

South Davis Metro Fire Service Area Board of Commissioners
Request for Proposal for
Emergency Medical Services (EMS) Delivery

The South Davis Metro Fire Service Area Board of Commissioners are accepting proposals for contractor(s) to provide emergency medical services (EMS), including 911 emergency response and interfacility transport (IFT). The specific service requirements are identified in the proposal packet. Any exceptions to this proposal may be submitted with completed proposals.

Timeline: RFP submittal window 10/1/2026 – 5:00 PM 10/8/2026

RFP Review and Scoring: 10/13/2026 – 10/15/2026

Award: 5:00 PM 10/19/2026

Proposal information packets are available at Station 81 located at:

255 South 100 West
Bountiful, Utah 84010

Also available for download in PDF at sdmetrofire.gov

Responses to this Request for Proposal can be submitted to the above station, or electronically to nthompson@sdmetrofire.gov.

The South Davis Metro Fire Service Area Board of Commissioners reserve the right to accept or reject any proposal in the best interest of the South Davis communities.

REQUEST FOR PROPOSALS (RFP)

Emergency Medical Services (EMS) Delivery

South Davis Communities

1. INTRODUCTION

The cities of Bountiful, Centerville, North Salt Lake, West Bountiful, and Woods Cross (hereafter referred to as “Participating Cities”) are soliciting proposals from qualified providers for the delivery of comprehensive Emergency Medical Services (EMS) within the defined service area.

The intent of this RFP is to identify a provider capable of delivering **high-quality, cost-effective, and accessible EMS**, including both **911 emergency response and interfacility transport (IFT) services**, in accordance with all applicable state regulations.

2. SERVICE AREA

The selected provider shall serve the geographic boundaries of the Participating Cities, including incorporated areas and designated unincorporated regions within southern Davis County.

The service area includes a mix of residential, commercial, and transportation corridors with an estimated population of approximately 120,000.

3. SCOPE OF SERVICES

The selected provider shall deliver a **comprehensive EMS system**, including:

3.1 911 Emergency Response

- 24/7 Advanced Life Support (ALS) response capability
- Integration with fire suppression and first-response agencies
- Compliance with all state licensure requirements

3.2 Interfacility Transport (IFT)

- Provision of medically necessary interfacility transports
- Demonstration that IFT operations will not negatively impact 911 system readiness
- Coordination with hospitals and healthcare facilities

3.3 Patient Care

- Care delivered under approved medical direction
- Compliance with state protocols and NEMSIS documentation standards

4. SYSTEM STATUS & DEPLOYMENT REQUIREMENTS

Proposers shall describe a deployment model that ensures continuous system readiness and balanced coverage.

Minimum expectations include:

- A System Status Management (SSM) or equivalent deployment model
- Clearly defined unit hour availability
- Strategic placement of resources to meet response time standards
- Integration of ALS first-response resources where applicable
- A plan for maintaining coverage during peak demand, hospital delays, and interfacility transport activity

5. PERFORMANCE STANDARDS (QUALITY & ACCOUNTABILITY)

Proposers shall meet or exceed the following performance expectations:

5.1 Response Time Standards

- Priority 1: 90% within 8 minutes, 59 seconds
- Priority 2: 90% within 12 minutes, 59 seconds

5.2 Clinical Quality

- Implementation of a formal QA/QI program
- Routine review of high-acuity calls (cardiac arrest, airway, trauma)
- Tracking of clinical performance metrics (ROSC, airway success, etc.)

5.3 Reporting

- Monthly reporting of response times, unit availability, and system performance
- Compliance with state and national data standards

6. COST & FINANCIAL EXPECTATIONS

Proposers shall clearly outline the financial structure of their EMS system, including:

6.1 Municipal Cost

- Expected financial impact to participating cities
- Description of any required subsidy or financial support
- Cost containment strategies

6.2 Patient Billing

- Compliance with state-regulated rates (including H.B. 269 if applicable)
- Description of billing practices and transparency
- Approach to uninsured patients and hardship considerations

6.3 System Sustainability

- Demonstration of long-term financial viability
- Understanding of EMS reimbursement challenges

7. ACCESS TO SERVICE

Proposers shall demonstrate how they will ensure equitable and timely access to EMS services across the entire service area.

This shall include:

- 24/7 ALS availability
- Minimum unit availability standards
- Coverage for both high-density and lower-density areas
- Mutual aid and surge capacity planning
- Assurance that all 911 calls receive appropriate dispatch and medical instructions

8. ORGANIZATIONAL QUALIFICATIONS

Proposers shall provide:

- Organizational structure
- Staffing model and certification levels
- Experience providing 911 and/or IFT services
- Description of training programs and clinical oversight
- Brick and mortar building to be utilized as a staging facility

9. GOVERNANCE & OVERSIGHT

The selected provider shall operate under the oversight of the Participating Cities.

Requirements include:

- Regular performance reporting
- Participation in review meetings
- Compliance with all applicable state and local regulations

The contract term shall align with the EMS licensure cycle, with periodic review and renewal.

10. PROPOSAL SUBMISSION REQUIREMENTS

Proposals shall include:

- Executive summary
- Detailed response to each section of this RFP
- Description of system design and deployment
- Financial proposal
- Supporting documentation and data

11. EVALUATION CRITERIA

Proposals will be evaluated based on:

- Demonstrated ability to meet performance standards
- Quality of clinical care and QA/QI program
- System design and reliability
- Cost-effectiveness and financial sustainability
- Experience and organizational capacity