ANESTHESIOLOGY SERVICES

REQUEST FOR PROPOSAL

ADDENDUM NUMBER: THREE (3)   MAY 12, 2022

THIS ADDENDUM IS ISSUED PRIOR TO THE ACCEPTANCE OF THE FORMAL RFP's. THE FOLLOWING CLARIFICATIONS, AMENDMENTS, ADDITIONS, DELETIONS, REVISIONS, AND MODIFICATION FORM A PART OF THE CONTRACT DOCUMENTS ONLY IN THE MANNER AND TO THE EXTENT STATED.

NOTIFICATION

Please note that the opening time/date has been modified as indicated below:

VIRTUAL RFP OPENING: 4:00 PM, Thursday, May 19, 2022

CLARIFICATION

- Salah Foundation Children's Hospital's staffing needs are included in the staffing needs at Broward Health Medical Center.

Q&A

1- There is a significant amount of volume data missing to prepare a complete revenue estimate. For each facility, please provide the following:
    - Volume by case type, broken out by inpatient and outpatient
    - Volume of obstetric cases, including all labor epidurals and c-sections
    - Volume of GI cases
    - Detailed payer mix, including commercial payer mix for each site
    - For each facility are you able to, provide a separate payer mix for obstetrics and GI.
  Please refer to the excel document provided with this Addendum for FY19 and FY22(to date) data.

2- What is the nature and extent of any restrictive covenants with the current anesthesia provider? Broward Health has a non-solicitation clause that prohibits Broward Health from, directly or indirectly, impairing or attempting to impair the relationship between Broward Health's current anesthesia contractor and its employed personnel by contracting with or making offers of employment to such personnel.

3- What is the current vacancy rate? N/A.

4- At hospitals with OB, are CRNAs credentialed to perform labor epidurals? Yes.

5- Are CRNAs credentialed to perform regional anesthesia? Yes.

6- What is the current trauma level at each site and is there a need for daytime room availability/staffing? BHMC is Level I; BHN is Level II. Yes, there is a need for daytime staffing for trauma.

7- For each facility, how is the Preoperative Clinic staffed? No site has an actual preoperative clinic. For inpatient, Anesthesia sees patients in pre-op area on the day of surgery.

8- For each facility please describe the acute pain service volume and staffing? Broward Health does not have a dedicated acute pain service. Rather, there are anesthesiologist and non-anesthesiologist medical staff members who are privileged in pain medicine.

9- For each facility please describe the coverage for rapid response and code blue teams?
BHMC: Non-ICU rapid responses and medical codes are typically run by the ED physician with anesthesiology presence as required for airway management.
BHCS: Code Blue is run by ED physician. Anesthesia may be called but ED runs code. Nursing responds to rapid response.
BHIP: ED Physician with anesthesiology presence as required for airway management.
BHN: Rapid response and code blues are covered by another service. Anesthesia may be called for a difficult airway, but it is seldom.

10- Can you confirm for each facility what percentage of endoscopies are covered by anesthesia? All cases with the exception of bedside ICU cases which are already intubated.

11- For each facility, what are the medical staff bylaws position on standard of CRNA/supervision ratios? Bylaws do not include ratios. Preference/standard below:
BHMC, BHN, and BHCS: 3:1
BHIP: 4:1

12- Are there AAs (Anesthesiologists Assistants) staffing any of the facilities? Are AAs in the bylaws? Currently, only BHMC staffs Anesthesiology Assistants. They are employees of the hospital. There are currently no AA's at any other region.

13- What is the projected start date for services? The current contract expires in September 2022.

14- Do providers currently have a restrictive covenant that would prevent them from staying and working in North Broward Health? Broward Health has a non-solicitation clause that prohibits

Broward Health from, directly or indirectly, impairing or attempting to impair the relationship between Broward Health's current anesthesia contractor and its employed personnel by contracting with or making offers of employment to such personnel.

15- How many anesthesia openings are there currently across the system? Broward Health is not able to provide that information at this time.

16- How many locums are currently working across the system? Broward Health is not able to provide that information at this time.

17- Does Broward Health currently have any contractual obligations that would prevent it from, directly or indirectly, assisting or attempting to assist a Contractor in contacting physicians or medical personnel currently providing Anesthesia Services at Broward Health about potential employment by a Contractor? Broward Health has a non-solicitation clause that prohibits Broward Health from, directly or indirectly, impairing or attempting to impair the relationship between Broward Health's current anesthesia contractor and its employed personnel by contracting with or making offers of employment to such personnel.

18- Is Broward Health aware of any contractual obligations owed by physicians or medical personnel currently providing Anesthesia Services at Broward Health that would prevent a Contractor from contacting or hiring those physicians or medical personnel? Broward Health has a non-solicitation clause that prohibits Broward Health from, directly or indirectly, impairing or attempting to impair the relationship between Broward Health's current anesthesia contractor and its employed personnel by contracting with or making offers of employment to such personnel.

19- Is Broward Health placing any restrictions on Contractors from contacting physicians or medical personnel currently providing Anesthesia Services at Broward Health, either prior to or subsequent to the announcement of an Awarded Contract? Please consult the specifications and minimum requirements under the RFP. To the extent that any obligations or restrictions are contained in the relationship between Broward Health and an awarded bidder, such obligations and/or restrictions will be handled during the contract negotiations.

20- As Broward Health is requiring that any Contractor submits resumes and/or credentials for the medical professionals the Contractor intends to use to provide Anesthesia Services at Broward Health, will a Contractor be disqualified or have its RFP response deemed nonresponsive if the Contractor, after being awarded a contract, proposes to provide Anesthesia Services with a substantially different group of medical professionals who were

not included in their RFP Response? Contractor should submit an accurate representation of the group of medical professionals it intends to provide anesthesia services.

BHN:

1- Are the OR, GI, and IR/Cath/Stroke rooms within a reasonable proximity to provide medical direction coverage? GI is on the 1st floor. The OR, Cath Lab and IR are on the 2nd floor, however Cath Lab and IR are not in close proximity of OR suites.

2- Please confirm that you have 2 providers in-house 24/7 and 1 provider on beeper 24/7 for a total of 3 levels of call. Currently, there is only one provider scheduled for in house. We are looking to make it two providers in house.

3- Which providers are responsible for call? ex: 1 MD in-house for Emergent Cases, 1 MD in-house for Trauma, 1 CRNA on beeper One in house MD and one MD on beeper. CRNA/CRNA students work on the weekends. Unsure if they are on call or scheduled.

4- Does the provider on beeper call get PCDO? (Post Call Day Off.) If a provider holds the beeper overnight, they are off the next day? This would be determined by the awarded vendor.

5- Are 2 clinicians in house 24/7 or is there one on call? One MD is in house and one is on call off-site according to their schedule.

6- Where is the GI/IR room located and what is its proximity to the operating room? GI is located on the first floor; IR is on the 2nd floor. They are not in close proximity.

BHCS:

1- Are the OR, CYSTO, OB, GI, Cath, PEDs Sed rooms within a reasonable proximity to provide medical direction coverage? Yes, everything is located within close proximity (primarily 2nd floor near main OR) except OB which is located on 1st floor of new tower.

2- Do you require a pediatric fellow anesthesiologist for Peds sedation? Yes.

3- Which providers (MD or CRNA) are responsible for the OB and beeper call? For OB 24-hour in-house coverage. MD is responsible for back up coverage.

4- Does the provider on beeper call get PCDO? (Post Call Day Off.) If a provider holds the beeper overnight, they are off the next day? This would be determined by the awarded vendor.

5- What is the pediatric patient age range and volume? Infant to 18 years of age with approximately 300-350 cases/year.

6- Where is the GI/cath room located and what is its proximity to the operating room? Adjacent to main ORs.

7- Question about operating rooms 6 and 7: Are they a 7:00am or 8:00am start (the two maps are unclear on this)? BHCS has two rooms that have 1-hour staggered start time.

8- What is the obstetrics volume? Approximately 1,875 per year (Refer to Section II. Introduction).

BHIP:

1- Are the OR, Ancillary, GI, rooms within a reasonable proximity to provide medical direction coverage? Yes.

2- Where is the ASC located relative to the other anesthetizing locations? i.e. is the ASC in the same building or a separate physical building? The ASC is located in a separate building.

3- What types of procedures are being done in the "Ancillary" room? Minimum invasive Cardiology /IVR procedures / Bronchoscopy.

4- Does the provider on beeper call get PCDO? (Post Call Day Off.) If a provider holds the beeper overnight, they are off the next day? This would be determined by the awarded vendor.

5- Where is the GI/cath room located and what is its proximity to the operating room? Adjacent to surgical services.

6- Where is the ambulatory surgery center located? In a separate building, on campus.

BHMC:

1- Are all rooms within reasonable proximity to provider medical direction (care team) coverage? Yes.

2- Do you require a cardiac trained anesthesiologist for your heart rooms? Yes.

3- Do all providers share equally in the call coverage or are there segmented call teams? Broward Health has segmented call teams for Cardiac and Transplant.

4- What types of procedures are performed in the FCFS room? Mostly trauma and some ortho cases.

5- Do you require a pediatric fellow for Peds sedation? Yes.

6- Please confirm how many providers are on call overnight. The site staffing indicates 5 providers in-house for: emergent cases, trauma, liver/kidney, and 2 OB. One (1) emergent, one (1) trauma with back up, one (1) liver/kidney, two (2) OB.

7- In addition to 5 in-house providers, are there 4 additional providers for OB, Open Heart, Transplant, and Trauma? Or are some of these included in the in-house coverage? They are included in the five (5) in-house provider coverage, not additional.

8- Is there a hybrid room on Sundays (the two maps are unclear on this)? Yes, the room is available 24/7 for emergencies.

9- What is the pediatric patient age range and the pediatric volume? Infant to 18 years of age. Are the pediatric cases covered by Fellowship trained Pediatric Anesthesiologists? Yes, with CRNA assistance. FY21 Pediatric Volume provided below:

Row Labels	Sum of SumOfQTY
Medicaid	22
Commercial	15
Managed Care Medicaid	219
Managed Care Commercial	78
SelfPay	9
Grand Total	343

10- What are the number of cardiac cases? FY21 Cardiac Cases provided below:

Row Labels	Sum of Encounters	Sum of Enc O.R.
Cardiac EP	590	13
Cardiac Open Heart Surgery	360	317
Cardiac Surgery (xcl CABG/Valve)	438	96
Grand Total	1,388	426

11- What are the number of liver transplants? Approximately 15 livers annually, and 30 kidneys annually. This program is ramping up.

12- How many deliveries are performed annually? Approximately 4,000 per year (Refer to Section II. Introduction).

END ADDENDUM THREE