

REQUEST FOR PROPOSALS AMBULANCE SERVICE OPERATIONS

The EDGAR COUNTY BOARD invites qualified firms to submit proposals to operate in SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT.

Proposal Requirements:

The EDGAR COUNTY BOARD (hereinafter "County") seeks to secure a contract for Emergency Medical Services at the Paramedic Level for SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT. The County invites proposals to be submitted to the County for the operation of Emergency Medical Services for SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT.

The successful bid should be considered as the lowest and most responsible bid. Bids are due by May 1, 2014 at 4:00 p.m. in the Edgar County Clerk's Office, located at 115 W. Court St., Room J, Paris, IL. Questions may be directed to the County Clerk at 217-466-7433. The County reserves the right to reject any and all bids.

Proposals should include the following minimums as part of the proposal:

1. Qualifications:

Contractor must have been in continuous business as a licensed Paramedic Ambulance Service provider in the State of Illinois for the last one (1) year and own a minimum of four (4) Paramedic ambulances and one (1) Paramedic assist vehicle that will be located in the SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT. The Contractor shall staff two (2) Paramedic ambulances 24 hours a day / 7 days a week and one (1) Paramedic equivalent level ambulance from 8 am to 5 pm Monday through Saturday.

2. Financial Stability

The County requests an approved line of credit of one hundred fifty thousand dollars (\$ 150,000.00) to insure financial stability and creditworthiness from a local financial institution to fulfill the contract.

3. Contract Period:

June 1, 2014 at 12:00 AM through May 31, 2019 at 11:59 PM.

4. Service Area:

Contractor to provide and furnish Emergency Medical Services at the Paramedic Level to SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT within the incorporated and unincorporated areas of all municipalities with in the following townships: Buck, Paris, Hunter, Stratton, Grandview, Symmes, and Elbridge.

5. Type of Service:

Contractor shall provide Emergency Medical Services for all of SPECIAL SERVICE AREA NO. 1 AMBULANCE DISTRICT regardless of the patient's

ability to pay. Contractor shall provide Paramedics licensed by the Illinois Department of Public Health and/or Basic EMT's licensed by the Illinois Department of Public Health. Each ambulance crew will consist of a minimum of two such individuals, only one of which may be a Basic EMT. All services provided under this Contract shall be provided with ALS ambulances.

6. Liability Insurance:

The Contractor is to furnish Professional Liability Insurance coverage in a minimum of \$ 2 Million Dollars. The County and SPECIAL SERVICE AREA NO. AMBULANCE DISTRICT shall be listed as additional insured. The Contractor will provide any other insurance as required by law, including but not limited to, Workman's Compensation Insurance.

7. Equipment:

The Contractor is required to maintain all equipment to provide Emergency Medical Services by following all rules and regulations in accordance with the FDA (Food and Drug Administration) standards. All of the Paramedic ambulances or response vehicles must have and maintain the ability to transmit 12 Lead EKG's to the appropriate receiving facility.

8. Vehicles:

The Contractor shall maintain all transport and non-transport vehicles in accordance with the manufactures recommendations. All vehicles shall be licensed by the Illinois Department of Public Health, and a copy of the licenses shall be provided.

9. Dispatch:

The County will provide 24 hour per day / 7 days a week dispatch through its E-911 Center at no cost to the Contractor. Any and all back-up units owned by the Contractor must have direct radio communications capability with Edgar County E-911 Center for dispatch purposes.

10. Headquarters for the Ambulance Service:

The Contractor shall maintain and own (or lease) its headquarters/ambulance bay within 2.5 miles of the Edgar County Courthouse in Paris, Illinois.

11. Mutual Aid:

The contractor shall respond to mutual aid requests when requested by other ambulance services providing emergency response in Edgar County (Northern Edgar County Ambulance) and/or Kansas Ambulance.

AMBULANCE BID SUBMISSION FORM

Name of Bidder _____

MONETARY

This is the amount of tax money the bidder will need to operate an Ambulance service over the next five years, not to exceed the authorized maximum tax levy.

Year 1 June 1, 2014 – May 31, 2015 \$ _____

Year 2 June 1, 2015 – May 31, 2016 \$ _____

Year 3 June 1, 2016 – May 31, 2017 \$ _____

Year 4 June 1, 2017 – May 31, 2018 \$ _____

Year 5 June 1, 2018 – May 31, 2019 \$ _____

TOTAL \$ _____

BIDDER COMMENTS

CERTIFICATION

I certify that I have read and understand the Ambulance bid specifications for Edgar County, IL, and further certify that _____ (bidder) can meet the requirements of these bid specifications.

Dated _____

Bidder

Bidder