AGENDA NOTES

Solicitation Name and Number	Emergency Ambulance Service Provider for DeKalb County, Georgia (Multiyear Contract)
Solicitation Name and Number	RFP No. 19-500511
Procurement Agent	Cathryn Horner
Date Solicitation bid prices expires.	December 31, 2019
(Indicate if vendor has agreed to extend	
bid date/prices. Include new date.)	
Solicitation Name, Number and Contract	Emergency (911) Ambulance Services and Billing
Number of Expiring Contract (If no	and Collections for Ambulance Transport and
previous contract, please indicate N/A)	Non-Transport Accounts
	RFP No. 13-500261
	Contract No. 13-800984
	Metro Ambulance Services, Inc. d/b/a American
	Medical Response, Inc.
Contract Number Contractor Name and	Contract No. 13-800984
Contract Number, Contractor Name and Award Amount (Include increases and	
Total Award Amount)	Metro Ambulance Services, Inc. d/b/a American Medical Response, Inc.
Total Awaru Amount)	Medicai Response, inc.
Previous Amount Generated to Date on	\$3,654,500.00
Expiring/Expired Contract	(Reimbursement for use of County dispatch,
(If multiple award, List Amount Spent per	contract administration and communications set
Contract and include Total Amount Spent)	up in accordance with the requirements of the
•	contract.)
Prime Contractor Information and LSBE-	Metro Ambulance Services, Inc. d/b/a
Subcontractor (Prime: Company Name,	American Medical Response, Inc Prime
Owner Name and Title, Number years in	President/CEO: Edward B. Van Horne
business and Number of Years doing	Years in business: 24
business with DeKalb County)	Years doing business with DeKalb: 17
(LSBE: LSBE Type (DeKalb or MSA,	
Participation Percentage, Company Name,	Note that this contract will require that AMR
Owner Name and Title, Address, Type of	collect its fees from clients, insurers, Medicare
Work Provided, Number of years in	and Medicaid; therefore, there is no definitive
business and Previous Business/Contracts	contract amount. No payment will be made
and Amounts with DeKalb County)	directly by the County to AMR.
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Attachments	1. UD Recommendation Form
	2. Cumulative Score Sheet3. Market Survey