valeri | 559-269-3265 | 555 N. Halifax | Clovis | CA | todd@americanambulance.com |
| American Medical Response | Bruce Lee |  | 841 LaTour Court | Napa | CA | Bruce.Lee@amr.net |
| American Medical Response | Ignacio De La Fuente | 510-219-9676 | 433 Hegenberger, Ste. A | Oakland | CA | Idelafuente2012@gmail.com |
| American Medical Response | Thomas Wagner | 209-548-8008 | 2400 Bisso Lane | Concord | CA | thomas.wagner@amr.net |
| American Medical Response | John Rey Hassan | 415.794.9204 | 13992 Catalina Street, | San Leandro | CA | Johnrey.hassan@gmr.net |
| Baker MedFirst | Tom Baker | 510-688-8270 | 350 Townsend, #784 | S.F. | CA | tom.baker@thebakergroupsf.com |
| California Ambulance Assoc. | Ross Elliott | 916-239-4095 | 2520 Venture Oaks Way, #150 | Sacramento | CA | relliott@the-caa.org |
| California Ambulance Assoc. |  | 916-239-4095 | 2520 Venture Oaks Way, #150 | Sacramento | CA | info@the-caa.org |
| DocGo, Inc. | Andrea Morris | 347-831-8068 | 35 W35th St. | New York | NY | Andrea.morris@docgo.com |
| Falck Northern California | Troy Hagen | 714-980-3136 | 28333 Industrial Blvd. | Hayward | CA | troy.hagen@falck.com |
| Falck Northern California | David Torres | 510-506-2468 | 28333 Industrial Blvd | Hayward | CA | david.torres1@falck.com |
| Falck Northern California | Ben Baker |  | 28333 Industrial Blvd | Hayward | CA |  |
| Falck Northern California | Julian Dewberry | 714-867-4094 | 28333 Industrial Blvd | Hayward | CA | Julian.dewberry@falck.com |
| Falcon Critical Care Transport | Brian Johnson | 510-815-6121 | 3508 San Pablo Dam Rd. | El Sobrante | CA | bjohnson@falconcct.com |
| Global Medical Response (GMR) American Medical Response (AMR) | Talma Carstarphen |  | 720 Bayfront Pkwy, #100 | Pensacola | FL | Talma.carstarphen@gmr.net |
|
| Johan Klehs & Company, Inc. representing Paramedics Plus | Johan Klehs | 916-551-1881 510-409-5292 | 1415 L Street, #620 | Sacramento | CA | johanklehs@klehs.com |
| LIFEwest Ambulance | Sean Sullivan | 707.974.8646 | 5460 Skylane Blvd., Ste A | Santa Rosa | CA | sean@lifemedholdings.com |
| Medic Ambulance | James Pierson | 707-664-1761 x4122  707-301-8467 | 506 Couch Street | Vallejo | CA | jpierson@medicambulance.net |
| Paramedics Plus | Rob Lawrence | 510-423-8829 | 575 Marina Blvd. | San Leandro | CA | rlawrence@paramedicsplus.com |
| Paramedics Plus | Ron Schwartz | 903-535-5855 903-571-8232 | 352 S. Glenwood | Tyler | TX | rschwartz@etmc.org |
| Priority Ambulance | Glenn Leland | 865-207-0121 | 9721 Cogdill Rd. | Knoxville | TN | gleland@priorityambulance.com |
| Strategic EMS Consulting | Mr. Hendy |  |  |  |  | jeh@strategicemsconsulting.com |