Santa Barbara County

Emergency Medical Services

BOARD OF SUPERVISORS

MAY 2022



Topics in presentation

Policy for Emergency Ambulance Services contracts
 AMR Agreement Extension
 RFP Fundamentals

Recommended Actions

- Adopt the attached Resolution (Attachment A) adopting a policy setting forth issues to be considered for inclusion in contracts for the provision of emergency ambulance services entered into or renewed on or after January 1, 2022;
- Approve and authorize the Chair to execute a Fifth Amendment to the Professional Services Agreement with American Medical Response West (AMR) to update the Vehicle Maintenance Program, to update the "Lame Duck" Contract Termination provision, and to extend the termination date to March 1, 2024 to allow for completion of the Ambulance Services Request for Proposals (RFP) process;
- Approve and authorize the Public Health Department Director, or designee, to authorize AMR's requests in accordance with Agreement Section 11.1.G, upon review and approval from the CEO, Auditor-Controller, and County Counsel;
- With respect to the RFP for an Exclusive Ambulance Services Provider for the Santa Barbara County Exclusive Operating Area:
 - Approve and authorize issuance of the RFP; or
 - Provide staff with other direction regarding further development of the RFP; and
- Determine that the proposed actions do not constitute a "Project" within the meaning of California Environmental Quality Act (CEQA), pursuant to Section 15378(b) of the CEQA Guidelines, because it consists of the creation of a government funding mechanism or other government fiscal and administrative activities, which do not involve any commitment to any specific project which may result in a potentially significant impact on the environment.

4

AMR Agreement Extension

Termination Date: March 1, 2024

Amendments:

- Mileage cap for primary units moved to 250,000
 - Inline with RFP
 - Consistent with requirements for back-up units
- "Lame Duck" provisions amended to provide mechanism to address potential request from AMR, if needed

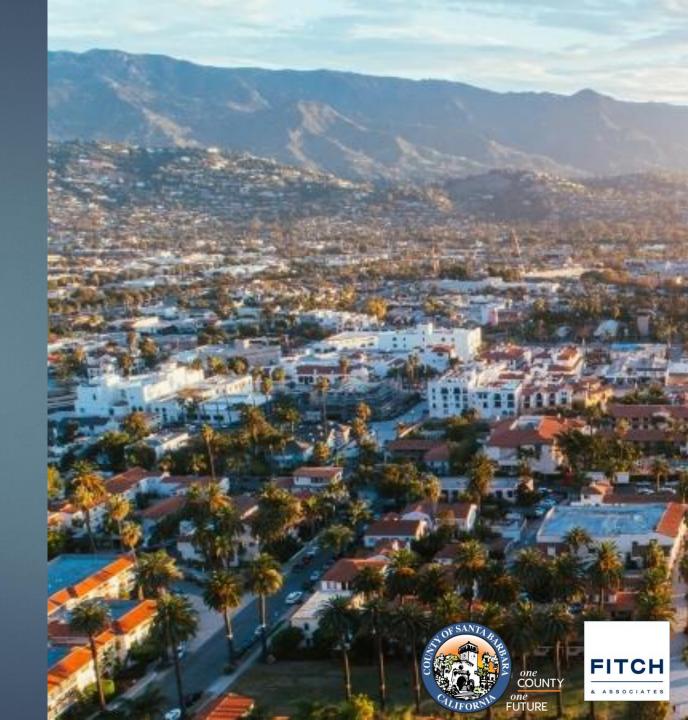
RFP Policy Crosswalk

Policy Element	Section				
Treatment of the Incumbent Workforce	5.8				
Disaster Response & Preparedness	5.1.B.iii; 5.3.A.ix; 5.9; Appendix 14				
Establish Minimum Qualifications	2.2; 2.9; 7.7				
Diversity, Equity & Inclusion Efforts	3.2.B.2; 6.3; 7.1; 7.9				
Financial Requirements	2.9.iii; 8.7; 8.8; Appendix 7				
Cost Recovery for the County	1.5.D				
Public Information, Community Involvement & Education	3.B.11; 7.1; 7.8.C.viii				
Emergency Takeover	9.4				
Minimum Community Education & Outreach	3.B.11; 7.1; 7.8.C.viii				
Ongoing Workforce Development	3.B.3; 3.B.4; 4.1; 4.5; 4.6; 4.7; 5.6				
Wage, Benefit, and Staffing Protections	3.2.B.3; 5.8; 7.7; Appendix 13				

Santa Barbara County

Emergency Medical Services Exclusive Ambulance Provider RFP Process Overview

PRESENTED BY FITCH & ASSOCIATES BOARD OF SUPERVISORS MEETING MAY 31, 2022



About Fitch & Associates

Fitch & Associates (FITCH) has earned credibility by implementing innovative customized solutions in the public safety and healthcare arenas and has consulted with over 1500 communities in 50 states, all 10 Canadian provinces, and 12 other countries.

We've designed, developed, and managed some of the world's most innovative EMS systems and have been responsible for more than seventy service procurements for health systems, cities, and counties including twelve in the state of California.

Projects have ranged from objective reviews, analysis, communications system design, productivity, consolidation, mergers, and strategic partnerships and enhancement studies to detailed operational, financial, and transition management services.

RFP Process Design

The RFP process is a structured, deliberate, and objective method that has been successfully utilized in multiple jurisdictions and with a variety of system models.

The competitive RFP process is designed to accommodate a variety providers - private, public, or a public/private collaboration - and not lose any tenants for selection of a successful provider.



The goal is to clearly profile the system, its performance requirements, and the administrative procedures to be used during the procurement and throughout the Contract. A well-developed RFP allows proposers to sharpen their pencils and provide optimum value while mitigating risks to the Community.



RFP Specification Development

9

FITCH has broad-based expertise that naturally blends competing demands for an effective system design, efficient performance, and an objective and transparent procurement process.

The development of a final RFP document is an iterative process and involves soliciting feedback regarding specific language, features, and requirements of the RFP. The following methods were utilized to obtain input from stakeholders throughout the system:

- Stakeholder meetings were conducted on thirteen occasions during the phase one and two studies, representing nearly sixty entities, including hospitals, EMS, fire rescue, law enforcement, communications, and allied organizations.
- In September 2021, two separate surveys were developed and published to capture community and stakeholder input in anticipation of issuing a new ambulance provider RFP.
- In November 2021, a draft RFP was published to provide an opportunity for potential proposers to comment and provide feedback.
- In November 2021, a draft RFP was provided to the California EMS Authority to provide them with an opportunity to provide feedback.

Specification Considerations

FITCH worked with the RFP Advisory Committee (RFPAC) to understand the system and its unique economic, demographic, and service parameters to develop considerations and recommendations.

The following areas were highlighted during RFP development and discussed at length during development of the final draft:

- Historical experience requirements
- Exclusive operating areas
- Response time standards
- Stop-the-clock agreements

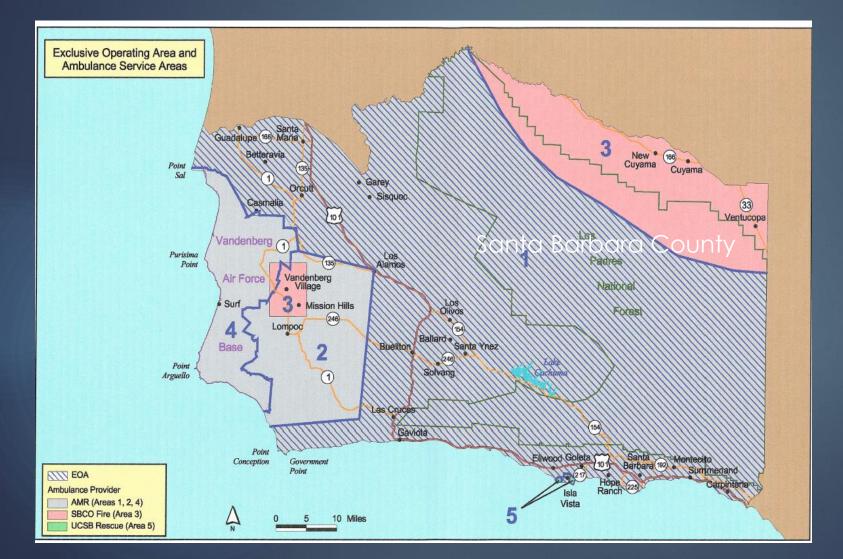
- Bond & financial commitment thresholds
- Scoring methodology
- ► Treatment of the incumbent workforce
- System costs

Historical Experience Requirements

The competitive RFP process is designed to accommodate a variety providers - private, public, or a public/private collaboration - and not lose any tenants for selection of a successful provider.

- Typical private ambulance procurement would require that potential bidders have proven history in similar systems, specific number of transports, and contract tenures.
- Without modification, these traditional requirements would eliminate a public bidder.
- Understanding that the full scope of local government operates and manages other complex essential services, the equivalency was developed to allow public providers to describe how they would accomplish the service provision.

Service Area Map



Note: Service Area 2 is served by County Fire (Vandenberg Village) and AMR (Vandenberg Air Force Base [Federal Contract], and City of Lompoc)

Exclusive Operating Areas

The RFPAC considered four scenarios concerning the Exclusive Operating Areas (ESA)s:

- Option 1: Bid the ESAs under current configuration.
 - This was recommended due to implications to current fire service operations and fiscal impacts of ESA 3
- Option 2: Bid each ESA separately
- Option 3: Combine all of ESA 1 and ESA 2
- Option 4: Bid a single ESA
 - This was recommended by stakeholders during the 2018 EMS Systems Review

In December of 2021, the LEMSA sent a clarification request to the California EMS Authority (CAEMSA) regarding Exclusive Operating Area (EOA) boundaries.

- CAEMSA advised that based on the information presented, UCSB was not exclusive.
- Accordingly, the RFP draft was finalized using Option 4: Combining all ESAs into a single ESA.



Response Time Standards

- The intent was to maintain the current "effective" ambulance response time standards while creating a neutral competitive bid process.
- Currently, ambulances are required to arrive in 9:59 seconds 90% of the time in urban areas where the fire service arrived and "stopped the clock" in 7:59.
- Due to public bidder implications with stop the clock funding, the recommendation was to maintain the effective ambulance response time threshold at 9:59.
- This allows all potential bidders to have a level playing field on what response time threshold would be required.

Current Response Time Standards (without stop-the-clock agreements)					
Priority Level Compliance		Urban	Semi-Rural	Rural	
Priority 1	90%	9 min. 59 sec.	16 min. 59 sec.	32 min. 59 sec.	
Priority 2	90%	12 min. 59 sec.	19 min. 59 sec.	42 min. 59 sec.	
Priority 3	90%	16 min. 59 sec.	22 min. 59 sec.	42 min. 59 sec.	

RFP Response Times Standards (without stop-the-clock agreements)					
Priority Level	Compliance	Urban	Rural	Wilderness	
Priority 1	90%	9 min. 59 sec.	16 min. 59 sec.	32 min. 59 sec.	
Priority 2	90%	12 min. 59 sec.	19 min. 59 sec.	42 min. 59 sec.	
Priority 3	90%	16 min. 59 sec.	22 min. 59 sec.	42 min. 59 sec.	

Stop-The-Clock Agreements

- Currently, stop the clock agreements are contracts between the provider and the local fire departments.
- It is a financial benefit to the ambulance provider for these services, while ensuring that the public receives a response time within the 7:59 – 90%
- However, policy considerations included the perception that a private entity would be required to have a "real" actual cost and a public entity <u>could</u> elect not to pay themselves for stop the clock first response since the contracts were between provider and the local fire department.
- The solution was to create a fund that all providers would pay the current value of the stop the clock funds and that those funds would be distributed at the current rates back to the fire departments that were compliant with typical system elements such as training and reporting.

Bond & Financial Commitment Thresholds

Proposers must obtain and maintain a performance guarantee equivalent to six (6) months of operating expenses throughout the term of the Contract.

16

- These Contract provisions provide immediate access to cash and other remedies should a private sector default occur.
- Government proposers may pledge receivables and assets in lieu of performance security.
- This was incorporated into the RFP to manage the participation of a governmental entity or municipal department in this procurement to ensure a "level playing field."

Treatment of the Incumbent Workforce

- Typically, within a private only competitive bid process, there is language to help protect transitioning workforces from draconian cost saving approaches if the provider changes.
 - "the winning Proposer will be encouraged to recruit from, and preferentially hire, the incumbent paramedic and EMT workforce"

17

- "all incumbent personnel hired will retain seniority status"
- In this case, the language may conflict with other competing interests through the lens of a public entity such as civil service, county employment rules, and collective bargaining.
- The language is to be reviewed and updated to best maintain the intent, but not be restrictive or prohibitive for any public entity.
- There was no associated scoring value associated with this clause.

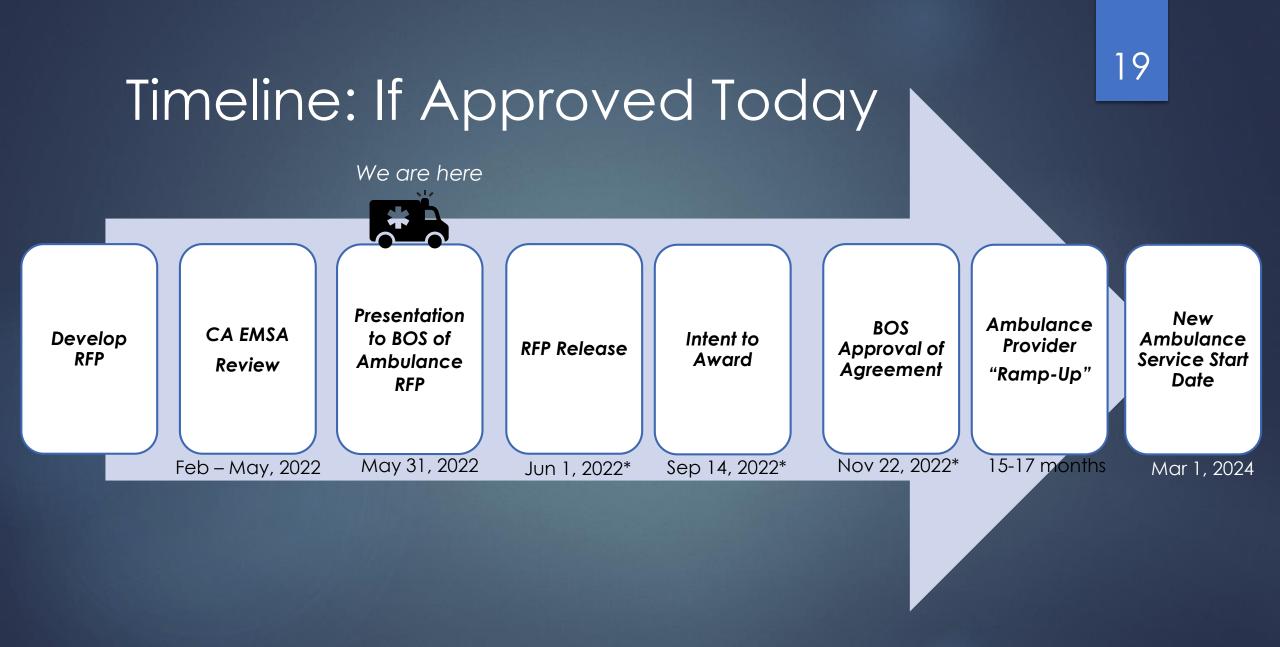
18

Scoring Methodology

The state requires that minimum qualifications are scored on a pass/fail basis.

- There are four key areas in which minimum qualifications must be established:
 - i) Experience in managing a clinically sophisticated Emergency Ambulance Service.
 - ii) Response time performance.
 - iii) Financial depth and stability; and
 - iv) Regulatory compliance.
- In addition to the minimum qualifications, Clinical, Operations, Administrative, Regulatory Compliance, and Financial Provisions are assigned point values and scored according to the following scale.
 Bating
 Possible Points

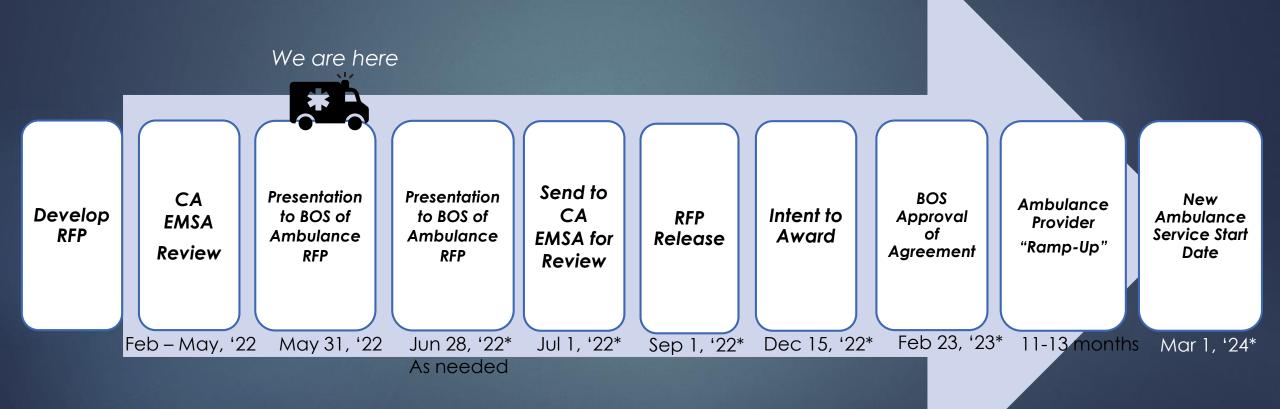
Rating	Possible Points					%		
Exceptional	75	50	45	25	15	10	5	100%
Good	63.75	42.5	38.25	21.25	12.75	8.5	4.25	85%
Acceptable	37.5	25	22.5	12.5	7.5	5	2.5	50%
Unsatisfactory	0	0	0	0	0	0	0	0%



* Dates are estimated



Timeline: If Additional Edits Required



* Dates are estimated

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