(posted 11/1/2025 following 10/28/2025 Stakeholder Meeting)

	Date Received	Comments/Input	NCEMS Response
1	11/5/2025	Will bidders be able to review and comment on the near-final RFP language? We understand the time constraints and the concepts presented, but having access to the final details is essential for preparing our proposal.	The RFP will be published once it is approved by the State EMS Authority and NCEMS JPA Governing Board.  All proposers will have an opportunity to submit written questions to the published RFP, and NCEMS will provide written responses and, if necessary, make amendments to the RFP.
2	11/5/2025	We recognize the value of BLS providers in the 9-1-1 system, with medical director approval and proper Emergency Medical Dispatch. Evidence supports integrating BLS into ALS systems without harming patient outcomes, especially given paramedic shortages. Please clarify expectations and timelines in the RFP.	This will depend on the NCEMS Medical Director for review and approval of EMD protocols and performance requirements.
3	11/5/2025	During the presentation, it was suggested that contractors should not use system resources for calls when providers are already contracted and paid for transport services. In this county, the ambulance provider works with mental health because no other providers will do so.  Financially, discontinuing these contracts would benefit us, but we recognize the negative impact this would have on mental health patients and care providers. We urge EndPoint to thoroughly assess how the RFP may affect access for hard-to-serve patients.	Stakeholders and County leadership do not want the 911 ambulance resources taken out of the county for long periods of time without adding additional unit hours.  Requests for Behavioral Health transfers greater than four (4) hours in duration, will require the Contractor to enter into a separate agreement to establish response time requirements and reimbursement structure.

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	Date Received	Comments/Input	EndPoint/NCEMS
4	11/5/2025	Thank you for engaging in the discussion concerning the scope of the RFP and the distinction between the Exclusive Operating Area applying solely to the 9-1-1 market, or both the 9-1-1 and non 9-1-1 markets. It is essential to ensure clarity on this matter, as it will directly impact the RFP requirements and the quality of proposal submissions from prospective bidders.	This RFP established an EOA for 911 ground ambulance emergency and non-emergency IFT. (Excluding Critical Care Transport -CCT)
5	11/5/2025	A discussion was held regarding the contractor's responsibility for payment of County Dispatch 9-1-1 services, as well as the potential inclusion of EMD services. Will the RFP include standardized pricing for these services to ensure equitable bidding among all prospective contractors?  Alternatively, will each bidder be required to independently negotiate or estimate these costs during the RFP process, potentially resulting in significant cost variances?  Furthermore, what is the protocol if the County Sheriff's department is unable or unwilling to provide an official cost or price?	NCEMS requires EMD service continuation for Del Norte County. This is a requirement of the ambulance provider unless the provider has an agreement with the Del Norte County Sheriff Dispatch for this service.

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6	11/5/2025	Currently, Medicare and Partnership (Medi-Cal) do not cover treatment or transport to Alternate Destination locations. Will the County fund this service? If so, at what rate?	These Community Paramedicine and Triage to Alternate Destinations (CP/TAD) programs will need much community discussion and financial support prior to implementation. It is not suggested that an ambulance provider will be required to provide transport services without reimbursement.
7	11/5/2025	Could you please confirm whether the County will establish an Emergency Medical Care Committee (EMCC) as specified in California Code – HSC Division 2.5, Chapter 4, Article 3, Sections 1797.270 to 1797.276?	At this time, neither NCEMS nor Del Norte County has established an EMCC. NCEMS is interested in establishing a Contract oversight committee as part of an existing committee or may utilize NCEMS JPA Board for this purpose.
8	11/5/2025	How will the County comply with AB-645 before awarding the RFP in January 2027?	NCEMS is in discussion with the County regarding the implications of AB-645, which will establish regulations for public safety agencies who process 911 medical calls to ensure the public receives life-saving pre-arrival instructions. It is silent to full implementation of EMD with priority call determinates for Code 3 and Code 2.
9	11/5/2025	The meeting discussed two options: a response time model, and setting a fixed number of ambulances. Though EndPoint favored the performance-based response time approach, we need clarification on whether the contract will follow a performance or level-of-effort model.	This will be clear in the RFP.

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10	11/5/2025	Will ALS Quick Response Units be included in the system, and can they "stop the clock?"	After further discussion with County leadership and NCEMS the QRV language was removed as the stakeholders preferred any additional resources being an ALS ambulance.
11	11/5/2025	Could you please confirm whether all 9-1-1 calls necessitate a Code-3 response, or if, with the implementation of EMD, certain calls may be assigned a lower priority response?	The EMD center may utilize Code 3 and Code 2 response times in accordance with the time requirements identified in the RFP once EMD protocols are approved by NCEMS Medical Director.