



ADDENDUM #3

**REQUEST FOR PROPOSALS (RFP) FOR
ENHANCED EMERGENCY MEDICAL SERVICES
(9-1-1 EMS RESPONSES AND INTERFACILITY TRANSPORTS)**

BID # 26/27-004

SUBMITTALS DUE NO LATER THAN: 4:00 PM ON OCTOBER 7, 2026

This addendum is to notify all potential proposers of clarifications made to the Bid documents as stated below.

- 1) **Evaluation criteria and weights.** General Conditions §26 states that selection criteria will be defined in the Special Conditions. The Special Conditions describe minimum qualifications and an interview week of November 16, 2026, but do not list scored factors or point weights. Please publish the evaluation factors, relative weights (technical, past performance, price, implementation, interview), and whether price is scored on the year-one ALS band, a blended ALS+ILS total at 35,040 hours, or another method. Answer:

Award Criteria and Scoring

The principal criteria for award will be the following:

Criteria	Points Available
Section 1 - Business Information	Pass/Fail
Section 2 - Organizational Disclosure	15
Section 3 - Qualifications and Experience	20
Section 4 - Work Plan	25
Section 5 - Exceptions to RFP and Terms and Conditions	10
Section 6 - Equipment and Facilities including a plan for reserves such that staffing and unit hours may be maintained as anticipated by SFD needs	10
Section 7 - Pricing Proposal	20
Total	100

Upon completion of the evaluation and scoring of the Proposals, the top Proposers (Finalists) as determined by the evaluation committee will be selected for an interview. Finalists may be notified in writing of selection for an interview and provided with a list of questions that will be asked at the interview. Finalists may be invited to prepare a presentation in response to the interview questions. Scoring criteria for the Finalists' presentations will be provided with the invitation. Upon completion of all presentations, Finalists will be scored based on the presentation scoring criteria.

- 2) Exhibit 3 posting plan. Exhibit 1 states that current and anticipated posting locations are shown on Exhibit 3 and that SFD will run a heat-map / system-status model. Exhibit 3 is not in the posted 57-page book. Please provide Exhibit 3, or the current post list and the planned unit-hour schedule by hour of day for the year-one 30,660 ALS and 4,380 ILS hours. Answer:

The final shift line and schedule will be determined prior to the execution of a contract. Below are proposed models. A posting plan will be shared during interviews. A system status model will be utilized to move units from the outlying areas into the core when demand is high.

Hourly Coverage			
Time	911 Units Available	IFT Unit Available	Total Units
00:00–07:59	2	0	2
08:00–11:59	4	1	5
12:00–19:59	6	1	7
20:00–23:59	4	0	4

Optional IFT Coverage outside of 20:00 with 911 Units			
To cover the remaining IFT incidents outside the 08:00–20:00 IFT unit, the 911 schedule should shift some coverage later.			
Remaining IFT Workload			
Time Period	IFT Incidents	Avg/Day	
08:00–20:00 IFT unit	1,027	2.8/day	
Outside IFT unit coverage	340	0.9/day	
Total IFT	1,367	3.8/day	

Revised 911 Shift Model			
911 Shift	Time	Units	Purpose
Shift 1	08:00–20:00	4	Main daytime 911 coverage
Shift 2	12:00–00:00	2	Covers 911 peak and evening IFT overflow
Shift 3	20:00–08:00	2	Covers overnight 911 and remaining IFT

3) Authorized hours and band movement

We read Exhibit 1 to mean SFD pays only authorized unit hours actually provided, at the rate for the annual-hour band in which that service level falls (ALS 30,660 in the 26,280–35,039 band; ILS 4,380 in the 0–17,520 band). Please confirm (a) whether year-one hours are a planned purchase or a cap SFD may reduce, (b) the notice period if authorized hours are cut mid-year, and (c) which band applies if actual ALS hours cross 35,039.

Answer:

The annual unit hours represent the City's anticipated service requirement and are not intended to constitute a guaranteed minimum purchase. Payment will be based upon authorized unit hours actually provided.

SFD may modify deployment schedules and authorized unit hours based upon call demand, response-time performance, system utilization, special events, operational needs, and future expansion of the EEMS program. Material changes in scheduled coverage will be coordinated with the contractor with as much advance notice as reasonably practicable.

For pricing purposes, the applicable unit-hour rate will correspond to the annual service-level band into which the authorized annual hours fall. If authorized ALS hours increase beyond 35,039 annual hours, the additional service will be priced using the rate identified by the proposer for the 35,040–43,799 ALS unit-hour band, unless otherwise negotiated in the resulting contract.

4) Priority mix of published volume. Addendum #2 reports 19,630 911 incidents and 9,926 transports in FY24/25. For deployment planning against Special Conditions §13.0 (P1 8:59, P2 11:59, P3 19:59 at 90 percent monthly), please provide the Priority 1 / 2 / 3 split of those incidents, or the last twelve months of system fractile performance if a split is not available.

Answer:

P1 – 7707 incidents, P2 – 6420 incidents, P3 – 5506 incidents. These figures are provided for proposers' deployment and workload planning.

5) Current transport provider and cutover. Addendum #2 confirms SFD does not currently transport. Who currently provides 911 ambulance transport and IFT in the SFD Service Area, when does that arrangement end, and will the selected contractor assume all 911 transports on the first operational day or under a defined overlap?

Answer:

The Sparks Fire Department does not currently operate transport ambulance services. The current provider for ambulance transport services for Northern Nevada Public Health's (NNPH) members is REMSA. The City of Sparks can withdraw from the Interlocal Agreement with NNPH every December. A defined overlap would be agreed upon between the bidder and the City of Sparks.

6) IFT hours versus the 4,380 ILS block. Addendum #2 reports 1,367 IFT incidents in FY24/25. Exhibit 1 sets BLS at zero required hours but states BLS “may be used for interfacility transfers.” Are the 1,367 IFT incidents expected to be worked inside the

published 4,380 ILS unit hours, inside the 30,660 ALS hours, as BLS hours SFD will authorize later, or as additional paid hours?

Answer:

The City anticipates that the published IFT workload will primarily be incorporated into the ILS deployment and unit-hour allocation, subject to patient acuity and applicable clinical requirements. A review of the IFT incidents shows P1 – 112 incidents, P2 – 685 incidents, and P3 - 573 incidents. Of these, 385 were ILS. These hours should be included in the ILS unit hour bucket.

- 7) **Special-event hours.** Special Conditions §5.0.H lists Star Spangled Sparks, Hot August Nights, and the Nugget Rib Cook-Off, with 30 days' notice of hour changes. Are those event hours inside the published 35,040 year-one hours, or separately authorized and paid at the Exhibit 1 rate?

The total unit hours for the EEMS program does not include Special Conditions hours for special events. Authorized additional special-event unit hours will be compensated at the applicable contracted unit-hour rate for the service level provided in Exhibit 1.

- 8) **Mutual-aid and out-of-area hours.** Special Conditions §4.0 includes automatic/mutual-aid geography in the Service Area and requires the contractor to make resources available inside or outside that area on request, with a mutual-aid agreement to be signed before start-up. Are those hours paid at the contracted unit-hour rate from dispatch, and does the §13.0 response-time clock apply to calls originating outside City limits?

Answer:

Mutual-aid responses would be paid at the contracted unit hour rate. The response time clock does not apply since the request is originating outside of the designated area. This language will be revised and presented prior to the award of a contract with a bidder.

- 9) **Designated ePCR and billable-record timing.** We understand §19.0: SFD designates the ePCR platform and the contractor supplies field tablets. Which platform is designated, and what is the required interval from call-clear to a complete, billable record in SFD's system so City billing under §3.0.H–J is not delayed?

Answer:

The Sparks Fire Department uses ESO as their ePCR platform. Reports are expected to be completed at the end of the scheduled shift with a "call clear to complete billable record" expected no later than 24 hours after the unit is available from the assignment. If a bidder is familiar and embedded with another ePCR program, this can be discussed during interviews.

- 10) **Known integration costs.** We will price WCRCS 800 MHz P25 radios, AVL/MCT with a five-second refresh, CAD interface, and 50 percent of FirstWatch (or equal) into the unit-hour rate as required by §§7.0.B and 18.0.B. To keep that rate accurate, please provide current WCRCS mobile and portable user fees, the City CAD vendor that the AVL/MCT must interface with, and the current or estimated annual FirstWatch (or equal) cost to be shared.

Answer:

WCRCs operates under a shared cost allocation per radio, rather than separating flat rates into mobile vs. portable tiers. For the current fiscal cycle, operations cost per active radio unit is \$316.00 annually. An additional 10% is added to the total operational fee to support system infrastructure and maintenance.

The estimated activation cost for FirstWatch would be \$70,000 for the proposed bidder with an estimated annual maintenance cost of \$10,000.

- 11) Reading of Minimum Qualification §2.0.A. §2.0.A requires five continuous years of emergency ambulance transport under a public-agency contract in a contiguous urban area commensurate with or larger than Sparks. Please confirm whether a Nevada municipal ambulance contract in the Las Vegas urban area (population well above the Sparks service population of approximately 110,000), performed continuously since 2018 and covering emergent and non-emergent ALS/ILS/BLS work, together with a current VA Southern Nevada Healthcare System ALS/ILS/CCT contract, satisfies §2.0.A, or whether the City requires a single exclusive 911 franchise of similar density.

Answer:

The example given meets the requirements of this bid.

- 12) Contractor facilities. §2.1.G requires the official liaison's office inside Sparks city limits and §6.0.B requires records in Washoe County. §7.0.A.9 states the City will not furnish ambulances or clinical equipment. Will any fire-station parking, crew quarters, or apparatus bays be available to posted units, or should proposers assume all posting, housing, and records space is contractor-leased?

Answer:

Proposers assume all posting, housing, and records space is contractor-leased. City property will not be used for parking, unit posting, housing, or crew quarters.

- 13) First operational day and phased stand-up. §1.2 requires full operational capability 60 to 120 days after execution and allows alternative implementation schedules. What is the City's target first operational day, and may a proposer phase hours (a subset of ALS plus ILS at day 60, full 30,660 ALS hours by day 120) if response-time commitments are explicit?

Answer:

The City of Sparks has the ability to withdraw from the Interlocal Agreement with NNPH every December. The first operational day has not been determined, but a phased approach may be discussed at the interview stage.

Please note and adjust your bid according to the revisions, additions, deletions, clarifications, or modifications as presented on this Addendum #3, which are made a part of this bid. NOTE: To avoid disqualification, this Addendum #3 (and any other addenda) must be signed by an authorized representative of the proposing firm in the space provided and must be submitted with your firm's sealed proposal. Failure to return this addendum, duly signed, may be cause for rejection of the proposal. ALL ADDENDA SHOULD BE SIGNED AND PLACED IN SEQUENTIAL ORDER AND ATTACHED TO THE FRONT OF THE PROPOSAL PACKAGE, COMPLETE WITH ALL REQUIRED DOCUMENTS.

CONTRACTOR BUSINESS NAME

X_____
Authorized Signature

Printed Name of Person Signing