

**NOTICE - TOWNSHIP OF PLYMOUTH TOWNSHIP REQUEST FOR PROPOSALS**  
**EMERGENCY MEDICAL SERVICES**

The Charter Township of Plymouth will receive sealed proposals for Emergency Medical Services according to the attached specifications.

Sealed proposals will be received until 4:00 P.M. prevailing Eastern Time, Friday, August 31, 2018 at which time proposals will be opened and read. Proposals shall be addressed as follows and delivered to:

**TOWNSHIP OF PLYMOUTH**  
**CLERK'S OFFICE**  
**9955 North Haggerty Rd. Plymouth Township, MI 48170**

OUTSIDE OF MAILING ENVELOPES/PACKAGES MUST BE PLAINLY MARKED "**EMERGENCY MEDICAL SERVICES RFP**" AND MUST BEAR THE NAME OF THE PROPOSER.

The Township reserves the right to accept any or all alternative proposals and award the contract to other than the lowest proposer, to waive any irregularities or informalities or both; to reject any or all proposals; and in general to make the award of the contract in any manner deemed by the Township, in its sole discretion, to be in the best interest of the Township.

Jerry Vorva  
Township Clerk

Notice dated: Thursday, July 13<sup>th</sup> 2018

**NOTICE TO PROPOSERS:**

Plymouth Township officially distributes RFP documents through the Michigan Intergovernmental Trade Network (MITN). **Copies of RFP documents obtained from any other source are not considered official copies.** Plymouth Township cannot guarantee the accuracy of any information not obtained from the MITN website and is not responsible for any errors contained by any information received from alternate sources. Only those vendors who obtain RFP documents from the MITN system are guaranteed access to receive addendum information, if such information is issued. If you obtained this document from a source other than the source indicated, it is recommended that you register on the MITN site, [www.mitn.info](http://www.mitn.info) and obtain an official copy.

**TOWNSHIP OF PLYMOUTH**  
**EMERGENCY MEDICAL SERVICES**  
**INSTRUCTIONS TO PROPOSERS**

This RFP is issued by the Township Clerk of Plymouth Township.

**IMPORTANT DATES**

**RFP Issue Date: Friday July 13<sup>th</sup> 2018**

**Last Date for Questions: Friday August 24<sup>th</sup> 2018**

**Response Due Date: Friday August 31<sup>st</sup> 2018**

**Anticipated Award Date: Friday October 26<sup>th</sup> 2018**

**Anticipated Effective Date of Contract: Tuesday January 1<sup>st</sup> 2019**

**QUESTIONS**

Please email all questions to Fire Chief Dan Phillips at [dphillips@plymouthtwp.org](mailto:dphillips@plymouthtwp.org) or call 734-354-3221. Please put the name of the Bid/RFP in the subject line, otherwise your email may be deleted as spam.

**PROPOSAL SUBMITTALS**

An **ORIGINAL and Seven (7) copies** of each proposal must be submitted to the Plymouth Township Clerk's Office. **Original may be clipped, but should not be stapled or otherwise bound.** No other distribution of the proposals will be made by the Contractor. Proposals must be signed by an official authorized to bind the Contractor to its provisions.

FAILURE TO SUBMIT PRICING ON THE PROPOSAL FORM PROVIDED BY PLYMOUTH TOWNSHIP MAY CAUSE THE BID TO BE CONSIDERED NON-RESPONSIVE AND INELIGIBLE FOR AWARD.

**CHANGES TO THE RFP/ADDENDUM**

Should any prospective Proposer be in doubt as to the true meaning of any portion of the Request for Proposal, or should the Proposer find any patent ambiguity, inconsistency, or omission therein, the Proposer shall make a written request (via email) for official interpretation or correction. Such request shall be submitted to the specified person by the date listed above. The individual making the request shall be held responsible for its prompt delivery.

Such interpretation or correction, as well as any additional RFP provisions that the Township may decide to include, will be made as an addendum, which will be posted on the MITN website at [www.mitn.info](http://www.mitn.info). Any addendum issued by the Township shall become part of the RFP and shall be taken into account by each proposer in preparing their proposal. Only written addenda are binding. It is the Proposer's responsibility to be sure they have obtained all addenda. Receipt of all addenda must be acknowledged on proposal form.

### **SUBMISSION OF PROPOSALS**

Proposals must be submitted in a sealed envelope. Outside of mailing envelope must be labeled with name of contractor and name of RFP. Failure to do so may result in a premature opening or failure to open such proposal.

To be considered, sealed proposals must arrive at the Plymouth Township Clerk's Office, on or before the specified time and date. There will be no exceptions to this requirement. Proposal is considered received when in the possession of the Township Clerk. Contractors mailing proposals should allow ample time to ensure the timely delivery of their proposal. Proposals received after the closing date and time will not be accepted or considered. Faxed, emailed, or telephone bids are not acceptable. Plymouth Township shall not be held responsible for lost or misdirected proposals. The Township reserves the right to postpone an RFP opening for its own convenience.

Proposals must be clearly prepared and legible and must be signed by an Authorized Representative of the submitting Company on the enclosed form. Proposals must show unit and total prices. **ANY CHANGES MADE ON PROPOSAL FORMS MUST BE INITIALED OR YOUR PROPOSAL MAY BE CONSIDERED NON-RESPONSIVE.**

A proposal may be withdrawn by giving written notice to the Township Clerk before the stated due date/closing time. After the stated closing time, the bid may not be withdrawn or canceled for a period of One Hundred and Twenty (120) days from closing time.

Proposers are expected to examine all specifications and instructions. Failure to do so will be at the proposer's risk.

Failure to include in the proposal all information requested may be cause for rejection of the proposal.

Any samples, CDs, DVDs or any other items submitted with your proposal will not be returned to the contractor.

No proposal will be accepted from, or contract awarded to any person, firm, or corporation that is in arrears or is in default to the Township Plymouth Township upon any debt or contract, or that is in default as surety or otherwise, or failed to perform faithfully any previous contract with the Township.

USE OF PLYMOUTH TOWNSHIP LOGO IN YOUR PROPOSAL IS PROHIBITED.

### **RESPONSIVE PROPOSALS**

All pages and the information requested herein shall be furnished completely in compliance with instructions. The manner and format of submission is essential to permit prompt evaluation of all proposals on a fair and uniform basis. Unit prices shall be submitted if space is provided on proposal form. In cases of mistakes in extension, the

unit price shall govern. Accordingly, the Township reserves the right to declare as non-responsive, and reject an incomplete proposal if material information requested is not furnished, or where indirect or incomplete answers or information is not provided.

### **EXCEPTIONS**

The Township will not accept changes or exceptions to the RFP documents/specifications unless Contractor indicates the change or exception in the "Exceptions" section of the proposal form. If Contractor neglects to make the notation on the proposal form but writes it somewhere else within the RFP documents and is awarded the contract, the change or exception will not be included as part of the contract. The original terms, conditions and specifications of the RFP documents will be applicable during the term of the contract.

### **CONTRACT AWARD**

The contract that will be entered into will be that which is most advantageous to the Township, prices and other factors considered. The Township reserves the right to accept any or all alternative proposals and to award the contract to other than the lowest proposer, waive any irregularities or informalities or both, to reject any or all proposals, and in general, to make the award of the contract in any manner deemed by the Township, in its sole discretion, to be in the best interests of the Township.

After contract award, notification will be posted on the MITN website at [www.mitn.info](http://www.mitn.info).

### **SELECTION PROCESS**

This document is a Request for Proposals. It differs from an Invitation to Bid in that the Township is seeking a solution as described herein, and not a bid meeting firm specifications for the lowest price. As such the lowest price will not guarantee an award recommendation.

Competitive sealed proposals will be evaluated based on criteria formulated around the most important features of the service, of which qualifications, experience, and methodology, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a contractor's approach meets the desired requirements of the Township. Those criteria that will be used and considered in evaluation for award are set forth in this document. The Township will thoroughly review all proposals received. A contract will be awarded to a qualified contractor submitting the best proposal.

### **EVALUATION**

The Township reserves the right to require bidders to meet all specified requirements. The initial pass/fail evaluation will be made by the Township board.

The evaluation and award of this proposal shall be a combination of factors including, but not limited to, professional competence, references, and the correlation of the proposal submitted to the needs of the Township and any other factors considered to be in the best interest of the Township.

The Township reserves the right to award the proposal to one master contract provider

who can provide the highest level of service at the lowest cost to the Township. The Township reserves the right to reject proposals which contain major deviations from specified requirements; to accept a proposal which has only minor deviations from specified requirements.

**AWARD**

Prices quoted shall remain firm for One Hundred Twenty (120) days or proposal award, whichever comes first except the successful provider whose prices shall remain firm for the entire contract period of three years.

**CONTRACT CANCELLATION DUE TO POOR PERFORMANCE**

Due to the emergency nature of the services to be provided, and in the event that the service provider does not or cannot perform to mutually decided criteria, the Township reserves the right, at their sole discretion, to cancel the contract and/or employ as necessary other companies or additional companies and/or municipal personnel as necessary.

**FINANCIAL REPORT**

The Township, at their discretion, may require the service provider to supply a Financial Report from an impartial Financial Credit Reporting Service before award of contract.

**GENERAL CONDITIONS**

**TAX EXEMPT STATUS**

It is understood that the Township is a governmental unit, and as such, is exempt from the payment of all Michigan State Sales and Federal Excise taxes. Do not include such taxes in the bid prices. The Township will furnish the successful proposer with tax exemption certificates when requested.

**TRANSFER OF CONTRACT/SUBCONTRACTING**

The successful proposer will be prohibited from assigning, transferring, converting or otherwise disposing of the contract agreement to any other person, company or corporation without the expressed written consent of the Township. Any subcontractor, so approved, shall be bound by the terms and conditions of the contract. The contractor shall be fully liable for all acts and omissions of its subcontractor(s) and shall indemnify the Township for such acts or omissions.

**NON-DISCRIMINATION**

In the hiring of employees for the performance of work under this contract, neither the contractor, subcontractor, nor any person acting in their behalf shall by reason of religion, race, color, national origin, age, sex, height, weight, handicap, ancestry, place of birth, sexual preference or marital status discriminate against any person qualified to perform the work required in the execution of the contract.

**ACCEPTANCE OF PROPOSAL CONTENT**

Should a contract ensue, the contents of the proposal of the successful Proposer may become contractual obligations. Failure of a contractor to accept these obligations may result in cancellation of the award.

## **DISCLOSURE**

All documents, specifications, and correspondence submitted to Plymouth Township become the property of Plymouth Township and are subject to disclosure under the provisions of Public Act No. 442 of 1976 known as the "Freedom of Information Act".

This Act also provides for the complete disclosure of contracts and attachments hereto. This means that any informational material submitted as part of this RFP is available without redaction to any individual or organization upon request.

## **ECONOMY OF PREPARATION**

Proposals should be prepared simply and economically, providing a straightforward and concise description of the contractor's ability to meet the requirements of the bid. Emphasis should be on completeness and clarity of content. Included in the response must be a point by point response to the Requirements and other sections of the bid.

The Township is not liable for any costs incurred by proposers prior to issuance of a contract.

## **MATERIAL SAFETY DATA SHEETS (MSDS)**

All Township purchases require a Material Safety Data Sheet, ("MSDS"), where applicable, in compliance with MIOSHA "Right To Know" law. The MSDS must include the following information:

1. The chemical name and the common name of the toxic substance.
2. The hazards or other risks in the use of the toxic substance, including:
  - a) The potential for fire, explosion, corrosivity, and reactivity;
  - b) The known acute and chronic health effects of risks from exposure, including the medical conditions which are generally recognized as being aggravated by exposure to the toxic substance; and
  - c) The primary routes of entry and symptoms of overexposure.
3. The proper precautions, handling practices, necessary personal protective equipment, and other safety precautions in the use of or exposure to the toxic substances, including appropriate emergency treatment in case of overexposure.
4. The emergency procedure for spills, fire, disposal, and first aid.
5. A description in lay terms of the known specific potential health risks posed by the toxic substance intended to alert any person reading this information.
6. The year and month, if available, that the information was compiled and the name, address, and emergency telephone number of the manufacturer responsible for preparing the information.

## **INDEPENDENT PRICE DETERMINATION**

By submission of a proposal, the offerer certifies, and in case of a joint proposal, each party hereto certifies as to its own organization, that in connection with the proposal:

- (a) The prices in the proposal have been arrived at independently without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other offerer or with any other Competitor; and
- (b) No attempt has been made or will be made by the offerer to induce any other person or firm to submit or not submit a proposal for the purpose of restricting

competition.

Each person signing the proposal certifies that:

- (c) He is the person in the offerer's organization responsible within that organization for the decision as to prices being offered in the proposal and that he has not participated and will not participate in any action contrary to (a) and (b) above; or
- (d) He is not the person in the offerer's organization responsible within that organization for the decision as to prices being offered in the proposal but that he has been authorized in writing to act as agent for the persons responsible for such decisions in verifying that such persons have not participated, and will not participate, in any action contrary to (a) and (b) above, and that as their agent, does hereby so certify; and that he has not participated, and will not participate in any action contrary to (a) and (b) above.

A proposal will not be considered for award if the sense of the statements required in the proposal has been altered so as to delete or modify the above.

**Anticipated Services:** Plymouth Township is soliciting proposals from qualified providers for the provision of advanced life support ambulance and related services on behalf of itself. Proposals shall encompass, at a minimum, advanced life support ambulance service for the Township.

#### **Response Times:**

##### **Eight (8) minute response time for Township of Plymouth**

The Company will provide ambulance(s) dedicated for service within, and located within, Plymouth Township limits at all times. **The Company guarantees Priority I service, emergency response by an ALS ambulance in eight (8) minutes or less 90% of the time**, twenty-four (24) hours a day, seven (7) days a week, three-hundred sixty-five (365) days a year **to Plymouth Township**. Except for extenuating circumstances, no response (Priority I) shall exceed twelve (12) minutes. Response time to non-emergency (Priority 3), or downgraded calls, shall be less than fifteen (15) minutes, 90% of the time and shall not exceed twenty (20) minutes, except for extenuating circumstances. The Company shall notify the Township within five (5) business days, in writing, of those responses that exceed the parameters of this Agreement.

**Definitions:** Priority 1 and Priority 3 definitions can be found in the attached Exhibit A (Health Emergency Medical Services, Inc.).

**Contract Term:** It is the intent of Plymouth Township to enter into contract with the provider that can provide the highest level of service at the lowest cost to the

municipality. The contract award shall be for a period of **two years**. The proposal shall include an implementation schedule which shall commence on January 1<sup>st</sup> 2018.

**Contract Termination:** The contract shall contain a termination provision enabling the Township to terminate the contract upon written notice for cause, as well as an indemnification provision that indemnifies the Township, its elected officials, and its employees from any acts of the provider, along with the necessary insurance coverage. A response to this RFP may include a draft contract.

**Desired System:** The desired system will consist of advanced life support ambulances for transportation that will be assigned to and operate from the Township. In order to assure continuity of care, it is anticipated that one provider will be chosen to provide advanced life support ambulance service.

**Historical Call Volume:** Please see Exhibit A for Historical Call Volume for the Township.

## **SECTION II: OPERATIONAL REQUIREMENTS – AMBULANCE SERVICE**

The following are the operation requirements for the ambulance service component of the system.

The proposal response must include an answer to each individual item below. Your response should be concise and complete and use the lettering system & section title as provided. The Township reserves the right to eliminate from consideration any proposal incomplete or not organized as required.

- A. Exclusive Private Provider** - A sum certain to be paid annually to the Township for the exclusive right to be the private EMS provider (Note: the Township Fire Department will continue to provide its services) (MCL 333.20948)
- B. Response time** – The Township standard will be eight (8) minutes for 90% of Priority 1 responses.  
Response time criteria shall not apply to incidents that are dispatched as non-emergency (Priority 3) or downgraded to non-emergency prior to the arrival of the ambulance. There shall also be consideration given for area wide weather emergencies including but not limited to: snowstorms, ice storms, high winds, etc.
- C. Deployment plan** – The provider shall include in its initial proposal a proposed deployment plan, indicating the number of units required to meet the response time standard and the backfill (move up) strategy. The deployment plan shall specify the required unit coverage by hour and day of the week. A data prediction for service to incorporate into the deployment model is preferred.
- D. Licensure** – The provider's service area, vehicles, and personnel shall be appropriately licensed including those specifically required by the Michigan Department of Consumer and Industry Services. **A copy of your company's State of Michigan license to provide services in Michigan is required.**



- E. Advanced Life Support** – All ambulances utilized by the provider shall be capable of providing advanced life support in accordance with the Health Emergency Medical Services, Inc. And each ALS ambulance will be staffed by two licensed paramedics.
- F. Vehicles** – Providers shall include in their proposal the specific information for the vehicles they propose to utilize including age, type, and mileage. All vehicles shall be maintained in safe operating condition. Vehicle chassis over 5 years old are not acceptable. Maintenance logs shall be maintained for each vehicle and be available for inspection. Providers shall indicate what preventative maintenance programs are in place and shall indicate the number of “critical vehicle failures” per 100,000 miles driven for the last three years. Providers shall include the procedure their company uses to maintain and repair their vehicles including how, when, and where the vehicles are serviced.
- G. Reports** – Response time summaries, by participating entity and by other geographic zones as may be designated, including the listing of all response time exceptions, shall be reported at least monthly. These reports shall include: compliance with response time standards in a format prescribed by the Township including the ability to sort by entity, and other geographic zones as may be designated; incidents of unit breakdowns, listing of calls referred to other agencies, “Level-O” time, mutual aid response times, call downgrades and other reports used to determine contract compliance. These reports may vary from month to month depending on specific issues that need to be addressed. In addition to hard copies as required, data shall be submitted to the Township in primarily electronic format. The provider shall also submit required information to each Township in a manner and format prescribed by that Township (i.e. compatibility with an information system prescribed by each Township). Non-compliance with this provision will be subject to contract termination based upon the 90 day notice provision.
- H. Monthly meetings** – A supervisory member of the provider’s staff shall participate in a monthly in-person meeting with the Plymouth Township Fire Chief to assess the effectiveness of the program and jointly review and address any issues or concerns.
- I. Personnel** – The provider shall perform a CCH (Complete Criminal History) on all of its Paramedics and Emergency Medical Technicians. Employees with a conviction for Criminal Sexual Conduct (CSC) or violation of the Controlled Substances Act shall not be allowed to work in the Township area. Employees with a conviction for theft or larceny within the last five (5) years shall not be allowed to work in the Township area.

The provider shall perform a Complete Driving History on all of its Paramedics and Emergency Medical Technicians in the beginning of the contract and continually through the engagement period, in advance of any new employee working in the Township. Employees with two or more convictions for Operating Under Influence of Liquor (OUIL), Unlawful Blood Alcohol Level (UBAL), Operating While Intoxicated (OWI), Operating While Visibly Impaired (OWVI), Operating While Under the

Influence of Narcotic (OUIN), or any two or more convictions of any combination thereof, shall not be allowed to work in this area. Employees with a conviction for Operating under Influence of Liquor (OUIL), Unlawful Blood Alcohol Level (UBAL), Operating While Intoxicated, Operating While Visibly Impaired (OWVI), Operating While under the Influence of Narcotic (OUIN), in the last five years shall not work in this area.

The provider shall indicate how personnel are screened for motor vehicle operator records and what additional criteria are used for qualification and/or disqualification in the screening. All vehicle operators shall be required to attend a nationally recognized driver training program.

The provider shall notify the Health Emergency Medical Services, Inc. and the State Division of Emergency Medical Services if any of its Paramedics or Emergency Medical Technicians are criminally charged with any felony, or terminated from employment for any narcotic larceny or narcotic/alcohol use problem.

The provider shall agree to remove for cause an employee from the Township operating area upon written request of the fire or police chief.

- J. Drug Testing** – The provider shall have a random and probable cause drug testing program for all personnel operating in the Township area.
- K. Quality Assurance Program** – The provider shall provide a description of the quality assurance program in place to continually assess the quality of treatment by EMS personnel.
- L. Complaint Resolution** – In the event a complaint arises over the provision of emergency medical care, the procedure shall be as follows:
  - (1) The complaint shall be referred to the Township staff for investigation and review.
  - (2) In the event the complaint is not resolved, it shall be referred to the Quality Improvement committee of the Wayne County Medical Control Authority.
- M. Incident Command System** – The provider shall provide training on at least an annual basis for ambulance personnel operating in the Township area on their role and responsibilities within the framework of the Incident Command System.
- N. Hazardous Materials Training** – All ambulance personnel shall be trained to the hazmat first responder awareness level as designated by the Michigan Firefighters Training Council. The provider shall submit documentation of this training.
- O. Insurance** - A certificate of insurance naming the Township as an additional insured must be provided by the successful proposer prior to commencement of work. A current certificate of insurance meeting the requirements in Attachment A is to be provided to the Township and remain in force during the entire contract period.

**The cost of the additional insurance coverage must be included in the prices**

**quoted for the services to be provided. No additional cost for insurance will be accepted by the Township.**

A Certificate of Insurance on an ACORD Form showing present coverage must be included with your proposal.

**PLEASE HAVE YOUR INSURANCE COMPANY VERIFY BY MEANS OF A LETTER THAT YOUR COMPANY WILL MEET INSURANCE SPECIFICATIONS IF AWARDED A CONTRACT. YOUR COMPANY SHOULD SUBMIT THIS LETTER WITH YOUR PROPOSAL DOCUMENT.**

**Failure on the part of any bidder to contact his/her insurance carrier to verify that the insurance carried by the bidder meets Township specifications may result in this proposal being completed incorrectly.**

All coverage shall be with insurance carriers licensed and admitted to do business in Michigan and acceptable to the Township.

The "Service Provider" does warrant that by signing the proposal document, the "additional insured endorsement" will be included in the insurance coverage supplied to the Township as part of the specified requirements.

- P. Mutual Aid and Mass Casualty Preparedness** – The provider shall submit a mutual aid resource plan showing the average number of advanced ambulances that could be provided for **a back to back or multi-casualty incident, life-threatening disaster, or major emergency as determined by the Township**. This shall include typical response times based on average activity. The plan should include contingency planning for multiple back-to-back-incidents across the Township's geographic area.
- Q. Incident Standby** – The provider shall provide ambulance units as requested to standby at the scenes of fires, hazardous materials incidents, and fire training incidents as requested. These units shall not leave the incident unless released by the incident commander. The ambulance units shall assist in medical evaluation of emergency personnel as required.
- R. Communications** – The Advanced Life Support ambulances shall be equipped with mobile and portable communications equipment allowing them to communicate with; provider's dispatch, local medical first responder, and fire units. The providers shall indicate what backup systems exist to facilitate dispatch communications in the event of a failure of the primary radio transmitter.

The Company will provide the Township's Communication Center with access to Automatic Vehicle Locator (AVL) Systems to track their ambulances. Global Positioning System (GPS) Technology will increase accountability and promote greater awareness of the level of service provided by service areas throughout the Township. The AVL systems may be used to review vehicle positioning histories, identify locations of existing assets to improve dispatch efficiency, monitor appropriate vehicle usage, and report vehicle movements to pass on information to our Public Safety Team. The AVL technology will be used to improve the efficiency of emergency medical service delivery in the Township.

- S. Recording Capability** – The provider shall record all telephone and radio communications and retain the recordings for a minimum of one year.
- T. E-911 Interface** – The provider shall operate an Enhanced 911 (E-911) secondary PSAP capable of interfacing with all of the E-911 systems utilized by the Township to allow the transfer of E-911 calls including ANI/ALI information to minimize the time required to initiate a response.

- U. Emergency Medical Dispatch** – The provider shall utilize a nationally accepted telephone triage system and all dispatch personnel shall be certified in the program in use. Dispatchers shall provide pre-arrival emergency care instructions to the calling party when appropriate.
- V. Blood Borne Pathogen Decontamination Facility** – The provider shall make available a decontamination facility for Township police and fire personnel. This facility may be located at the provider's location and shall provide shower and laundry equipment in compliance with the applicable requirements. This facility shall be available on a 24 hour – 7 day a week basis with a 15 minute advance notification. Bidders shall specify the location and capability of their contamination facility.
- W. Disposal of Bio-Hazard Contaminated Waste** – The provider shall provide disposal service for any contaminated materials generated by the police or fire departments. Waste will be bagged and tagged with appropriate labels by Township personnel and forwarded to the provider for disposal.
- X. Base of Operations** – The provider shall identify the location(s) which are to serve as the base of operations for this program, including dispatch, administration, and fleet maintenance.
- Y. Restocking of Medical Supplies** – The provider shall provide a plan for restocking expendable medical supplies utilized by the fire department and the police department complies with Medicare/Medicaid reimbursement regulations and guidelines.
- Z. Charges** – The provider shall specify what ambulance user charges are to be assessed and include a current schedule of charges. The Township shall not be billed, nor will they be financially responsible for medical services rendered by the provider. A request for increased rates must be made at least thirty (30) days prior to the proposal effective date of the rate change.
- AA. Staffing Coverage** – Deployment plans specifying staffing coverage to meet the performance requirements for advanced life support (ALS) ambulance shall be included in the proposal.

## **INSURANCE REQUIREMENTS ATTACHMENT A**

The Contractor shall procure and maintain during the term of this contract, the insurance coverage outlined below. All coverage shall be with insurance companies licensed and admitted to do business in the State of Michigan. All coverage shall be with insurance carriers acceptable to the Township.

**WORKER'S COMPENSATION INSURANCE:** The Service Provider shall procure and maintain during the life of this contract, Worker's Compensation Insurance, including employer's liability in accordance with all applicable statutes of the State of Michigan.

**COMMERCIAL GENERAL LIABILITY INSURANCE:** The Service Provider shall procure and maintain during the life of this contract, Commercial General Liability Insurance on an "occurrence basis" with limits of liability of not less than **\$5,000,000** per occurrence and/or aggregate combined single limit, personal injury, bodily injury and property damage. Coverage shall include the following extensions: (A) Contractual Liability; (B) Products and Completed Operations Coverage; (C) Independent Contractors Coverage; (D) Broad Form General Liability Extensions or equivalent; (E) Annual contract aggregate applicable to this contract.

**MOTOR VEHICLE LIABILITY:** The Service Provider shall procure and maintain, during the life of this contract, Motor Vehicle Liability Insurance, including Michigan No-Fault Coverage, with limits of liability of not less than **\$5,000,000** per occurrence combined single limit Bodily Injury and Property Damage. Coverage shall include all owned, non-owned, and hired vehicles.

**AMBULANCE AND PROFESSIONAL MALPRACTICE LIABILITY:** The Service Provider shall procure and maintain during the life of this contract, Ambulance Professional Malpractice Liability Insurance in an amount of not less than **\$5,000,000** per occurrence and/or aggregate combined single limit for bodily injury and personal injury arising out of operations.

**ADDITIONAL INSURED:** Commercial General Liability Insurance, Motor Vehicle Liability Insurance, and Ambulance Professional Malpractice Liability Insurance as described above, shall include an endorsement stating the following as "Plymouth Township, its Township Council, its employees, all elected and appointed officials, all employees and volunteers, all boards, commissions and/or volunteers thereof are named as additional insured." Said coverage shall be primary coverage rather than any policies and insurance self-insurance retention owned or maintained by the Township. Policies shall be issued by insurers who endorse the policies to reflect that, in the event of payment of any loss or damages, subrogation rights under those contract documents will be waived by the insurer with respect to claims against the Township

**CANCELLATION NOTICE:** Worker's Compensation Insurance, Commercial General Liability Insurance, Motor Vehicle Liability Insurance and Ambulance Professional Liability Insurance, as described above, shall include an endorsement stating the following: "It is understood and agreed that Thirty (30) Days Advance Written Notice of Cancellation, Non-renewal, Reduction and/or Material Change shall be sent to Plymouth Township, 9955 N. Haggerty Rd., Plymouth Township, MI 48170."

**PROOF OF INSURANCE:** Upon Notice of Award, the service provider shall provide to the Township certificates of insurance and policies in full compliance with specifications as listed below:

1. Two (2) copies of the Certificate of Insurance for Worker's Compensation Insurance;
2. Two (2) copies of the Certificate of Insurance for Commercial General Liability Insurance;
3. Two (2) copies of Insurance for Vehicle Liability Insurance;
4. Two (2) copies of Certificate of Insurance for Ambulance Professional Malpractice Liability Insurance.
5. If so requested, Certified Copies of all policies mentioned above will be furnished.

Note: If any of the above coverages expire during the term of this contract, the service provider shall deliver renewal certificates of insurance to the Township at least ten (10) days prior to the expiration thereof.

**TOWNSHIP OF PLYMOUTH EMERGENCY MEDICAL SERVICES  
PROPOSAL FORM**

We the undersigned, as proposer, propose to furnish to Plymouth Township, according to the specifications, terms, conditions and instructions attached hereto and made a part thereof:

**IMPORTANT: The service provider must include an *Ambulance User Charge Schedule* with their proposal document to be considered for award.**

**INSURANCE:**

- (    )    We can meet the specified insurance requirements.
- (    )    We cannot meet the specified insurance requirements.
- (    )    We do not carry the specified limits but can obtain the additional insurance coverage.
  
- (    )    We have included the required copy of our current insurance certificate with our proposal submission.



**REFERENCES:**

Providers shall submit a complete reference list consisting of agencies to which your company has provided services similar to those requested by Plymouth Township (attach and mark REFERENCES for identification). List the three largest clients (by volume of runs) below.

AGENCY:			
ADDRESS:			
PHONE:		CONTACT:	
	<b>Ambulance Service:</b> ( ) Yes ( ) No <b>MFR:</b> ( ) Yes ( ) No		

AGENCY:			
ADDRESS:			
PHONE:		CONTACT:	
	<b>Ambulance Service:</b> ( ) Yes ( ) No <b>MFR:</b> ( ) Yes ( ) No		

AGENCY:			
ADDRESS:			
PHONE:		CONTACT:	
	<b>Ambulance Service:</b> ( ) Yes ( ) No <b>MFR:</b> ( ) Yes ( ) No		

**EXCEPTIONS TO SPECIFICATIONS (all exceptions must be noted here):**

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**COMMENTS:** \_\_\_\_\_

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**We acknowledge receipt of the following Addenda:** \_\_\_\_\_  
(please list addenda numbers)

**THIS PROPOSAL SUBMITTED BY:**

Company (Legal Registration) \_\_\_\_\_

Address \_\_\_\_\_

Township \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Authorized Representative's Name \_\_\_\_\_

Authorized Representative's Title \_\_\_\_\_

Signature \_\_\_\_\_

E-mail \_\_\_\_\_

Date \_\_\_\_\_

To the fullest extent permitted by law, the \_\_\_\_\_  
(Name of service provider)

agrees to defend, pay in behalf of, indemnify and hold harmless Plymouth Township, its Township Council, all elected and appointed officials, employees, volunteers, and others working on behalf of Plymouth Township against any and all claims, demands, suits, or loss, including all costs connected therewith, and for any damages which may be asserted, claimed or recovered against or from Plymouth Township, its elected and appointed officials, employees, volunteers or others working in behalf of Plymouth Township members by reason of personal injury, including bodily injury and death and/or property damage, including loss of use thereof, which arises out of or is in any way connected or associated with this contract.

**Signature of Authorized Representative** \_\_\_\_\_

*HEMS*  
**SYSTEM PROTOCOLS**  
GENERAL OPERATIONS

**Patient Prioritization**

1. Priority 1

- A. Critically ill or injured patient with an immediate life-threatening condition.
- B. Examples include, but are not limited to:
  - 1. Unstable or deteriorating vital signs
  - 2. Compromised airway
  - 3. Severe respiratory distress/failure
  - 4. Cardiac arrest or post cardiac arrest
  - 5. Stroke or STEMI
  - 6. GCS < 10
  - 7. Significant blunt or penetrating trauma including but not limited to:
    - a. Airway compromised
    - b. Respiratory distress
    - c. Signs of inadequate perfusion
- 8. Actively seizing patient

2. Priority 2

- A. Seriously ill or injured patient without immediate life-threatening Condition.
- B. Examples include, but are not limited to:
  - 1. GCS 11-14
  - 2. Medical conditions such as chest pain, suspected sepsis, respiratory distress without immediate threat to life.
  - 3. Altered level of consciousness, responding to verbal or painful stimuli
  - 4. Significant mechanism of injury in patient with stable vital signs

3. Priority 3

- A. Ill or injured patients not fitting the above two categories who require medical Attention and do not have a life-threatening problems.

Exhibit A

Historical Call Volume

<b>Year</b>	<b>EMS Runs</b>	<b>Patients</b>
2014	1754	1798
2015	1834	1903
2016	1501	1553
2017	1546	1605
2018*	636	612

\* partial year