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- ' '	EMERGENCY MEDICAL SERVICES AGENCY	

Written Questions Received for RFP# MVEMS-2019-8

10/3/2019				
Question Number	Date Submitted	Document Reference / Topic	Question	Response
1		Page 33- 6.5 Vehicles A. 4 The use of Automatic Vehicle Locators (AVLs),	It mentions required although this will be a first time for this technology in our area (East Zone) and will likely evolve into a reliable product in time, we assume there is a reasonable expectation to roll in this new technology?	It is the intent of this RFP that the successful proposer(s) will implement this requirement at the start of the new agreement. MVEMSA understands there will need to be a collaborative effort with Sheriff Information Technology and the Dispatch Center to enable MTC's and AVL's to fully function. MVEMSA is committed to work with the successful proposers and the Sheriff's Department to develop a timetable for this new integration.
2		Page 33- 6.5 Vehicles A. 8 Ambulance shall be limited to a maximum mileage of 250.000.	Does this apply to all ambulances including reserves too? Our fleet does not have any ambulances over this amount although it seems like a good idea to ask for planning purposes.	The ambulance mileage limit is for all licensed ambulances used in Calaveras County.
3		fee for Technology and Equipment upgrade Fund.	We can see the proposed ambulance rates on page 79 establishes the addition of \$1 per mile for billing. Our concern is the collection rate of billings are much lower than 100% based on payor mix. Perhaps some sort of offset to be applied?	MVEMSA created a Technology and Equipment Upgrade Fund to assist with the procurement of new equipment for Calaveras County. The successful proposer(s) is required to charge a fee of and contribute \$1.00 per transport mile, adjusted by the actual annual marginal collection rate, to the fund.
4		Fire.	First Watch/First Pass to be utilized by Fire First Responders. Paid by whom? Is this figure included in the table shown in annual costs for Section 6.3 \$7,710.40?	The fire agency is responsble for the costs associated with FirstWatch data integrations, includes; dispatch, ePCR and FirstPass. MVEMSA will assist in researching possible funding sources. These costs are not included in the table that only identifies the ongoing support and maintainance in obtaining ambulance data.
5			Does this include ALS supplies, medications and narcotics that are purchased under the proposer's physician license?	The restock with fire agencies is intended for disposable medical supplies only.
6	, ,	Section 1.8 IFTs. It is recommended that Proposers consider utilizing nonsystem units for IFTs going out of county. Currently, all IFTs go out of county.	Please define "non-system units".	A system unit is defined as a regularly scheduled 9-1-1 ambulance. The term non-system unit is defined as a reserve, on-call ambulance or dedicated IFT ambulance.

7	10/3/2019	Section 1.8 IFTs: Immediate transfers are listed as "Red Box Trauma". This language is used in other systems (i.e San Mateo) but not MVEMSA.	Please define red box trauma or clarify with language consistent in MVEMSA policy language.	Reference to Red Box is a triage criteria used at the hospital to determine if a stat transfer is required.
8		Section 6.3 System requirements. The annual support/maintenance costs of \$7,710.40	Please clarify if this cost is per zone or county wide? If county wide, is the cost divided by 3?	The costs associated with FirstWatch ePCR and FirstPass annual support/maintenance is identified by data source. However, the cost for CAD/OCU would be evenly split by zone.
9	10/3/2019	are measured in whole minutes and seconds.	If not, how will response times of 11:59 seconds (etc.) be determined? Will times be rounded to the whole minute of 12 minutes? Will all times from the CAD system be capable of exporting to the ePCR program along with the response grid?	Calaveras CAD data is represented in the format HH:MM:SS. We encourage the Proposer to collaborate with MVEMSA and Calaveras Sheriff Office (SO) to determine the feasibility of SO CAD dispatch data auto-populating to the provider's ePCR platform, Proposer shall be responsible for all integration costs.
10	10/3/2019		Does the provider have to apply for a Special Event coverage through MVEMSA (policy 460.00) and pay fees when providing standby services at an event within its own EOA?	No
11			Do you have an estimated cost for the AVL/MDT system?	The Proposer will need to determine this cost as part of their response to the RFP. During the Proposer's Conference MVEMSA can provide a quote obtained from existing vendor to assist proposer in cost estimation.
12	10/3/2019		Bariatric is desirable, explain how to accommodate a patient to 1000lbs. How is a "desired" requirement scored?	The Proposal Review Committee will evaluate and determine how each proposer responds to their ability to transport a morbidly obese patient.
13	10/3/2019	Section 6.8 B.3. Maximum unit hour utilization for 24-hour ambulance units shall not exceed 0.40.	Is this measured on a daily, weekly or monthly basis?	For the purpose of this section, UHU is measured for a 24-hour shift.
14	10/3/2019	Section 6.8 G.3.	Refers to Exhibits 10 and 11) These Exhibits refer to Rates and Operating Budget.	Please refer to Investigative Authorization - Company Exhibit 7 and Investigative Authorization - Individual Exhibits 8.
15	10/3/2019	Section 6.13 A.1.	Refers to Enclosure 12?	Please refer to Exhibit 10, Proposed Ambulance Rates.
16		Section 6.13 A.2	Refers to Enclosure 13?	Please refer to Exhibit 10, Proposed Ambulance Rates.
17	10/3/2019	·	Does this include billings to Medicare, Medi-Cal and other governmental regulated rates?	It is up to each proposer how to set up their billing system to capture this requirement. It is understood that government payers will not reimburse this additional charge. Please see response to question #3 for additional detail.
18		Section 6.13 B.7.	Refers to Enclosure 14?	Please refer to Exhibit 11, Proposed Operating and Start-up Budget.
19	10/3/2019		It has been determined by MVEMSA that mental health transports are "Inter-Facility Transfers". Thus, the only way to transport a mental health patient and be in compliance with MVEMSA policy is to utilize a BLS or ALS ambulance.	MVEMSA is open to policy modifications based on innovative solutions to this issue.

20		Exhibit 4 Response Time Liquidated Damages. B.,D. & I. state that the	Section 6.3 A.2.b. defines the measurement period as any complete month or accumulation of months in which the	Response time are measured by a compliance period which is a total of 250 calls or twelve month period.
		penalties are "monthly".	total number of calls in a response area equals or exceeds	250 cans of twelve month period.
			250 or a twelve month period. Please clarify?	
21	10/3/2019	Exhibit 4 Response Time Liquidated	Why are penalties collected being utilized for Stanislaus	Collected penalties will be utilized to establish a System Enhancement
		Damages. J.1.	County? Also J.2., refers to policy 951.20 which is a	Fund for Calaveras County. See addendum #1. MVEMSA will create a
			Stanislaus County policy.	policy for Calaveras County in support of these efforts.
22	10/3/2019	Exhibit 12	Please clarify the purpose of certification of Section 504.	This is a standard form to ensure contractors are compliant to Federal
			The purpose of this part is to effectuate section 504 of	requirements.
			the Rehabilitation Act of 1973, which is designed to	
			eliminate discrimination on the basis of handicap in any	
			program or activity receiving Federal financial assistance.	
			Are you saying that Medicare is a form of financial	
			assistance?	
23	10/3/2019		Are there any other costs associated with this RFP?	Costs associated with this ambulance RFP have been identified. There
			Monitoring Fees? Ambulance Provider Fees? Etc.? If so,	may be additional costs for operating an ambulance business in
			please provide estimated costs.	Calavares County.