
**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM****SUBJECT:** RFI-600219-07/BJC - Aeromedical Helicopter Services**DEPARTMENT:** Administrative Services**DIVISION:** Purchasing and Contracts**AUTHORIZED BY:** Frank Raymond**CONTACT:** Betsy Cohen**EXT:** 7112**MOTION/RECOMMENDATION:**

Staff is requesting Board direction on how to proceed regarding RFI-600219-07/BJC - Aeromedical Helicopter Services.

County-wide

Ray Hooper

BACKGROUND:

Seminole County issued a Request for Information as defined in s. 287.012(21), Florida Statutes, with the intention of evaluating the feasibility for the acquisition of aeromedical helicopter services. These services will include an Emergency Medical Services helicopter to primarily be used for emergency scene response within Seminole County and to agencies outside of the County during mutual aid requests. On rare occasions, the helicopter may be utilized for hospital interfacility transport. Seminole County Fire Department is one of the largest fire/rescue departments in Central Florida, responding to over 25,000 emergency calls per year from 15 County fire stations. Also located within Seminole County are six (6) municipal fire departments that operate from an additional 15 fire stations.

The County advertised the project and received two (2) submittals in response to the solicitation. The proposals from Air Methods and Omniflight are contained in the backup. The submittals addressed the following:

Equipment: Type of aircraft proposed, pictures or sketches of Medical Interior, breakdown of communications equipment to be installed in aircraft, confirmation to meet all Florida Department of Health requirements for an Air Ambulance.

Qualifications of Staff: Minimum hiring requirements for pilots and maintenance personnel, initial and recurrent training, number of staff that will be dedicated to the SCFD program.

History of Firm: Number of years in EMS Air Medical services, references and overall safety record for the last five years.

Support Services: Approach of how the aircraft will be serviced; locations of regional service centers to be used and locations of back-up or substitute aircraft and how they will be utilized for the SCFD program. Billing processes that the firm intends to handle to include location of billing center and intended method of reporting revenue generation and patient billing data to the County.

Insurance coverage: Company insurance coverages to include: Workers' Compensation, General Commercial Liability, Business Automobile Liability, and Professional Aviation Liability.

Technical Approach: Staffing of the aircraft's pilot and medical crew, proposed location of the aircraft's base of operation, proposed flight mission profiles (scene, interfacility, regional response, rescue, etc.), Proposed Service area, approach to coverage for Seminole County in the event the aircraft leaves the County including options and costs for dedication to Seminole County, back-up aircraft usage (including maximum guaranteed down times), coverage by network aircraft (including the locations of these aircraft and estimated response time to arrive on scene in Seminole County), the need for any logistical usage of Seminole County assets such as: Dispatching, flight following, crew equipment, and uniforms, medical staffing and medical director coverage, intended handling of medical quality assurance and records.

Fees: Patient billing rate structure, any program subsidy funds expected from the County, any fees to the county for non-medical usage of the aircraft (Aerial observation, Command/Control, and Crew Training).

Term of Agreement: Intended timeframe for the term of the agreement.

All fees are assessed via patient billing and no County subsidy is required. The County intends to issue a Certificate of Necessity for a total period of five (5) years for this service.

On November 11, 2007, the Board of County Commissioners directed staff to compile a matrix to compare additional information from both of the firms. The information is included as part of the backup documents for further evaluation.

STAFF RECOMMENDATION:

Staff is requesting Board direction on how to proceed regarding RFI-600219-07/BJC - Aeromedical Helicopter Services.

ATTACHMENTS:

1. Tabulation Sheet
2. Omniflight Helicopters Proposal
3. Air Method - Life Net Proposal
4. Additional information from both firms

Additionally Reviewed By:

County Attorney Review (Arnold Schneider)

B.C.C. - SEMINOLE COUNTY, FL TABULATION SHEET

Project: RFI-600219-07/BJC – Aeromedical Helicopter Services

Date: August 1, 2007

Time: 2:00 P.M.

ALL SUBMITTALS ACCEPTED BY SEMINOLE COUNTY ARE SUBJECT TO THE COUNTY'S TERMS AND CONDITIONS AND ANY AND ALL ADDITIONAL TERMS AND CONDITIONS SUBMITTED BY THE PROPOSERS ARE REJECTED AND SHALL HAVE NO FORCE AND EFFECT. RFP DOCUMENTS FROM THE PROPOSERS LISTED HEREIN ARE THE ONLY SUBMITTALS RECEIVED TIMELY AS OF THE ABOVE OPENING DATE AND TIME. ALL OTHER DOCUMENTS SUBMITTED IN RESPONSE TO THIS SOLICITATION, IF ANY, ARE HEREBY REJECTED AS LATE

Proposers:

<p>Air Methods Corporation's, Wholly Owned Subsidiary: Rocky Mountain Holdings LLC d/b/a LifeNet</p> <p>7301 S. Peoria Englewood, CO 80112 (800) 433-3555 – Phone (303) 792-7568 – Fax David L. Dolstein</p>	<p>Omniflight Helicopters, Inc.</p> <p>16415 Addison Road Addison, Texas 75001 (972) 776-0130 – Phone (972) 776-0135 – Fax Brian J. Burrell</p>
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Status:

- Tabulated by Betsy J. Cohen, Procurement Supervisor (Posted 8/03/2007 at 12:00 PM)
- Evaluation Committee Meeting: August 21, 2007 @ 2pm, CSB, 1101 E. 1st St., Rm. 3223, Sanford, FL
- Award Recommendation: Air Methods Corporation's, Wholly Owned Subsidiary: Rocky Mountain Holdings LLC d/b/a LifeNet – BCC date: 11/13/2007 (Posted 9/24/2007 @ 11:13 AM)



Omniflight Helicopters

Response to RFI

Seminole County Board of County Commssioners

1 August 2007

This response accurately represents the capabilities and intentions of Omniflight Helicopters. The undersigned, on behalf of Omniflight Helicopters certifies that Omniflight understands and has complied with the terms of this RFI. Additionally Omniflight understands that a copy of this cover letter will be included as an exhibit in the final contract.

Primary Orlando Regional Healthcare contact:

Joe Pearce – Program Director
1414 Kuhl Ave, MP 41
Orlando, Florida 32806
321-841-8910

Primary Omniflight Helicopters contact:

Brian Burrell – Regional Manager
990 SouthLakes Way SW
Vero Beach, FL. 32968
772-766-9889
bburrell@omniflight.com

The following individuals may enter into binding agreements with Seminole County:

Steve Plochocki, Chairman/CEO
Gaylan Crowell, Vice Chairman
David Pilotte, CFO

Signature: _____



Name: _____

Brian J. Burrell

Title: _____

Regional Manager

Date: _____

7-31-07



ORLANDO REGIONAL
Level One Trauma Center
AIR CARE TEAM

In partnership with

OMNIFLIGHT

**Response to
Request for Information**

Prepared for

Seminole County Board of County Commissioners

By

**Brian Burrell RN, EMT-P
Regional Manager**

1 August 2007

Omniflight Helicopters

16415 Addison Parkway, Ste 400
Addison Texas 75001
972-715-4614

Executive Summary:

The Air Care Team – Seminole County’s Airborne Level 1 Trauma Center

Orlando Regional Medical Center (“Orlando Regional”), in partnership with, Omniflight Helicopters, Inc. (“Omniflight”) is pleased to present this Response to Request for Information (“Response”). Since 1984, Omniflight and Orlando Regional have operated greater Orlando’s premier air ambulance provider, the Orlando Regional Air Care Team (“the Air Care Team”).

In 23 years, the Air Care Team has transported nearly 19,000 patients and flown over 1.2 million accident free miles, a milestone in the air medical industry. Everyday, from its two bases in the Orlando area, the Air Care Team provides the medical expertise of Orlando Regional’s Level I Trauma Center to the citizens of and visitors to Seminole County. Since 1984, The Air Care Team has been Seminole County’s primary mode of air medical transport. In that time, the Air Care Team has flown nearly 2,000 patients from Seminole County.

The Air Care Team has been a strong partner with all of Seminole County’s EMS agencies. As the primary link between Seminole County’s EMS Services and Orlando Regional’s Level I Trauma Center, the Air Care Team has provided countless hours of educational opportunities and field training to fire departments within the county. This valuable community service has been provided without any cost to the citizens of Seminole County. The ongoing relationship with the Air Care Team providing air medical transport allows local EMS assets to stay within Seminole County providing rapid response to other emergencies.

Air Care Team is an integral part of an organized, multidisciplinary response system that helps patients return to their prior level of function and interaction within society. This continuum of care includes injury prevention, EMS and medical oversight of pre-hospital care, appropriate triage and transport, resuscitation and emergency care, surgical intervention, intensive and general acute care, rehabilitative services, behavioral health, social services, community re-integration plans, and medical care follow-up.

The flight crew members of Orlando Regional’s Air Care Team are stewards in the community and regulatory advocates for the improvement of air medical care at the local and national levels. Memberships and active participation in such organizations as the Association of Air Medical Services, Air and Surface Nurses Transport Association, and the International Flight Paramedics Association are an important aspect of our mission.

The Air Care Team participates and leads team tours for schools, churches and civic groups, field training with EMS providers, community events, and injury prevention programs. Our flight observation program provides the opportunity for our partners in the EMS community, emergency departments, and EMS\ nursing\medical students to fly with our team.

In November 2006, the Air Care Team added a second helicopter to the Orlando market at South Lake Hospital, Clermont. This helicopter allowed us to expand services to transport patients from community hospitals and trauma scenes for specialized treatment and care. Since Orlando Regional’s Air Care Team logs more than 100 flights per month constantly using the organization’s only helicopter, an additional aircraft was needed.

Air Care Team proposes to operate a third helicopter in Seminole County as a mirror to the other two programs it operates in Orange County and Lake County at no cost to the County. The medical flight crew will consist of an Orlando Regional employed Flight Nurse and Flight Paramedic. Omniflight will provide the pilots and mechanics. Air Care Team understands the importance of utilizing Seminole County staff and already employs some, but can not guarantee, to employ paramedics solely out of the Seminole County Fire system. All candidates for employment must meet the minimum standards as set by Orlando Regional. Day to day involvement with the Seminole County Fire Chief and/or designee is of paramount importance for the safety and success of the operation. Both parties will agree to participate in the quality assurance and process improvement initiatives to ensure consistent communications and operations.

A. REQUIRED SUBMITTALS

1. **Request for Information – Page #1 of Packet:** Please see Page # 1 of Packet.
2. **Summary of Litigation:**

- a. *Frank Mendez vs. Native American* – Medical Malpractice claim – This case is in the beginning stage of discovery.
- b. *MedServ AMT and Palmetto Health Alliance vs. Omniflight Helicopters, Inc.* – Breach of Patient Transport and Helicopter Service Agreement claim. This claim is presently in settlement discussions.
- c. *Clark vs. Omniflight* – Age Discrimination Case – Case resulted from termination of employment.

NOTE: Periodically the company is involved in litigation regarding EEOC, billing, or collection cases. These cases are generally settled for nominal amounts.

3. **License Sanctions:** None.
4. **Conflict of Interest Statement:** Please see Conflict of Interest Statement attached.
5. **Compliance with Public Records Laws:** Please see Compliance with Public Records laws attached.

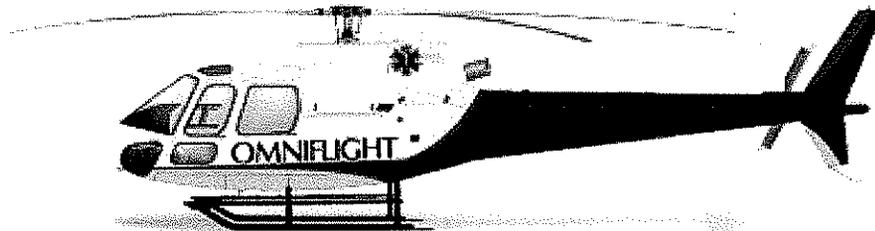
B. QUALIFICATIONS/FEE STRUCTURE

1. Equipment

a. Type of Aircraft Proposed

Omniflight has an excellent relationship with all of the aircraft manufacturers in the air medical industry. Eurocopter products make up the majority of our fleet. Over the past several years there has been a trend toward utilizing single engine aircraft rather than twin. The history of safety and reliability with single engine aircraft have proven that they can be utilized in most all patient transportation scenarios both scene and interfacility critical care.

Omniflight will provide one Eurocopter AS350 (A-Star) model helicopter, configured to accommodate one pilot, two medical crewmembers and at least one patient on a stretcher. The A-Star is currently utilized by Omniflight in several regions, most prevalent in Arizona, Georgia and, most recently, in New Mexico. Omniflight's fleet of A-Stars now exceeds 25 aircraft. Attached at Exhibit B.1. are technical specifications and illustrations of the A-Star.



b. Pictures or Sketches of Medical Interior

Please see the pictures of Medical Interior attached at Exhibit B.1.

c. Breakdown of Communications Equipment to be Installed in Aircraft

Along with a complete avionics package that will include GPS navigation, the aircraft will be equipped with UHF, VHF, 400mhz and 800mhz radio communication equipment that will be compatible with Seminole County's and surrounding departments' systems.

d. Confirmation to Meet all Florida Department of Health Requirements for Air Ambulance Service

The Air Care Team currently meets all Florida Department of Health Requirements for Air Ambulance Service. We will continue to meet these requirements with our Seminole County base of operations.

2. Qualifications of Staff

a. Minimum Hiring Requirements

Medical Crew

For the medical crew, Orlando Regional requires crew members to have a minimum of 5 years of appropriate critical care and scene experience. The average air medical crew member on the Air Care Team has 23 years of direct patient care experience, and maintains the highest educational standards of the industry in Florida.

Pilots

Omniflight will provide four (4) pilots per aircraft. All pilots will meet the current Committee on Air Medical Transport Systems ("CAMTS") Pilot in Command qualifications. Minimum qualifications are; commercial rotorcraft-helicopter certificate with instrument helicopter rating, 2,000 total flight hours, with a minimum of 1,500 helicopter flight hours, at least 1,000 hours as Pilot In Charge in rotorcraft, at least 100 of those hours must be unaided night flight time as Pilot In Charge.

b. Outline of Initial and Recurrent Training

Omniflight Pilot Training Program

<u>Initial Ground Training Curriculum:</u>	<u>Minimum Hours</u>
General Subjects	16.0 hours
Computer Base General Subjects and Aircraft (self pace)	24.0 hours
Night Flight Operations	1.7 hours
Hazardous Materials	2.0 hours
Aircraft Ground	16.0 hours

<u>Initial Flight Training Curriculum:</u>	<u>Minimum Hours</u>
EC135 VFR Flight Training	5.5 hours

<u>Qualification</u>	<u>Minimum Hours</u>
Oral Examination	2.0 hours
EC 135 VFR Check ride	1.5 hours

<u>Recurrent Ground Training</u>	<u>Minimum Hours</u>
Computer Base General Subjects and Aircraft (self pace)	24.0 hours

<u>Recurrent Flight Training</u>	<u>Minimum Hours</u>
EC135 VFR Flight Training	2.0 hours

<u>Qualification</u>	<u>Minimum Hours</u>
Oral Examination	2.0 hours
EC 135 VFR Check ride	1.5 hours

c. Minimum Number of Staff Dedicated to SCFD Program

The Air Care Team's helicopter medical crew of three, consists of Pilot, Flight RN (who is also a Florida Paramedic) and Flight paramedic on each flight. The Air Care Team program in Seminole County will consist of the same crew members. Each flight will be under the medical direction of the Medical Director at Orlando Regional.

3. History of Firm

a. Number of Years in EMS

Air Care Team was established in 1983.

Omniflight was established in 1962. In 1982, Omniflight began EMS aeromedical operations. In 1992, EMS operations became Omniflight's sole focus. Omniflight provides service for a number of the largest, oldest and most successful air medical programs in the country. We are a respected industry leader in safety, maintenance and clinical operations. Our dedication to the patient mission is what drives our programs. Today, Omniflight employs over 900 individuals nationwide, supporting over 20 air medical programs, in nearly 50 locations with over 80 aircraft.

b. Include Up To 3 References that the Firm Has Provided Services to in the Past

Omniflight has a long history of customer service and satisfaction among some of the largest and oldest flight programs in the USA including the Mayo Clinic (1993), MedFlight of Ohio (1982), and LifeLine of Indiana (1984). Contact information for those programs is below:

MAYO AIR MEDICAL TRANSPORT

Luther Hospital 1221 Whipple Street P.O. Box 4105 Eau Claire, WI 54702	Mr. Stu Eickelberger (507) 255-2977
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MEDFLIGHT I

2827 W. Dublin-Grandville Road Columbus, OH 43235	Mr. Rod Crane (614) 791-4400
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LIFE LINE

Clarian Health Partners, Inc. Methodist Hospital of Indiana 1701 North Senate Blvd Indianapolis, IN 46206	Mr. John Clark (317) 278-0213
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The full listing of all of Omniflight's programs is attached to this Response at Exhibit B.3.b.1. While Seminole County has requested only 3 references, Omniflight welcomes Seminole County to contact any of our programs listed in the Exhibit B.3.b.1. Additionally, during a recent acquisition, Omniflight employed a third party, Bassich & Associates, to evaluate our customer support and service excellence initiatives. An excerpt from that study outlining Omniflight's excellent Customer Satisfaction Ratings is attached at Exhibit B.3.b.2.

c. Five Years Safety Record

In 23 years, the Air Care Team has flown over 19,000 patient missions and 1.2 million accident free miles. Omniflight has been the aviation vendor for all of those missions and miles.

Omniflight has been an industry leader in Safety for over 20 years. Our EMS Safety Record is one of the best in the industry with a Ten year rate per 100,000 hours of 1.84. Omniflight's safety culture has been developed with each of our partnerships in both traditional and independent operations nationwide. The Omniflight Director of Safety has a direct report to the CEO of our organization. This direct report enables

our field safety operations to be monitored, improved and evaluated at the executive level on a consistent basis. In addition to the senior level involvement, the safety culture starts at the ground level of our organization. Each Omniflight employee understands and values the crew resource management aspect of where safety starts. We breed this culture from the first day they join our team and continue to build on that foundation on a consistent and continuous basis.

Omniflight Safety Statistics

Jan 1995 to Jan 2007

- 1995 – No accidents
- 1996 – No accidents
- 1997 – No accidents
- 1998 – No accidents
- 1999 – 11/07/99 - BH206L1 - Loss of Control/ Hover/ Tail Rotor Strike/Hard Landing – No injuries
- 2000 – 07/16/00 - BK117 - Maneuvering/Tail Rotor Strike – No injuries. **Aircraft repaired and returned to service the next day.**
- 2001 – 07/20/01 - BK117 - Fuel Management - 2 serious injuries, 1 minor injury
- 2002 – 09/09/02 - BH 206L1 - A/C Impacted Ground - 4 fatal injuries
- 2003 – No accidents
- 2004 – No accidents
- 2005 – 01/03/05 - EC135 - Training/Loss of Control in Flt. - 1 Minor injury
- 2005 – 09/22/05 – BK117 – Maneuvering / Loss of Control in Flt – No Injuries
- 2006 – No Accidents

Accident rate for Five and Ten Years

Five year Rate per 100,000 flight hours – 2.74

Ten-year rate per 100,000 flight hours – 1.84

Hours flown for five year period – 109,491

Hours flown for ten year period – 217,156

Omniflight's management team believes in the fundamental principle that a zero accident rate regarding its aircraft and employees is both and achievable and sustainable. Our vision encompasses education, assistance and training for management and employees utilizing the systemic approach to safety. By applying systems management techniques to all areas of company operations, we will improve the general safety and health of our employees and customers.

Omniflight also charges the safety department with assisting management in resolving unsafe situations and hazards. Through base safety managers, education, event reports, audits, trend analysis, industrial incident reports, training, aircraft design commonality and employee autonomous actions, the safety department will examine new ways to accomplish its responsibilities.

Features of the Safety Program:

- CEO & President Active Participants
- Corporate Safety Committee
- Safety Department
- Safety Managers
- Employee Training
 - New-Hire
 - Recurrent
 - Management
 - Safety Manager
- Safety Modules Training Course for Safety Managers
- Air Medical Resource
 - Management (AMRM/CRM)

- Base Safety Video Tape Library
- Event Reporting System/Internet
- Monthly Event Report Summary/Internet

- Industry Safety Participation-Air Medical Safety Advisory, HAI, Flight Safety Foundation
- Monthly Safety Meetings/Internet
- Discussion Group/Internet
- Document Library/Internet
- Base
- Safety Bulletin Boards w/Periodicals and Posters
- FAA Wings and Industry Awards and Recognition Programs
- Base Operations, Safety and Maintenance Audits
- Quarterly Safety Conference Calls
- Safety Grams/Internet
- Wellness Program

Omniflight Recognized for Safety: 1999 International AIG Insurance Award

On June 23, 1999, OMNIFLIGHT was presented the first annual Medallion Award by AIG Aviation, Inc. The Medallion Award was created in recognition of the outstanding commitment AIG clients have made to ensure the success of their operation through Safety.

Gray Toulmin, AIG Aviation's Senior Vice President presented the etched crystal award by saying, "OMNIFLIGHT is the very first helicopter operator and medical provider to receive this prestigious award. OMNIFLIGHT has distinguished itself in areas such as operational methods and procedures, an established safety program, training procedures, management experience and commitment to further the goals of the organization."

4. SUPPORT SERVICES

A. Include thorough explanation of how the aircraft will be serviced; include locations of regional service centers to be used and locations of back-up or substitute aircraft and how they will be utilized by the SCFD program.

Facilities and Operations

Seminole County's program will be supported from our headquarters in Addison, Texas, and our Regional Maintenance facility in Atlanta, Georgia. This support includes additional technical personnel, backup aircraft, logistics and heavy maintenance.

Operational support will come from Addison. Aircraft records, status sheets, technical issues, quality control guidance, training and standards, check airmen, FAA 135 support, human resources, accounting, logistics and safety administration.

Centralized Maintenance Capabilities

Omniflight's program of service centers and service agreements include Agusta Aerospace, American Eurocopter, Bell Helicopters, Pratt & Whitney, Allison and Lycoming. Our close proximity to AEC, Turbomecca, and Bell enhances our ability to support these aircraft. The main facility in Addison has a full avionics staff and possesses a test cell for engine overhauls.

All Part 135 operators are required to maintain and inspect their aircraft in accordance with FAR Part 135.419, or Approved Aircraft Inspection Program (AAIP). Omniflight's program is a dynamic process enhanced and supported by the Technical Reliability System. The AAIP is constantly being revised with FAA approval to reduce out-of-service time while maintaining the highest standards for aircraft inspection and maintenance. While much of the required maintenance can be done on-Base, all major maintenance procedures are done at the maintenance facility in Addison, Texas or Atlanta, Georgia.

Technical Reliability System

Omniflight has invested significant resources in developing its Technical Reliability Program. The goal of this program is to identify and reduce the direct operating costs of each aircraft by reducing **unscheduled** maintenance.

Unscheduled maintenance has the greatest operational impact on an aviation service provider. It also has many associated secondary costs (customer frustration, depletion of back-up aircraft, increases in priority shipping, etc.) All aircraft parts and systems eventually degrade. The key to reducing unscheduled maintenance is the capability to recognize what systems or components are degrading and/or failing at an unacceptable rate. Once a pattern is discerned, preventive maintenance procedures can be implemented to reduce or eliminate premature part removals. In some cases, discernment of a pattern will be shared with the aircraft's manufacturer to develop permanent solutions to the technical problem.

Omniflight's Technical Reliability system tracks the components of every aircraft in its fleet and identifies technical problems specific to that aircraft. Reduction or elimination of the problem identified by the system results in less out-of-service time, greater mission flexibility and reduced operating costs.

The database of this system is extensive, with more than 150,000 flight hours, which has allowed Omniflight to identify technical problems related to specific types of aircraft. By working with the manufacturer, solutions to these problems have been implemented at their level with a positive impact for the entire industry.

Inspection Management System

The Inspection Management System is an automated management tool for manufacturer and regulatory inspection task requirements. It provides for:

- Instant forecasting of upcoming inspection labor requirements
- Dynamic selection of tasks to meet the need
- Real time compliance recording for each task as it is accomplished, and
- The Field Technician may stop and print compliance documents for signature at any time, resulting in very close to continuous in-service time.

Inspection Management Specialists code all applicable task requirements into the system. The process is called Requirements Maintenance. A file containing these records is installed on field computers at original issue. Revisions are forwarded to field locations on floppy disk as required.

Inspections tasks are selected, presented, and compliance recorded on the field computer. The field computer produces a compliance report for signature and posting in the aircraft logbook. This report is retained in archive records until superseded. Aircraft maintenance specialists with the aid of computer experts developed the Inspection Management System. This is an important distinction in a market full of products developed by computer specialists with little "real world" expertise. The system works, and it was optimized to meet the needs of the maintenance professional.

The Inspection Management System has been field tested in one of the most demanding environments known, our own fleet of air medically equipped aircraft. If it works well for us, it will work well for you.

Maintenance Support

The Director of Maintenance is responsible for all maintenance activities in the field. He supervises the Customer Support Team that works directly with the Maintenance Technicians assigned to each program to ensure quality maintenance is provided on-Base. The Director ensures all maintenance operations completed on Omniflight aircraft are conducted in compliance with Federal Aviation Administration regulations and manufacturer's specifications.

Logistics Support

A network of qualified maintenance professionals who are on-call twenty-four hours a day, seven days a week supports the on-Base Maintenance Technicians. Personnel are on-call to retrieve and ship parts and other personnel are on-call to provide additional expertise for maintenance problem solving.

In addition to an on-Base inventory of parts that is maintained for the unique needs of each aircraft and its maintenance history, there is a major inventory stock at the main facility in Addison, Texas and our Regional Maintenance Base in Columbus, Ohio. Any part that is not available at either location can be personally retrieved and shipped from the nearby manufacturer in Texas.

Maintenance:

All Omniflight aircraft are maintained in accordance with an FAA Approved Aircraft Inspection Program (AAIP). The AAIP encompasses inspection requirements for airframe, engine and optional items installed on each aircraft. In addition to the manufacturer's requirements, Omniflight may mandate additional inspection items depending upon the operating environment or operational history.

Scheduling, completion and tracking of scheduled maintenance is accomplished utilizing specialized software, regularly scheduled meetings/conference calls and general discussions and verbal communication.

Copies of the aircraft status report and/or maintenance planner are available to Seminole County at any time. A copy of the aircraft status report is always kept with the aircraft. A copy of the maintenance planner is available through the designated Lead Technician.

Maintenance Tracking:

Omniflight tracks any scheduled maintenance requirements utilizing a computer based system(s). The systems tracks the following items, but not limited to:

- Inspections
- Servicing
- Overhaul Life
- Retirement Life
- Airworthiness Directives
- Service Bulletins
- Etc.

The system produces two reports

1. A report that depicts all scheduled maintenance items.
2. A report that depicts items coming due within a specified period of time (typically 100 flight hours, 300 cycles, 30 days) which provides the following information (but not limited to)
 - Report Date
 - Current Aircraft Time
 - Part Number
 - Description
 - Due date/time
 - Serial Number
 - Document Number
 - Interval
 - Time since new
 - Remaining
 - Due time/date
 - Etc.

Completing Maintenance:

Checklists are utilized to insure that all scheduled maintenance is complied with in accordance with manufacturer's, FAA, Omniflight and other accepted/approved data.

Each time a scheduled maintenance item is completed, the Technician completing the work completes a maintenance entry in the daily maintenance record. Upon completion of the maintenance entry the maintenance records are compiled and sent to the Omniflight Records Department and reviewed for accuracy and then entered into the computer tracking system. This transfer of data to the Omniflight Records Department may occur via two methods, Electronic scanning and email transmission and postal service. Upon a successful review of the maintenance completed the system will credit the maintenance action and reset the next due time/date. Once the data is entered, the system will produce an updated status report which is then emailed to the aircraft location for printing and placement in the aircraft daily maintenance record.

SCHEDULING:

Minor and/or local scheduled maintenance is reviewed on a daily basis by the Pilot in Command and the Maintenance Technician. In areas working within a multiple aircraft system or region, the assigned Lead Technician will coordinate the maintenance event to minimize any conflicts of multiple aircraft being out of service at one time.

Omniflight maintains a computer generated "Maintenance Planner". This maintenance planner predicts when a scheduled maintenance event will occur. The "Maintenance Planner" takes into account the following factors:

- Current Date
- Current Aircraft Hours/Cycles
- Due Date/Time of Maintenance Event
- Historical (or projected) Flight Volume

The report generated by the maintenance planner depicts the projected date of the maintenance event. Each week, Omniflight holds a maintenance planning meeting in which all applicable maintenance Managers, Supervisors, and Lead Technicians participate in a conference call to review the maintenance plan to determine backup aircraft needs, tools, equipment, and/or additional maintenance support.

Shared Back-up Aircraft

The purpose of Omniflight's back-up aircraft is for the total support of our programs needs. The back-up aircraft are scheduled one year in advance for the support of scheduled maintenance. They are also used for unscheduled maintenance events, training of the program personnel and when available for Public Relation requirements of our customers.

Each week, representatives of Omniflight's Customer Support Team, Flight Operations, Training, Planning, and Maintenance Teams have a meeting and discuss all upcoming scheduled maintenance on our fleet aircraft. We ensure all known scheduled, unscheduled, training and public relation requirements can be fulfilled. We reschedule maintenance and shift resources as required to meet all of our objectives. A new back-up aircraft planner is generated from discussions in this.

Omniflight Helicopters provides a system of company owned and dedicated state-of-the-art back-up helicopters for the hospitals we serve. Back-up contingency plans for our programs, as with all of our hospital-based clients, include:

- Immediate notification of actual or impending downtime by our Base manager to the Director of Operations and Director of Maintenance.
- Immediate analysis of the situation and the formulation of a plan by the Director of Maintenance, Field Maintenance Supervisor and Field Base Maintenance Technician.

- Direct consultation to both the Base Manager and hospital program management to provide the lowest possible downtime for the hospital's primary aircraft. Often, shipping parts and/or sending additional maintenance personnel to the hospital promptly can best achieve this. At other times, downtime will be minimized by the immediate dispatch of the replacement helicopter.
- If scheduled or unscheduled maintenance required the aircraft to be out of service for more than 24 consecutive hours, a back-up helicopter shall be provided.
- Back-up helicopters used to support the SCFD transport program are based at both our Columbus, Ohio and Atlanta, Georgia Regional Maintenance Facilities. These aircraft are designed to support the programs in the region but are not identical to the primary assets on site.

Back up aircraft of like type, will be provided after 48 hours of out of service time.

4. SUPPORT SERVICES

B. Include any patient billing processes that the firm intends to handle and an explanation of the intended billing process to include: location of billing center and intended method of reporting revenue generation and patient billing information to the County.

Patient Billing Process Center

Omniflight currently performs all the billing for Air Care Team, from Patient Billing Process Center located in Arizona at 6402 E. Superstition Springs Blvd., Ste. 224, Mesa, AZ 85206. Omniflight does not outsource billing operations to other organizations other than those owned and/or operated by Omniflight. Fee structures are commensurate with other programs in the region and across the nation. Omniflight follows the trends set forth by Medicare, Medicaid and 3rd party insurance providers to set its charges and billing fees. These charges are reviewed and updated on an as needed basis. Unless a specific request is made by the County for information regarding a specific flight, Omniflight does not intend to report revenue generation information to the County. However, Omniflight does work with its referring counties to provide timely insurance information concerning patients, in accordance with HIPAA regulations. Omniflight will provide patient demographic information to the County to assist the County in the County's billing and collection efforts for any patients transported by the County's ground service.

5. INSURANCE COVERAGE – Include breakdown of company insurance coverages to include: Worker's Compensation, General Commercial Liability, Business Automobile Liability, and Professional Aviation Liability

Omniflight shall procure and maintain over the term of this Agreement the following types and amounts of insurance: (1) commercial general liability insurance in the amount of at least \$50,000,000.00 combined single limit for bodily injury and property damage per occurrence. Coverage shall include broad form property damage and personal injury; and (2) professional liability insurance in the amount of \$5,000,000.00 per occurrence and in the aggregate. Worker's Compensation will be provided in accordance with the requirements of the State of Florida.

6. TECHNICAL APPROACH

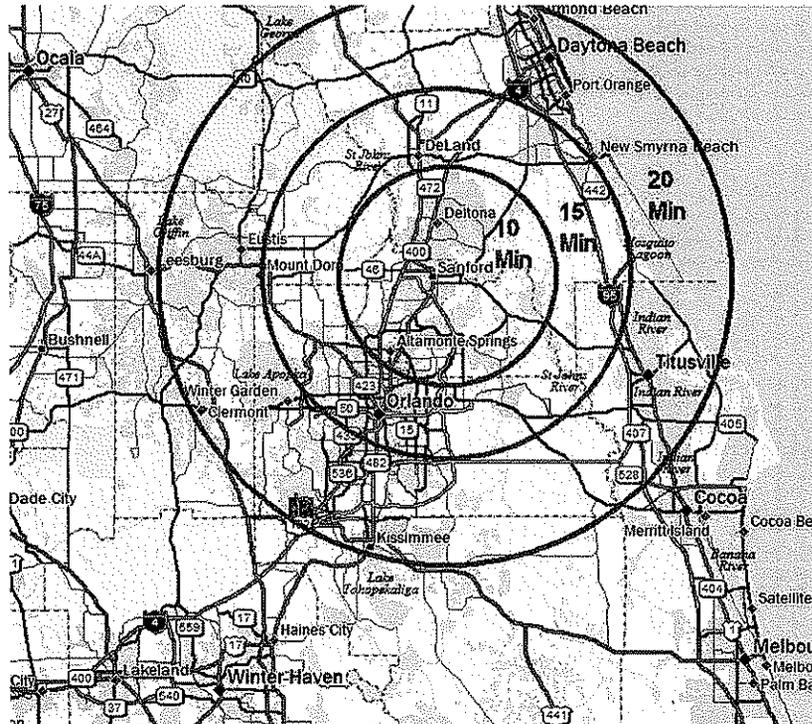
A. Provide a thorough explanation of the proposed operational structure/model for the program.

Staffing: *Air Care Team proposes to operate a helicopter in Seminole County as a mirror to the other two programs it operates in Orange County and Lake County at no cost to the County.* The Team will consist of an Orlando Regional employed Flight Nurse and Flight Paramedic. Omniflight will provide the pilots and mechanics. Air Care Team understands the importance of utilizing Seminole County staff and already employs some, but can not guarantee, to employee Paramedics out of the Seminole County Fire system. All candidates for employment must meet the minimum standards as set by Orlando Regional. Day to day involvement with the Seminole County Fire Chief and/or designee is of paramount importance

for the safety and success of the operation. Both parties will agree to participate in the quality assurance and process improvement initiatives to ensure consistent communications and operations.

Base Location and Service Area:

The most logical and best strategic position for the SCFD base is the Sanford Airport. There is hangar/ramp space as well as accommodations for the crew available. Air Care Team/Omniflight would be interested in the possibility of negotiating for and utilizing Seminole County's existing hangar and crew space if it is available. The range of the aircraft is approximately 150 nautical miles. However, the majority of the calls for service will be within a 40 nautical mile radius of the Sanford Airport. The primary service area will be all of Seminole, N.E. Orange, N.E. Lake, and SW Volusia counties. The Illustration below describes in 5 minute increments the flight time within the primary service area.



Mission Profiles:

Currently Air Care Team services Seminole county with scene response and interfacility transport. System wide the breakdown by percentage is 60% scene and 40% interfacility. Air Care Team's highly trained and experienced crews will be more than capable of responding to all calls for service within Seminole County. Air Care Team has a long history of responding to MCI events within Seminole County and the entire Central Florida Region. The Seminole County base would be a part of the overall trauma and regional emergency response system.

Dispatch:

Air Care Team operates a fully functional air medical Communications Center and Transfer Center out of Orlando Regional Hospital. Their local Communication Specialists are highly trained and experienced. They work well with other Communication Centers in the region. On the national level, an Air Care Team Communication Specialist was recently elected to the NACCS Board of Directors. Calls for service will be answered and flights coordinated via the Communication Center in Orlando.

Medical Director:

Air Care Team currently uses a board certified Emergency Physician based at Orlando Regional as their medical director for both existing bases in Orange County and Lake County. He would continue his involvement with the team in Seminole County. Standing order protocols, policies and procedures will be made available to the Seminole County EMS Medical Director for his review.

Quality Assurance:

Air Care Team utilizes the resources and expertise of the Orlando Regional quality assurance program. They perform 100% chart review with a QA tool that triggers further review of charts based on predetermined criteria. The Air Care Team medical staff provides the highest level of pre-hospital medical care available.

7. FEES:

Seminole County shall not be liable or otherwise responsible for any costs related to Omniflight serving or transporting Seminole County patients or third parties.

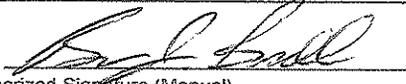
8. TERM OF AGREEMENT:

An agreement between Air Care Team / Omniflight and Seminole County will be effective for a term of five (5) years from the date last signed by the parties, unless terminated, cancelled, or extended as otherwise provided.

CONCLUSION

Omniflight and Orlando Regional are proud of the history of the Air Care Team. The Air Care Team has been providing timely patient transports to the citizens of Orlando and Seminole County for nearly a quarter of a century.

As with the existing Air Care Team programs, SCFD's Air Care Team will begin Level I Trauma care every time the SCFD Air Care Team is requested by one of Seminole County's EMS agencies or arrives at the scene of an emergency or requested to transport a critically ill patient from one of the four referring medical centers. This is a time proven air medical transport model. We look forward to working with Seminole County to base the Air Care Team within Seminole County for the citizens and visitors.

SUBMIT INFORMATION TO: Seminole County 1101 E. 1st Street, Room 3208 Sanford, Florida 32771 PURCHASING AND CONTRACTS DIVISION	REQUEST FOR INFORMATION and Respondent Acknowledgment
Contact: Betsy J. Cohen, CPPB 407-665-7112 – Phone 407-665-7956 - Fax bcohen@seminolecountyfl.gov	RFI-600219-07/BJC Request for Information Aeromedical Helicopter Services
Submittal Due Date: August 1, 2007 Submittal Due Time: 2:00 P.M.	Location of Public Opening: County Services Building, Room #3208 1101 E. 1st Street, Sanford, Florida 32771
Respondent Name: Omniflight Helicopters Inc	Federal Employer ID Number or SS Number: 75-2192527
Mailing Address: 16415 Addison Rd.	If returning as a "No Submittal", state reason (if so, return only this page):
City, State, Zip: Addison, Texas, 75001	
Type of Entity: (Circle one) <input checked="" type="radio"/> Corporation Partnership <input type="radio"/> Proprietorship <input type="radio"/> Joint Venture	X  Authorized Signature (Manual)
Incorporated in the State of: Texas	Typed Name: Brian J. Burrell
Telephone Number: 972-776-0130	Title: Regional Manager - Florida
Toll Free Telephone Number: (800)	Date: 8-01-07
Fax Number: 972-776-0135	

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

The Applicant is expected to completely analyze the information contained in this Request for Information as guidance for the preparation of the submittal. The Applicant's submittal shall be sufficiently specific, detailed, and complete to clearly and fully demonstrate the Applicant's understanding of the proposed work requirements.

Attachment B
Compliance with the Public Records Law

Upon award recommendation or ten (10) days after opening, submittals become "public records" and shall be subject to public disclosure consistent with Chapter 119, Florida Statutes. Respondents must invoke the exemptions to disclosure provided by law in the response to the solicitation, and must identify the data or other materials to be protected, and must state the reasons why such exclusion from public disclosure is necessary. The submission of a response authorizes release of your firm's credit data to Seminole County.

If the company submits information exempt from public disclosure, the company must identify with specificity which pages/paragraphs of their submittal are exempt from the Public Records Act, identifying the specific exemption section that applies to each. The protected information must be submitted to the County in a separate envelope marked accordingly.

By submitting a response to this solicitation, the company agrees to defend the County in the event we are forced to litigate the public records status of the company's documents.

Company Name: Omniflight Helicopters Inc.

Authorized representative (printed): Brian J. Burrell

Authorized representative (signature): 

Date: 07-26-07

Project Number: RFI-600219-07/BJC

THIS FORM MUST BE COMPLETED AND RETURNED WITH YOUR SUBMITTAL

Exhibit B.1.
Specifications of A-Star and Photos of Medical Interior

General Data <i>at sea level</i>	AS350 B2	AS350 B3
Empty Weight of Standard Aircraft	2,690 lbs.	2,716 lbs.
Maximum Takeoff Weight	4,960 lbs.	4,960 lbs.
Useful Load	2,270 lbs.	2,244 lbs.
Maximum Takeoff Weight . . . <i>with External Load</i>	5512 lbs.	6172 lbs.
Usable Fuel Capacity . . . <i>Standard Tank</i>	143 gal.	143 gal.
Baggage Compartment Volume	35.3 cu.ft.	35.3 cu.ft.
Power Plant	1 Turbomeca Arriel 1D1	1 Turbomeca Arriel 2B1
Cabin Volume	105.94 cu.ft.	105.94 cu.ft.
Standard Seating Capacity	1 + 5	1 + 5

Performance Data

Never Exceed Speed	155 kts.	155 kts.
Fast Cruise Speed	133 kts.	140 kts.
Maximum Range <i>with no reserves</i>	360 nm.	359 nm.
Maximum Endurance <i>with no reserves</i>	4.4 hrs.	4.2 hrs.
Hover In Ground Effect Ceiling (<i>5 ft. skid height</i>)	9,850 ft.	13,285 ft.
Hover Out of Ground Effect Ceiling	7,550 ft.	11,200 ft.
Takeoff Power Per Engine	732 shp.	847 shp.
Rate of Climb (<i>all engines operative, MCP</i>)	1,675 fmp.	1,979 fmp.

Exterior Dimensions

Overall length with blade in front	42.45 ft.	42.45 ft.
Minimum width with all blades	26.50 ft.	26.50 ft.

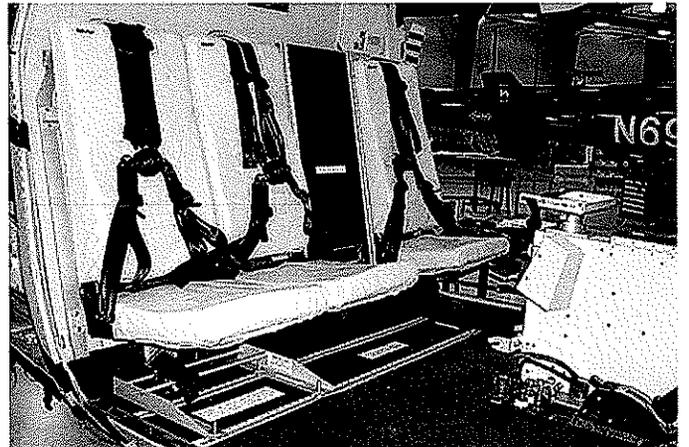
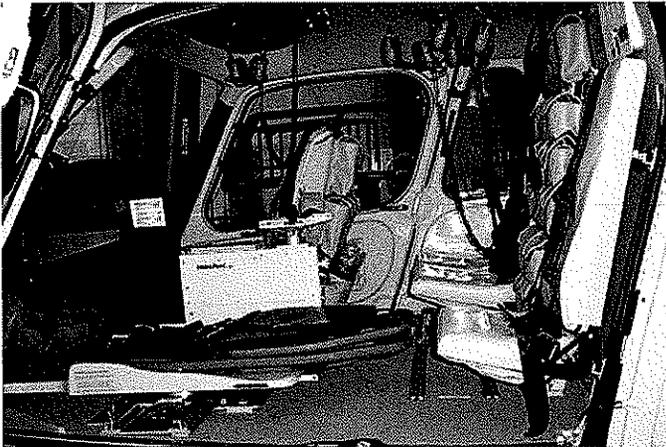
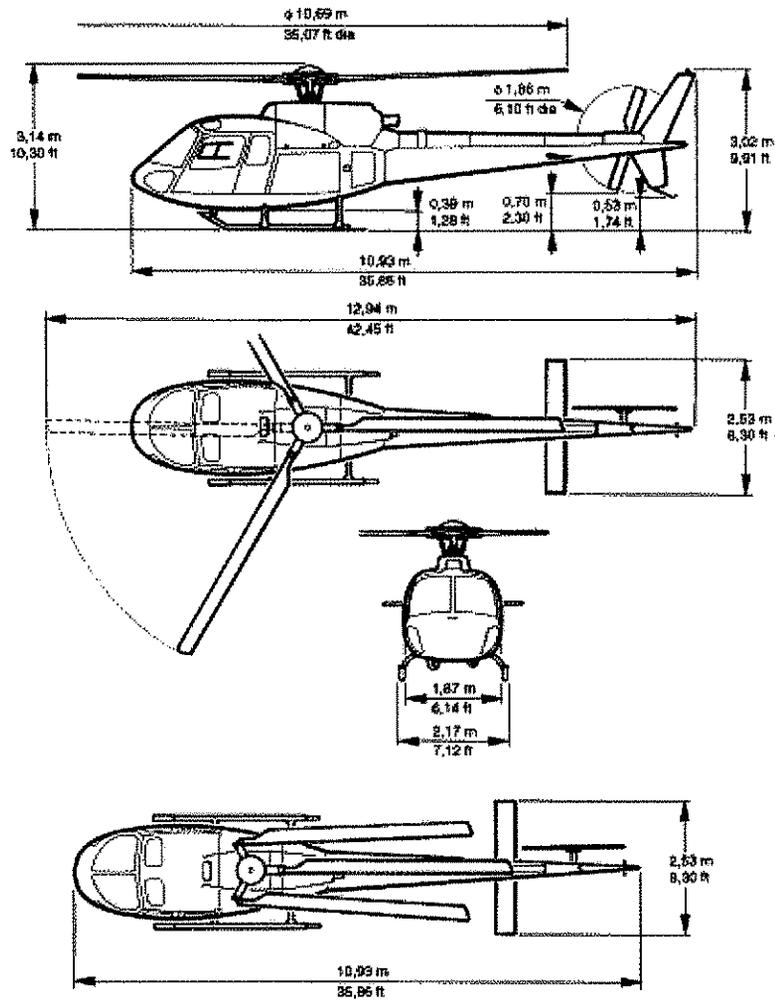


Exhibit B.3.b.
Current Omniflight Supported Air Medical Programs

*Indicates Independent Provider Model Programs

PROGRAM	AIRCRAFT	CONTACT	START
Northwest Texas Healthcare System 1501 S. Coulter Amarillo, Texas 79175	BK117A-4	Ms. Jean Whitehead (806) 354-1631	Apr 03
Alabama LifeSaver * OMNI Transport Systems, LLC 1557 Walnut Hill Circle Birmingham, AL 35234	Bell 206 L-4 Bell 206 L-3(2)	Ms. Lynda LaRue (205) 502-6919	May 01
MEDUCARE* Medical Univ of South Carolina 171 Ashley Avenue Charleston, SC 29425	BK-117 A-4	Mr. Ron Reid (843) 792-9901	July 87
Carolina LifeCare* Myrtle Beach, South Carolina	Bell 206 L-3	Mr. Ron Reid (843) 792-9901	Sept 05
PEGASUS University of Virginia Health Sciences Center 304 Bowen Loop Charlottesville, VA 22911	Agusta 109E	Mr. Robert Knox (434) 978-4426	Sept 96
UNIVERSITY AIR CARE Health Alliance of Greater Cincinnati 3200 Burnet Avenue Cincinnati, OH 45229	BK-117 B-1 (2)	Mr. Dudley Smith (513) 585-5001	Jan 03
MEDFLIGHT I 2827 W. Dublin-Grandville Road Columbus, OH 43235	BK-117 B-2	Mr. Rod Crane (614) 791-4400	July 97
MEDFLIGHT IV 47879 Paper Mill Road Coshocton, OH 42812	EC-135P2	Mr. Rod Crane (614) 791-4400	Jan 93
MAYO AIR MEDICAL TRANSPORT Luther Hospital 1221 Whipple Street P.O. Box 4105 Eau Claire, WI 54702	BK-117 B-2	Mr. Stu Eickelberger (507) 255-2977	July 93
Lutheran Hospital 7950 West Jefferson Blvd. Fort Wayne, IN 46804	BK-117 A4	Mr. Kevin Wellman (260) 435-7212	May 04
LIFE LINE Clarian Health Partners, Inc. Methodist Hospital of Indiana 1701 North Senate Blvd Indianapolis, IN 46206	BK-117 A-3 (2)	Mr. John Clark (317) 278-0213	Oct 84
MEDFLIGHT V 225 Elyria Street Lodi, OH 44254	BK-117 A-4	Mr. Rod Crane (614) 791-4400	Dec 98

MAYO AIR TRANSPORT SERVICE

Mayo Foundation
St. Mary's Hospital
3090 Airport Road South
Mankato, MN 56001

BK-117 (3) Mr. Stu Eickelburger
(507) 255-2977 Oct 84

MEDFLIGHT II

2827 W. Dublin-Granville Road
Marysville, OH 43235

EC-135P2 Mr. Rod Crane
(614) 791-4400 Sept 82

NATIVE AMERICAN AIR *

6001 S. Power Road
Mesa, AZ 85206

BELL 206L3 (3)
(480) 988-3840
AS 350B2 (6)
AS 350B3 (4)
A119
PC-12 (4)
Citation V

Mr. Lee McCammon May 97

NIGHTINGALE

600 Gresham Drive
Norfolk, VA 23507

BK-117 A4 Ms. Genemarie McGee
(757) 668-2500 Feb 82

AIR CARE TEAM

Orlando Regional
1414 South Orange Avenue
Orlando, FL 32806

BK-117 B-1
BELL 206L4

Mr. Joesph Pearce Oct 84
(407) 843-5783

MAYO AIR TRANSPORT SERVICE

Mayo Foundation
St. Mary's Hospital
1216 S.W. Second Street Rochester, MN 55901

BK-117 C-1 Mr. Stu Eickelberger
(507) 255-2977 Oct 84

FLIGHT CARE

Saint Mary's Hospital
830 S. Jefferson Avenue
Saginaw, MI 48601

BK-117 A-4 Mr. Shane Hunt
(989) 776-8574 March 87

RESCUE AIR 1*

PPO Box 2257
Kennesaw, GA 30150

AS350B2 (5) Ralph McDaniel
(770) 590-8118 August 06

LIFESTAR

Memorial Healthcare System
4700 Waters Avenue
Savannah, GA 31414

BK-117 A-3 Mr. Rick Shores
(912) 350-8841 June 85

CareFlight

Community Medical Center
2827 Fort Missoula Road
Missoula Montana
(Independent provider model)

AS350B3 Dale Dallman
406-327-4140 Sept 05

CAREFLIGHT

McKenna Hospital
800 East 21st Street
Sioux Falls, SD 57117-5045

BELL 222 UT Ms. Francie Miller
(605) 322-2077 June 86

MEDFLIGHT III

110 West 2nd Street
Wellston, OH 45692

EC-135P2 Mr. Rod Crane May 86

Exhibit B.3.b.2.

EXECUTIVE SUMMARY EXCERPTS FROM A CUSTOMER AND INDUSTRY ANALYSIS STUDY SUBMITTED TO ANTARES CAPITAL BY BASSICH & ASSOCIATES, INC. COVERING OMNIFLIGHT AND NATIVE AIR

Survey of Customer Satisfaction

Recently during an acquisition,

Strength of Omniflight's Customer Relationships

- Omniflight has very strong customer relationships
- Average rating for overall customer satisfaction: 4.9 (out of 5)
- Average security rating: 5.0 (out of 5)

Omniflight has very strong customer relationships. An average rating of 4.9 for overall customer satisfaction places Omniflight in the top 99th percentile of companies that Bassich has studied. While Bassich's study sample of 4 Customers is too small to be statistically relevant, Bassich believes that most of Omniflight's customers of hospital-based programs are likely as pleased with the Company's performance as those covered in this study. Hospital customers of air medical service typically sign long-term contracts that last more than 5 years. Therefore they are very meticulous in their evaluation of suppliers and only sign contracts with suppliers once they are certain that all aspects of supplier performance meet their standards. Customers are highly satisfied with Omniflight because it continually provides them with the safe, reliable, cost-effective and accountable service that they desire. Because Omniflight's services are often part of high-cost, life-or-death medical situations, Customers keep a very close eye on the Company's performance and would detect any weaknesses in Omniflight's performance. However, Customers contacted by Bassich report none, with the exception of Mayo Air Transport, which would like Omniflight to enlarge its fleet of back-up aircraft ¹. It is also worth noting that Bassich did not contact Customers who chose other suppliers instead of Omniflight, and therefore the results are biased towards positive views of Omniflight.

Omniflight's average security rating of 5.0 places it in the top 99th percentile of companies that Bassich has studied, though the statistical relevance of Omniflight's average is much lower than that of most companies that Bassich evaluates. As a result of its long-term contracts with Customers, the security of these relationships is greater than those in most of Bassich's studies. In Omniflight's industry, supplier changes may require altering a contract and could cause Customers significant difficulty in transitioning from one supplier to another, given the sensitive nature of the services involved.

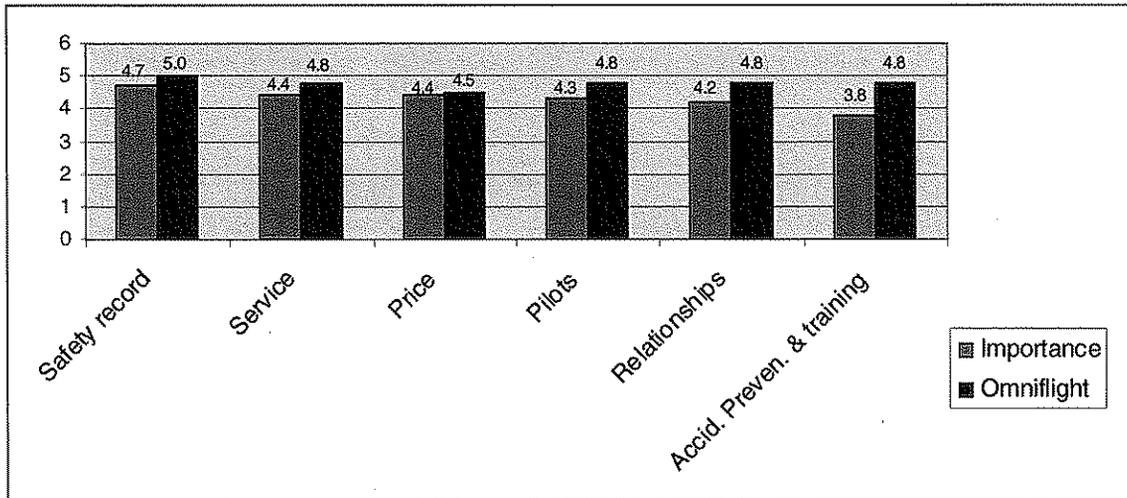
Omniflight's Security with Customers and Overall Customer Satisfaction

Omniflight's average rating for overall customer satisfaction was 4.9. All Omniflight customers contacted by Bassich rated Omniflight a "4.5" or "5" on overall customer satisfaction, which shows that it consistently meets all of their key needs. They report no significant weaknesses in Omniflight's performance and are confident that they are receiving the best available air medical transport service.

Omniflight's average rating for security was 5.0. None of the Customers contacted by Bassich reports any threat to Omniflight's business, which, in many cases, is locked up in long-term contracts that have several years remaining on them.

¹ Yet despite this concern, the Customer gave Omniflight the highest possible rating in overall satisfaction and security.

Key Purchase Decision Factors and Omniflight's Performance



Air Methods, LifeNet Letters of Interest to Seminole County



**Aeromedical Helicopter Service
RFI-600219-07BJC**

JULY 31, 2007

Request for Letters of Interest – Direct Responses

Answers in blue

A. REQUIRED SUBMITTALS:

1. Request for Information – Page #1 of Package

- **Name of Individual, Partnership, Company, Corporation submitting a response;**
- **Signature(s) or representative(s) legally authorized to bind the Respondent.**
- **Address, Telephone Number, Fax Number and all required information.**

SEE ATTACHMENT 1 FOR REQUEST FOR INFORMATION AND RESPONDENT ACKNOWLEDGEMENT FORM

2. Summary of Litigation:

Air Methods and Rocky Mountain Helicopters have been in business for a combined period of over 50 years. During this time there has been litigation that has included labor, regulatory, accident and medical issues. It would be difficult to produce such a list. We can state that there is no current litigation that jeopardizes the corporation's financial stability, insurance limits or ability to meet any of the conditions of this proposal. We will be happy to discuss any of these areas during oral presentations.

3. License Sanctions: List any regulatory or license agency sanctions within the past 5 years.

None

4. Conflict of Interest Statement: Complete the "Conflict of Interest Statement" included in this RFI documents as indicated.

See ATTACHMENT 2

5. Compliance with the Public Records Law: Complete form included in this package.

See ATTACHMENT 3

B. QUALIFICATIONS / FEE STRUCTURE:

The Firm must present information addressing each of the following areas or clearly indicating that they will not be part of the proposed program model.

1. Equipment

A. Type of aircraft proposed

Eurocopter EC 130. AMC operates the largest fleet of aircraft in the US and other options are available and open for discussions.

B. Pictures or sketches of Medical Interior

See ATTACHMENT 4

C. Breakdown of communications equipment to be installed in aircraft.

Aircraft will have radios capable of communicating on any frequency or system required. Our standard radio complement include two aviation radios, two navigation radios, satellite tracking, and a Technosonic radio which is configurable to operate on any 800 system and in all frequency bands.

D. Confirmation to meet all Florida Department of Health requirements for an Air Ambulance.

Air Methods has a license in good standing with the Florida Department of Health. See ATTACHMENT 5.

2. Qualifications of Staff

A. Minimum hiring requirements for pilots and maintenance personnel.

See ATTACHMENT 6

B. Outline of initial and recurrent training

See ATTACHMENT 7

D. Minimum number of staff that will be dedicated to the SCFD program

5 Nurses

5 Paramedic

1 mechanic

4 Pilots

3. History of Firm

A. Include number of years in EMS Air Medical services

Air Methods Corporation was established in Colorado in 1982 and now serves as the largest provider of air medical emergency transport services and systems throughout the United States of America. We provide air medical emergency transport services under two separate operating models: the Community-Based Model (CBM) and the Hospital-Based Model (HBM). In October 2002, we acquired 100% of the membership interest of Rocky Mountain Holdings, LLC (RMH), which conducted both CBM and HBM operations. RMH, Mercy Air Service, Inc. (Mercy Air), and LifeNet, Inc. (LifeNet) operate as wholly-owned subsidiaries of Air Methods.

B. Include up to three references that the firm has provided similar services to in the past.

Director Raymond Chatlos, Polk County EMS (863) 519-7400

Chief Jim Judge, Lake-Sumter EMS, (352) 516-1532

Timothy Cook, CEO, Osceola Regional Hospital, (407) 846-7951

C. Overall safety record for the last five years

We have one of the highest safety records in the industry today. Air Methods logs over 100,000 a year of flight time. Our accident rate is a fraction of the national average. One of the best indicators of safety and true evaluations of safety would be to look at insurance rates and coverage. Air Methods still can carry \$50,000,000. We have an in house safety Department that reports directly to the CEO of the Company.

4. Support Services

A. Include thorough explanation of how the aircraft will be serviced; include locations of regional service centers to be used and locations of back-up or substitute aircraft and how they will be utilized for the SCFD program.

We have regional service centers in Jacksonville, Griffin Georgia and plan one for Orlando area.

We operate with a 7:1 spare to in-service aircraft ratio. Maintenance is performed on a continuous basis to minimize out of service time. Any time scheduled maintenance is done, a spare is provided. We have one dedicated spare for the Orlando area. We also have back up aircraft in North Florida, South Florida and Georgia.

Should we be out of service for an extended period, we would either use our back-up aircraft or move another system aircraft to cover. We actively manage our fleet in much the same way as you would do move ups. We would move Leesburg to a location that would meet the "Standard of Response Coverage" that we collectively develop.

We developed other systems using this active approach. It is based on the Commission on Fire Accreditation International's "Standard of Response Coverage" principals. How this translates into reliability is remarkable. In one County alone, one year, where we shared the County equally with another provider we only missed 3 flights that year and the other provider missed 300 flights.

The main idea is to determine what our standard benchmarks will be and then measure by zone response time performance. With this measurement we can determine if coverage is adequate in amount of concentration, distribution and location.

Ideally we would an additional aircraft in the Orlando area to create a net of coverage. It may be necessary at some point to add another base in the middle

of the system. We are currently working with other Counties in the Orlando area.

- B. Include any patient billing processes that the firm intends to handle and an explanation of the intended billing process to include: location of billing center and intended method of reporting revenue generation and patient billing data to the County.

Our billing process would include patient data gathering from the county's EMS/FD agencies as well as the county hospitals. All billing would be directly to the patients and their guarantors. The information would be gathered by our flight crews and sent to our billing specialists in our national communications center in Omaha Nebraska. The billing division would be responsible for initial invoicing, insurance process and collections. We would propose to have a relationship between our billing departments and share billing and collections information as appropriate and permitted by law. If possible, we would provide the county quarterly reports on revenue generation and patient billing data.

5. Insurance coverage
See Attached 8

6. Technical Approach

- A. Provide a thorough explanation of the proposed operational structure/model for the program. This must include the subjects of:

1. Staffing of the aircraft's pilot and medical crew (include any provisions for utilizing Seminole County Fire Dept. Flight Paramedics)

Each aircraft is staffed with one pilot, one critical care nurse, and one paramedic.

To accomplish this 24/7:

- Each of our aircraft is assigned 4 pilots. Relief pilots are available from other programs if needed.
- The medical crews work 24/48 hour shifts with a "Kelly" day. This requires 3 full time and 2 part time personnel in each position. Part time nurses and paramedics cover Kelly days, vacation and other staffing needs. For our Paramedic coverage we are willing to provide a stand alone program hiring Seminole County Fire Department's Paramedics directly on their off time or contract with the County for Paramedic Coverage.
- Each aircraft is assigned 1.5 FTE of mechanic coverage and each aircraft has one permanently assigned mechanic.

2. Proposed location of the aircraft's base of operation (include provisions for

crew quarters)

TBD. We utilize a variety of locations to operate an aircraft base. This includes hospitals, airports, fire district substations, EMS substations. Crew quarters would be determined by the agreement/location of the operation. These may be provided through a lease agreement or provided by Air Methods/LifeNet through our standard modular building.

3. Proposed flight mission profiles (scene, interfacility, regional response, rescue, etc.)

The primary flight mission for Seminole county would be scene response. This aircraft would also be utilized for inter-facility transfers as well as a mutual assist aircraft in our system model.

4. Proposed Service area. (if applicable, include an estimation of time that the aircraft will be out of Seminole County and not available for scene responses)

We would respond to any request in Seminole County. Utilizing a type of system status approach, we would develop benchmarks for response times and reliability. Initially we would propose 90% of the time we are on scene within 15 minutes and 99% of the time within 20 minutes. Flight times for our aircraft including the Orange County aircraft are:

- Seminole Aircraft 0-5 minutes
- Orange County 10 minutes
- Lake County aircraft 20 minutes.
- Osceola County aircraft 20 minutes.

Similar to a Fire Department if resources become depleted in one area we would move up aircraft to a central location. Our Bartow base is 30 minutes flight time but if all the north east bases were not available we would move up to Orlando as a central location. Additionally we have agreements with Bayflite, who operates 4 aircraft to move up and cover our base when we move up.

5. Firm must address coverage for Seminole County in the event the aircraft leaves the County. This should include:

- a1. options and costs for dedication to Seminole County.

We could discuss this option but we believe this gives less coverage and more cost. An estimate would be 1-2 million per year in subsidy.

- b1. Back-up aircraft usage (including maximum guaranteed down times)
See #4

- c1. Coverage by network aircraft (including the locations of these aircraft and

estimated response time to arrive on scene in Seminole County)

See #4 above and see ATTACHMENT 11 for map of Florida Air Methods or CJ systems aircraft. On July 31st, 2007 Air Methods announced a definitive agreement to acquire 100% of the outstanding common stock of FSS Airholdings, Inc. (parent company of CJ Systems Aviation Group, Inc. or "CJ"). CJ is one of the largest private companies providing air medical transport services in the country and provides these services under both the community-based and hospital-based service delivery models, utilizing a fleet of over 113 helicopters and fixed-wing aircraft. Headquartered near Pittsburgh, PA, CJ has a significant maintenance and overhaul facility located on site. Press release is ATTACHMENT 12.

6. Firm must address the need for any logistical usage of Seminole County assets such as: Dispatching, flight following, crew equipment, and uniforms.
No need for any county assets.

7. Firm must address medical staffing and medical director coverage.

Medical staffing would be accomplished in accordance with 6A1 above.

LifeNet would contract under separate agreement with Medical Director. In each program surrounding Seminole County, LifeNet contracts with local EMS medical director as follows:

- Lake County Dr Geeslin
- Polk County Dr White
- Osceola County Dr Dalton

8. Firm must address intended handling of medical quality assurance and records.

See LifeNet standard for QA and medical record handling in ATTACHMENT 9

7. Fees

A. Firm should address patient billing rate structure

Currently LifeNet's Lift off fee is \$8,979.02 and \$83.61 a loaded mile.

B. Firm should address any program subsidy funds expected from the County
No county subsidy would be requested.

C. Firm should address any fees to the county for non-medical usage of the aircraft
(Aerial observation, Command/Control, and Crew Training)

Any flight time that we could relate to LifeNet, would be at no cost
(Landing Zone Training, crew training, etc...) Our goal would be to work
with the County to determine an amount of time that would meet any of

the County's needs with a nominal charge to offset our "costs" and then place that amount of time into the contract. An estimate would be \$1,250 an hour.

8. Term of Agreement

- A. Firm should address the intended timeframe for the term of the agreement
5 years

0447

STATE OF  FLORIDA

DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL SERVICES
AIR AMBULANCE SERVICE LICENSE

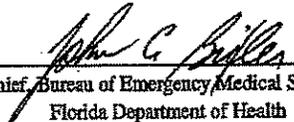
This is to certify that ROCKY MOUNTAIN HOLDINGS L.L.C. DBA LIFENET
Name of Provider

7301 SOUTH PEORIA STREET, ENGLEWOOD, CO 80112
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64E-2, Florida Administrative Code, and is authorized to operate as an
INTERFACILITY/PRE-HOSPITAL

Air Ambulance Service Type of Service
subject to any and all limitations specified in applicable Certificate(s) of Public Convenience and
Necessity and/or Mutual Aid Agreements for the County(ies) listed below:

BAKER, CLAY, COLUMBIA, DUVAL, GILCHRIST, JACKSON, LEON, NASSAU, OKALOOSA, OSCEOLA, POLK, ST. JOHNS,
SUMTER, SUWANNEE, WALTON
County(ies)


Chief, Bureau of Emergency Medical Services
Florida Department of Health

Date 07/02/2007 Expires 03/30/2008

This certificate shall be posted in the above mentioned establishment

ATTACHMENT 5 - Florida License

 Air Methods





ATTACHMENT 6 – Job Description

AIR METHODS CORPORATION
LifeNet Subsidiary

POSITION TITLE: Flight Paramedic
LOCATION / DEPT: LifeNet Subsidiary
DATE APPROVED: 01/15/04
DATE REVIEWED/REVISED: 10/10/05

NUMBER: 0200
TITLE CODE: OPSFLTPMC

SUMMARY: Provides high quality pre-hospital advanced life support including assessment, triage, and treatment utilizing standards and guidelines established by LifeNet Medical Director(s) within scope of practice; assesses the nature and extent of illness and injury to establish and prioritize care needed for safe transport of the critical patient to the appropriate facility working in collaboration with flight nurse partner; is qualified to provide care for patients across the life-span in assigned clinical area; responsible for carrying out the mission and goals of LifeNet assuring that safety remains the highest priority throughout the transport continuum.

ESSENTIAL DUTIES & RESPONSIBILITIES:

- Provides pre-hospital advanced life support care from the initial contact until patient care is relinquished to the accepting medical facility; maintains thorough patient care documentation.
- Practices within his/her scope of practice as defined by the states regulating each base and LifeNet.
 - Maintains competency in knowledge and psychomotor skills by participating in ongoing laboratory and clinical experiences. Communicates educational needs to the Medical Base Supervisor and Medical Education Coordinator.
 - Maintains documentation of required licensure, certifications, continuing education, aviation and safety training, OSHA and HIPAA training, clinical rotations, and advanced procedures.
 - Attends minimum of six educational programs per year pertinent to his/her practice.
- Knowledgeable in use and routine maintenance of all equipment and supplies used by LifeNet. Responsible for reporting medical equipment failures and taking initial steps to insure repair of equipment as directed. Maintains adequate supplies onboard aircraft to deliver patient care. Keeps aircraft clean and orderly to insure rapid response to all transport requests.
- Maintains positive interpersonal relationships with colleagues, EMS representatives, hospitals and the public.
 - Participates in patient and referring institution follow-up.

- Participates in planned outreach marketing and education activities.
- Functions as a medical flight member.
 - Attends pre-mission briefings and mission debriefings and completes necessary documentation.
 - Assists in pre-mission liftoff checklist and assists pilot as requested, i.e., radio, navigational, and visual observation activities. Complies with safety standards to assure safety of self, medical personnel, patient, and equipment.
 - Serves as a flight resource to neonatal/pediatric personnel when transporting specialty patients by helicopter.
- Performs advanced skills and procedures as approved by LifeNet Medical Director(s).
- Serves as a role model, educator and clinical resource.
 - Acts as a preceptor and/or participates in orientation of new employees and students as assigned.
 - Acts as a liaison and communicates program goals and objectives.
 - Participates in continuing and outreach education programs.
 - Conducts aircraft safety briefings as needed.
 - Maintains awareness of current issues related to pre-hospital care through participation in professional activities, i.e., national, state legislative--elected or appointed.
- Participates regularly in departmental activities, projects and committees.
 - Attends and participates in meetings according to established departmental guidelines.
 - Develops standards and guidelines related to the flight program as assigned.
 - Participates in departmental quality improvement activities as assigned.
 - Undertakes and maintains projects as assigned (to include research and publishing opportunities).
- Other duties as assigned.

QUALIFICATIONS: The qualifications listed are representative of those required to successfully fulfill job responsibilities, but may include program-specific qualifications not listed. Contact local program representative for additional requirements.

Required:**Education:**

High School Diploma

Experience:

Minimum three years experience in a busy 911 system

Licenses & Certificates:

Registered EMT-P licensed in state(s) served

National Certification may be required to meet state licensure requirements

Current certifications in BLS/CPR; ACLS; BTLS or PHTLS; and PALS or equivalent

Advance trauma course: auditing of (1) of the following is acceptable TNCC, ATLS, or TNATC within 6 months of hire (Please note a skills lab must accompany all of the above mentioned advanced trauma courses)

NRP if program provides high-risk OB and/or neonatal transports within 6 months of hire

Preferred:**Education:**

Bachelor's degree in health-related field

Experience:

Previous critical care transport experience

Flight Experience

License & Certificates:

Specialty certification: FP-C is required within two years of hire

RELATIONSHIPS:**Reports To:**

Medical Base Supervisor, Medical Manager

Interfaces To:

Medical Director

Supervisees:

None

COMPETENCIES: Competency in advanced practice skills as defined by Medical Director(s) and Medical Standards and Guidelines.

SKILLS: Skills as required to practice as a paramedic as defined by assigned state scope of practice and advanced practice skills as defined by Medical Director(s) and Medical Standards and Guidelines.

PHYSICAL DEMANDS: Physical demands described here are representative of those that must be met by an employee to successfully perform essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

While performing duties of this job, the employee is regularly required to use hands to perform medical procedures and assessments, reach with hands and arms, and speak and hear. The employee is frequently required to sit. The employee is required to stand, walk, climb or balance, stoop, kneel, crouch or crawl, and smell. The employee is required to maintain adequate physical conditioning to be able to perform job duties. Job duties are often performed at high stress levels requiring employee to function effectively and independently while maintaining good working relationships with partners, patients, and customers.

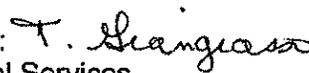
The employee must frequently lift and/or move up to 80 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception, and the ability to adjust focus.

WORK ENVIRONMENT: Work environment characteristics described here are representative of those an employee encounters while performing essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

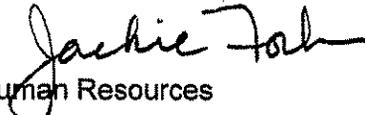
While performing duties of this job, the employee frequently works near moving mechanical parts and in outside weather conditions; and is frequently exposed to blood-borne pathogens or airborne particles, fumes and gases, electrical and chemical hazards, and vibrations/turbulence. Pre-employment and annual physicals will be provided to include appropriate immunizations as required, back screening, and a PPD skin test for tuberculosis.

The noise level in the work environment is usually loud, requiring hearing protection while in-flight, and at a moderate level when in the hospital environment. Pre-employment and annual audiograms will be provided to monitor for hearing loss. Noise attenuation devices will be provided to all employees, but it is the employee's responsibility to utilize these devices to prevent hearing loss.

FLSA STATUS:

LifeNet
Approved By: 
Title: Medical Services

Air Methods
Approved By: 
Title: Senior VP LifeNet Subsidiary

Air Methods
Approved By: 
Title: VP of Human Resources

AIR METHODS CORPORATION
LifeNet Subsidiary

POSITION TITLE: Flight Nurse
LOCATION / DEPT: LifeNet Subsidiary
DATE APPROVED: 01/15/04
DATE REVIEWED/REVISED: 10/10/05

NUMBER: 0100
TITLE CODE: OPSFLTNR

SUMMARY: Provides high quality nursing care including assessment, triage, and treatment utilizing standards and guidelines established by LifeNet Medical Director(s); assesses the nature and extent of illness or injury to establish and prioritize the care needed for safe transport of the critical patient to the appropriate facility; is qualified to provide care for patients across the life span in his/her assigned clinical area; responsible for carrying out the mission and goals of LifeNet assuring that safety remains the highest priority throughout the transport continuum.

ESSENTIAL DUTIES & RESPONSIBILITIES:

- Provides nursing care from the initial contact until patient care is relinquished to the accepting medical facility; maintains thorough patient care documentation.
- Practices nursing within his/her scope of practice as defined by the states regulating each base and LifeNet.
 - Maintains competency in knowledge and psychomotor skills by participating in ongoing laboratory and clinical experiences. Communicates educational needs to the Medical Base Supervisor and Medical Education Coordinator.
 - Maintains documentation of required licensure, certifications, continuing education, aviation and safety training, OSHA and HIPAA training, clinical rotations, and advanced procedures.
 - Attends continuing education programs pertinent to his/her area of practice.
- Knowledgeable in use and routine maintenance of all equipment and supplies used by LifeNet. Responsible for reporting medical equipment failures and taking initial steps to insure repair of equipment as directed. Maintains adequate supplies onboard aircraft to deliver patient care. Keeps aircraft clean and orderly to insure rapid response to all transport requests.
- Maintains positive interpersonal relationships with colleagues, EMS representatives, hospitals and the public.
 - Participates in patient and referring institution follow-up.

- Participates in planned outreach marketing and education activities.
- Functions as a medical flight member.
 - Attends pre-mission briefings and mission debriefings and completes necessary documentation.
 - Assists in pre-mission liftoff checklist and assists pilot as requested, i.e., radio, navigational, and visual observation activities. Complies with safety standards to assure safety of self, medical personnel, patient, and equipment.
 - Serves as a flight resource to neonatal/pediatric personnel when transporting specialty patients by helicopter.
- Performs advanced skills and procedures as approved by LifeNet Medical Director(s).
- Serves as a role model, educator and clinical resource.
 - Acts as a preceptor and/or participates in orientation of new employees and students as assigned.
 - Acts as a liaison and communicates program goals and objectives.
 - Participates in continuing and outreach education programs.
 - Conducts aircraft safety briefings as needed.
 - Maintains awareness of current issues related to pre-hospital care through participation in professional activities, i.e., national, state legislative-elected or appointed.
- Participates regularly in LifeNet activities, projects and committees.
 - Attends and participates in meetings according to established departmental guidelines.
 - Develops standards and guidelines related to the flight program as assigned.
 - Participates in departmental quality improvement activities as assigned.
 - Undertakes and maintains projects as assigned (to include research and publishing opportunities).
- Other duties as assigned.

QUALIFICATIONS: The qualifications listed are representative of those required to successfully fulfill job responsibilities, but may include program-specific qualifications not listed. Contact local program representative for additional requirements.

Required:**Education:**

Graduate of an accredited School of Nursing

Experience:

Minimum three years critical care/emergency nursing experience

Licenses & Certificates:

Current RN license(s) for states of practice

EMS or MICN certification/licensure as required by state regulations

Current certifications in BLS/CPR; ACLS; TNCC/BTLS/PHTLS; and PALS or equivalent

Specialty certification (CFRN, CCRN, CEN) required within two years of hire

Advance Trauma Course requirement: (1) of the following certifications are acceptable: TNCC, ATLS, or TNATC within 6 months of hire. (Please note a skills lab must accompany all of the above mentioned advanced trauma courses)

NRP if program provides high-risk OB and/or neonatal transports within 6 months of hire

Preferred:**Education:**

BSN or Bachelors degree in health-related field

Experience:

Pre-hospital experience

Flight Experience

License & Certificates:**RELATIONSHIPS:****Reports To:**

Medical Base Supervisor, Medical Manager

Interfaces To:

Medical Director

Supervisees:

None

COMPETENCIES: Competency in advanced practice skills as defined by Medical Director(s) and Medical Standards and Guidelines.

SKILLS: Skills as required to practice nursing as defined by assigned state scope of practice and advanced practice skills as defined by Medical Director(s) and Medical Standards and Guidelines.

PHYSICAL DEMANDS: Physical demands described here are representative of those that must be met by an employee to successfully perform essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

While performing duties of this job, the employee is regularly required to use hands to perform medical procedures and assessments, reach with hands and arms, and speak and hear. The employee is frequently required to sit. The employee is required to stand, walk, climb or balance, stoop, kneel, crouch or crawl, and smell. The employee is required to maintain adequate physical conditioning to be able to perform job duties. Job duties are often performed at high stress levels requiring employee to function effectively and independently while maintaining good working relationships with partners, patients, and customers.

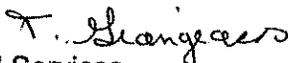
The employee must frequently lift and/or move up to 80 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception, and the ability to adjust focus.

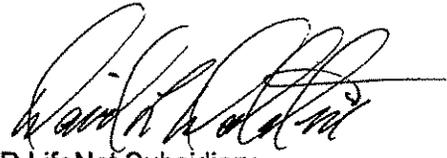
WORK ENVIRONMENT: Work environment characteristics described here are representative of those an employee encounters while performing essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

While performing duties of this job, the employee frequently works near moving mechanical parts and in outside weather conditions; and is frequently exposed to blood-borne pathogens or airborne particles, fumes and gases, electrical and chemical hazards, and vibrations/turbulence. Pre-employment and annual physicals will be provided to include appropriate immunizations as required, back screening, and a PPD skin test for tuberculosis.

The noise level in the work environment is usually loud, requiring hearing protection while in-flight, and at a moderate level when in the hospital environment. Pre-employment and annual audiograms will be provided to monitor for hearing loss. Noise attenuation devices will be provided to all employees, but it is the employee's responsibility to utilize these devices to prevent hearing loss.

FLSA STATUS:

LifeNet
Approved By: 
Title: Medical Services

Air Methods
Approved By: 
Title: Senior VP LifeNet Subsidiary

Air Methods
Approved By: 
Title: VP of Human Resources

AIR METHODS CORPORATION
LifeNet Subsidiary

POSITION TITLE: Medical Base Supervisor
LOCATION / DEPT: LifeNet Subsidiary
DATE APPROVED: 01/15/04
DATE REVIEWED/REVISED: 09/29/05

NUMBER: 0300
TITLE CODE: MEDBASSPVR

SUMMARY: Responsible for oversight of daily operations of assigned base(s); supervises personnel and coordinates activities of LifeNet medical personnel; assists management team in implementation and enforcement of new and existing LifeNet standards; performs duties of active flight crew member.

ESSENTIAL DUTIES & RESPONSIBILITIES:

- Coordinates daily activities of LifeNet medical staff.
 - Provides duty schedule and assures proper medical coverage for all shifts at assigned base(s) (monthly schedule, ill call coverage, vacation coverage, approves schedule changes).
 - Reviews payroll for accuracy and overtime issues, submits ERPA forms for ill and vacation times.
 - Receives feedback related to flight issues/concerns; resolves issues/concerns and/or refers to appropriate person for resolution.
 - Recommends and implements changes to improve efficiency and effectiveness of program performance.
 - Assigns responsibilities and projects to medical crew members.
- Supervises LifeNet medical staff.
 - Serves as a role model for provision of advanced level medical care.
 - Maintains and monitors medical crew licensure, certifications, clinical requirements, OSHA training and testing, and advanced procedures tracking.
 - Insures medical crew members receive appropriate medical attention and follow-up for work-related injuries and exposures utilizing occupational health provider, submits appropriate worker's compensation paperwork to Medical Manager.

- Interviews candidates and provides input for hiring decisions in collaboration with the interview committee.
- Assists in completion of new employee orientation in collaboration with Medical Education Coordinator.
- Prepares and collaborates with Medical Manager and Medical Education Coordinator to complete annual employee evaluations.
- Initiates initial disciplinary action (verbal warning with appropriate documentation) for administrative and behavioral deficiencies in collaboration with Medical Manager and HR. Refers ongoing deficiencies requiring further disciplinary action to Medical Manager. Refers all clinical deficiencies to Medical Manager and/or Medical Education Coordinator.
- Delegates assignments and holds medical employees accountable for project completion.
- Functions as a resource for dissemination of new information and problem resolution.
- Assures proper use, maintenance, and repair of equipment and supplies. Participates in the evaluation of new equipment/supplies. Oversees inventory and supplies at base level.
- Assists Medical Manager in developing and revising standards.
- Participates in Quality Assurance and Improvement through systematic problem identification, and collaborates with the Medical Manager to correct deficiencies and to evaluate implemented change. Assists with chart review and QA/QI data collection as assigned.
- Actively seeks Public Relations and Outreach Education opportunities for assigned base(s) service area. Participates in local EMS/hospital/advisory committees as LifeNet representative.
- Oversees maintenance and organization of crew quarters. Assures that assigned base(s) meets regulatory agency requirements, safety standards, and infection control policy.
- Administers Ride-Along program, if applicable.
- Maintains all requirements and fulfills all essential functions of a flight crew member.
- Other duties as assigned.

QUALIFICATIONS: The qualifications listed are representative of those required to successfully fulfill job responsibilities, but may include program-specific qualifications not listed. Contact local program representative for additional requirements.

Required:

Education:

Meets qualifications of Flight Nurse or Flight Paramedic, as applicable

Position Title: Medical Base Supervisor

Title Code: MEDBASSPVE

Experience:

One year previous flight experience

Licenses & Certificates:

Meets qualifications of Flight Nurse or Flight Paramedic, as applicable

Preferred:**Education:**

Bachelor's degree in business or health-related field

Experience:

Previous management/supervisory experience

Excellent communication, public relations, computer, and staff development skills

License & Certificates:

Specialty certification (CFRN, CCRN, CEN, CF-P, CCEMT-P)

RELATIONSHIPS:

Reports To: Medical Manager

Interfaces To: Medical Education Coordinator, Medical Operations

Coordinator, Aviation staff & manager

Supervisees: Medical personnel

COMPETENCIES: Competency in advanced practice skills as defined by Medical Director(s) and Medical Standards.

SKILLS: Skills as required to practice nursing or paramedicine (as applicable) as defined by assigned state scope of practice and advanced practice skills as defined by Medical Director(s) and Medical Standards. Strong leadership and supervisory skills.

PHYSICAL DEMANDS: Physical demands described here are representative of those that must be met by an employee to successfully perform essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

While performing duties of this job, the employee is regularly required to use hands to perform medical procedures and assessments, reach with hands and arms, and speak and hear. The employee is frequently required to sit. The employee is required to stand, walk, climb or balance, stoop, kneel, crouch or crawl, and smell. The employee is required to maintain adequate physical conditioning to be able to perform job duties. Job duties are often performed at high stress levels requiring employee to function effectively and independently while maintaining good working relationships with partners, patients, and customers.

The employee must frequently lift and/or move up to 80 pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, depth perception, and the ability to adjust focus.

Position Title: Medical Base Supervisor

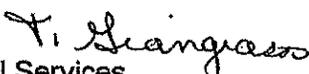
Title Code: MEDBASSPVF

WORK ENVIRONMENT: Work environment characteristics described here are representative of those an employee encounters while performing essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

While performing duties of this job, the employee frequently works near moving mechanical parts and in outside weather conditions; and is frequently exposed to blood-borne pathogens or airborne particles, fumes and gases, electrical and chemical hazards, and vibrations/turbulence. Pre-employment and annual physicals will be provided to include appropriate immunizations as required, back screening, and a PPD skin test for tuberculosis.

The noise level in the work environment is usually loud, requiring hearing protection while in-flight, and at a moderate level when in the hospital environment. Pre-employment and annual audiograms will be provided to monitor for hearing loss. Noise attenuation devices will be provided to all employees, but it is the employee's responsibility to utilize these devices to prevent hearing loss.

FLSA STATUS:

LifeNet
Approved By: 
Title: Medical Services

Air Methods
Approved By: 
Title: Senior VP LifeNet Subsidiary

Air Methods
Approved By: 
Title: VP of Human Resources

Line Pilot Job Description:

Hospital or Community based VFR Helicopter EMS Operations

Requirements:

- Commercial & Instrument License in category.
- ATP rating in category preferred.
- Medical Certificate – Class I or II per contract requirements.
- 24 months recency of flight experience is preferred.
- Proficient in VFR programs.
- College degree from an accredited institution is preferred.
- Excellent interpersonal skills.
- Ability to work respectfully and collaboratively with others.
- Desire to be part of a team.
- Must live within the geographical location of the base (i.e., an approximate driving time of one hour).
- Ability to conduct activities requiring lifting, carrying, pushing or pulling on a frequent basis up to 80 pounds.

Flight Hour Requirements (all in category):

- 2000 hours total time (with a minimum of 1500 hours in category - "rotor wing").
- 1000 rotor wing PIC hours.
- 50 rotor wing instrument hours (**actual or hood**).
- 500 rotor wing turbine hours.
- 100 rotor wing unaided night hours.

Aircraft: AS-350

A training contract will be required.

We are proud to be an EEO/AA employer M/F/D/V. We maintain a drug-free workplace and perform pre-employment substance abuse testing.

Line Pilot Job Description:

Hospital or Community based VFR Helicopter EMS Operations

Requirements:

- Commercial & Instrument License in category.
- ATP rating in category preferred.
- Medical Certificate – Class I or II per contract requirements.
- 24 months recency of flight experience is preferred.
- Proficient in VFR programs.
- College degree from an accredited institution is preferred.
- Excellent interpersonal skills.
- Ability to work respectfully and collaboratively with others.
- Desire to be part of a team.
- Must live within the geographical location of the base (i.e., an approximate driving time of one hour).
- Ability to conduct activities requiring lifting, carrying, pushing or pulling on a frequent basis up to 80 pounds.

Flight Hour Requirements (all in category):

- 2000 hours total time (with a minimum of 1500 hours in category - "rotor wing").
- 1000 rotor wing PIC hours.
- 50 rotor wing instrument hours (**actual or hood**).
- 500 rotor wing turbine hours.
- 100 rotor wing unaided night hours.

Aircraft: AS-350

A training contract will be required.

We are proud to be an EEO/AA employer M/F/D/V. We maintain a drug-free workplace and perform pre-employment substance abuse testing.

Job Description:

AIRCRAFT = BK-117

A Line Mechanic is responsible for ensuring program aircraft are maintained to airworthiness standards prescribed by applicable regulations, airworthiness directives, company policies, and good practices.

Qualifications:

- Ensures aircraft is maintained in an airworthy condition.
- Ensures aircraft, ground support equipment, and work areas are maintained to company standards of cleanliness and appearance.
- Ensures all required maintenance manuals and documents are in order.
- Coordinates with Field Maintenance Supervisor(s) to ensure timely acquisition of parts and tooling.
- Ensures efficient scheduling of field maintenance.
- Ensures all maintenance records are accurate and in accordance with applicable FARs and company policies.
- Ensures company maintenance records are submitted to the principal business office in a timely manner.
- Ensures program parts and supplies inventory is accurate and sufficient.
- Ensures accountability for all expendable items.
- Ensures all used core parts, unneeded new parts, and support equipment is returned to the proper departments in a timely manner.
- Attends monthly company staff meetings.
- Attends program meetings.
- Assists program marketing efforts.
- Performs other duties as assigned by the Aviation Service Manager or Field Maintenance Supervisor

Requirements:

- FAA Airframe and Powerplant certificate as prescribed by FAR 65.
- High school diploma or GED.
- Associates degree preferred.
- Must meet recent experience requirement of FAR 65.83.
- At least 2 years experience maintaining turbine powered aircraft.
- Factory or equivalent training on the assigned make and model aircraft preferred.
- Must be knowledgeable of FARs, General Operations Manual, Safety Program, and assigned aircraft maintenance manuals.
- Maintain harmonious and cooperative relations with the program members, other company members, patients and guests.
- Maintains confidentiality of information deemed confidential.
- Communicates effectively with pilot and medical teams.
- Effective oral and written communication skills.
- Sound judgment and objectivity in decision-making.
- This position requires the ability and/or willingness to work days, nights, weekends, scheduled days off, overtime and to be on-call.

Environment:

The assigned work environment may include hospitals and/or airports. The expected environment includes outdoor operations in most all weather condition during all times of the day or night.

We are proud to be an EEO/AA employer M/F/D/V. We maintain a drug-free workplace and perform pre-employment substance abuse testing.

ATTACHMENT 7 – Medical Crew Training

AIR METHODS CORPORATION
LifeNet Subsidiary

ADMINISTRATIVE STANDARD: Initial & Continuing Medical Education **NUMBER:** 2400
LOCATION / DEPT: LifeNet Subsidiary **CODE:** ADMCONTMEDEDU
DATE APPROVED: 11/23/04
DATE REVIEWED/REVISED: 10/10/05

PURPOSE: To establish minimum standards for initial and continuing medical education which will assist in ensuring clinical preparedness and competency.

STANDARD: In addition to the Air Methods/Life Net Subsidiary job descriptions, LifeNet views the following as the minimum initial and continuing education requirements for all full-time and part-time medical transport personnel that deliver direct patient care aboard a company aircraft. These requirements are in alignment with CAMTS standards.

PROCEDURE:

All medical personnel will successfully complete an initial comprehensive orientation program that will consist of the following:

DIDACTIC COMPONENT

1. Advanced airway management
2. Altitude physiology /stressors of flight
3. Aircraft fundamentals and safety to include radio communications for aircraft and EMS and crew resource management
4. Cardiac emergencies to include acute coronary syndrome (ACS), cardiogenic shock, twelve lead ECG interpretation, arrhythmia recognition, valvular dysfunction, aortic emergencies, hypertensive emergencies, and pericardial tamponade
5. Environmental emergencies to include hyper/hypothermia, near drowning, and electrical injuries
6. Hazardous materials recognition and response
7. Hemodynamic monitoring, pacemakers, automatic implantable defibrillator (AICD), intra aortic balloon pump (IABP), central lines, pulmonary and arterial catheters, ventricular assist devices (VAD), and extracorporeal membrane oxygenation (ECMO)
8. High risk obstetrical emergencies to include preterm labor (PTL), pregnancy induced hypertension (PIH), placenta previa, abruptio placenta, HELLP syndrome and emergency childbirth
9. HIPPA training
10. History of air medicine, philosophy and indications for transport

11. Infection control
12. Industry associations and standards to include CAMTS
13. Medical protocol test
14. Metabolic and endocrine emergencies to include diabetic ketoacidosis (DKA)
15. Multi-trauma to include maxillofacial, neurological (head and spine), thoracic, abdominal and orthopedic)
16. Neonatal emergencies (respiratory distress, cardiac and surgical anomalies)
17. Neurological emergencies to include intracerebral hemorrhage, subarachnoid hemorrhage, seizures and cerebral vascular disease
18. OSHA training
19. Pediatric medical emergencies to include seizures, meningococemia, croup, and epiglottitis
20. Pediatric trauma
21. Pharmacology
22. Quality Management
23. Radiographic interpretation (chest)
24. Respiratory emergencies to include acute respiratory distress syndrome (ARDS), reactive airway disease (RAD), pulmonary embolism, pneumothorax, acid base balance, arterial blood gas interpretation, mechanical ventilation and capnography interpretation
25. Scene management to include safety, disaster management/ triage, rescue/ extrication
26. Stress recognition and management
27. Survival training
28. Thermal, chemical and electrical burns
29. Trauma systems and trauma scoring
30. Trauma in pregnancy
31. Toxicology

The above didactic topics may be taught by several different methods: traditional lecture with discussion, self-directed learning tutorial, web-based or case-scenario teaching, etc. Methodology for completing didactic training will be at the discretion of the program. However, there must be documentation that ensures competency through written objectives and examination testing prior to independent practice.

CLINICAL COMPONENT

Measurable objectives need to be developed and documented for each clinical experience listed below, reflecting either hands-on or scenario-based practical training utilizing a human patient simulator capable of demonstrating physiological changes resulting from treatments and therapies performed.

1. Adult critical care (cardiac, medical, surgical)
2. Pediatric critical care
3. Neonatal intensive care
4. Labor and delivery
5. Emergency care

6. Prehospital care
7. Tracheal intubations (minimum of 5 successful live or cadaver intubations)
8. Invasive procedure lab (mannequin, cadaver or animal)

Following the didactic and clinical components, the new medical employee needs to successfully complete an internship or preceptorship. This allows for further role definition, recognition of the need for additional training and an opportunity to put into practice all previous training.

On annual basis, the following continuing education requirements must be met:

DIDACTIC COMPONENT

1. Aviation safety
2. Altitude physiology and stressors of flight
3. Critical care courses
4. Emergency care courses
5. Hazardous material recognition and response
6. Infection control
7. Medical protocol test
8. OSHA (company modules)
9. State EMS rules and regulations regarding ground transport
10. Stress recognition and management
11. Survival training

CLINICAL COMPONENT

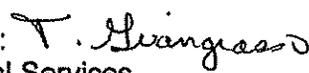
Measurable objectives need to be developed and documented for each clinical experience listed below, reflecting either hands-on or scenario-based practical training utilizing a human patient simulator capable of demonstrating physiological changes resulting from treatments and therapies performed.

1. Adult critical care (cardiac, medical, surgical)
2. Pediatric critical care
3. Neonatal intensive care
4. Labor and delivery
5. Emergency care
6. Prehospital care
7. Tracheal intubations (1 per quarter in each patient age category infant, pediatric and adult as per mission profile)
8. Invasive procedure lab (mannequin, cadaver or animal)
9. Skills maintenance program must be documented and comply with the number of skills required in a set period of time according to the policy of each program.

In addition please refer to Air Methods / Life Net Subsidiary job descriptions for Flight Nurse (Code: OPSFLTNR) and Flight Paramedic (Code: OPSFLTPMC) for required licensure and certifications.

It is also the responsibility of individual transport members to recognize their own educational needs independent of any requirements. Each medical team member has a professional responsibility to maintain and continue to gain knowledge in their respective professions.

FORMS: None

Life Net
Approved By: 
Title: Medical Services

Air Methods
Approved By: 
Title: Senior VP LifeNet Subsidiary

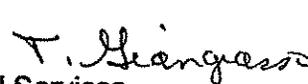
ATTACHMENT 9 – Quality Assurance

- individual inbox. The Medical Manager will have three options at this point:
- a. If the patient care record requires no further action or comments, the Medical Manager marks the call as "Completed" and clears it to Final Review.
 - b. If the Medical Manager determines the need, comments are added by the Medical Manager. The Medical Manager can then mark the call as "Completed" and clear it to Final Review.
 - c. If the Medical Manager determines the call requires review by the Medical Director, the call is left open and moved to the Medical Director.
5. Medical Director Review – There are two methods of routing charts to the Medical Director for review. If the duty crew wants the Medical Director to have immediate access to the patient care record following a flight, they have the option of indicating this in the Field Data record. In Outcome, select "Yes" under "Notify Med. Dir." To send a copy of the patient care record directly to the Medical Director. This does not supercede QA/QI routing. The other method for routing calls to the Medical Director is for the Medical Manager to move the call to them. These calls will route to the Medical Directors' individual inboxes for review and an e-mail notification will be sent to the Medical Director. Upon completion of the review, the Medical Director should mark the call as "Complete" and clear it to Final Review.
6. Final Review – When the QA/QI review is marked "Complete" by either the Medical Manager or Medical Director, the patient care record is routed to Final Review. This gives the medical crew members that participated in the flight the opportunity to review all comments made during the QA/QI review process.
7. Archive – Following Final Review, the patient care record and QA/QI review is routed to Archive where it stays for a predetermined length of time. Following this period of time, the QA/QI review separates from the patient care record. The patient care record is kept in Archive for the length of time determined by legal regulations.

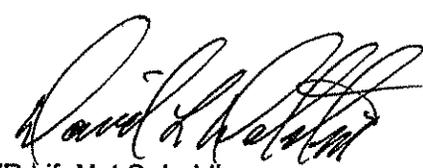
In addition to this standardized QA/QI process, programs may audit areas identified within their program that require additional monitoring and/or action to promote improvement.

FORMS: QA/QI Review, Field Data Records (both electronic)

LifeNet

Approved By: 
Title: Medical Services

Air Methods

Approved By: 
Title: Senior VP LifeNet Subsidiary

Administrative Standard: Quality Assurance/Quality Improvement Process **Code:** ADMQUALASSPROC

AIR METHODS CORPORATION
LifeNet Subsidiary

ADMINISTRATIVE STANDARD: Quality Management
LOCATION / DEPT: LifeNet Subsidiary
DATE APPROVED: 10/10/05
DATE REVIEWED/REVISED:

NUMBER: 4100
CODE: ADMQLTYMNGT

PURPOSE: To ensure that all Life Net programs have an active Quality Management program.

STANDARD: Each program will have an on going Quality Management (QM) program that is designed to objectively, systematically and continuously monitor, assess and improve the quality and appropriateness of patient care and safety of the transport service provided by the program.

PROCEDURE:

1. The QM program should be integrated and include activities related to patient care, (including customer satisfaction), safety, communications and all aspects of transport operations.
2. The program must have established patient care guidelines that are reviewed annually.
3. The Medical Director is responsible for ensuring timely review of patient care, utilizing the medical record and pre-established criteria.
4. The QM program must be linked to risk management:
5. There must be a process to identify, document and analyze sentinel events, and adverse medical events or potentially adverse events with specific goals to improve patient safety and/or quality of care.
6. There will be regularly scheduled multi-disciplinary QM meetings providing a forum for all disciplines involved in the program to present their needs and areas for improvement.
7. The monitoring and evaluation process should include the following characteristics:
 - a. Evidence of annual goals established prospectively for the QM program that provide direction for work groups and that are quantitative. Emphasis must be on loop closure and resolution of the problems within a finite time period.

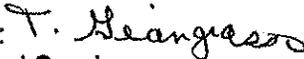
b. Quarterly review should include criteria based upon the important aspects of the transport program. The following examples are encouraged:

- Reason for transport
- Mechanism of injury or illness
- Medical interventions: time performed, appropriateness of interventions and patients response to the intervention
- Patient's outcome and any change in condition during transport
- Timeliness of transport
- Safety practices (these can be handled through the safety committee) with resolutions of issues with findings and actions plans reported back to the QM Committee
- Operational issues (number of completed transports, aborted and cancelled flights due to weather, aborted and cancelled flights due to maintenance, aborted and cancelled flights due to patient condition, and use of alternative modes of transport).

8. The written QM plan should include the following components:

- a. Responsibility/assignment of accountability
- b. Scope of care
- c. Important aspects of care, including clinical outcomes
- d. Operational processes such as financial outcomes and customer needs
- e. Indicators
- f. Thresholds for evaluations
- g. Methodology (process of tools utilized)

FORMS: None

LifeNet
Approved By: 
Title: Medical Services

Air Methods
Approved By: 
Title: Senior VP LifeNet Subsidiary

AIR METHODS CORPORATION
LifeNet Subsidiary

ADMINISTRATIVE STANDARD: Protected Health Information **NUMBER:** 3900
LOCATION / DEPT: LifeNet Subsidiary **CODE:** ADMPROHLTHINFO
DATE APPROVED: 10/10/05
DATE REVIEWED/REVISED:

PURPOSE: To outline levels of access to Protected Health Information (PHI) for various staff members of Air Methods Corporation and to provide a standard for limiting access, disclosure, and use of PHI. To provide a standard outlining patient rights and Air Methods Corporation's responsibilities in fulfilling patient requests. Security of PHI is everyone's responsibility.

STANDARD: Air Methods Corporation retains strict requirements on the security, access, disclosure and use of PHI. Access, disclosure and the use of PHI will be based on the role of the individual staff member in the organization and should be only to the extent that the person needs access to PHI to complete necessary job functions.

When PHI is accessed, disclosed and used, the individuals involved will make every effort, except in patient care situations, to only access, disclose and use PHI to the extent that only the minimum necessary information is used to accomplish the intend purpose. Patients may exercise their rights to access, amend, restrict and request an accounting, as well as lodge a complaint with either Air Methods Corporation or the Secretary of the Department of Health and Human Services.

PROCEDURE:

Notice of Privacy Practices (NPP)

When possible, the Notice of Privacy Practices will be provided to the patient at the time of transport. When the NPP has been given to the patient or family, note this in the patient care record. In addition, the billing office will provide a copy of the NPP to the patient following every transport.

Role Based Access

Access to PHI will be limited to those who need access to PHI to carry out their duties. The following describes the specific categories or types of PHI to which such persons need access as defined and the conditions, as appropriate, that would apply to such access.

Descriptions and Conditions of access to PHI for each job description:

- I. **Administrative Staff:** Patient Care Reports (PCR's): Necessary submission of flight records to regulatory agencies.
- II. **Medical Staff:** PCR's: Pertinent patient information related to transport. May access only as part of completion of a patient event and post-event activities while on duty; QA/QI activities.

- III. Billing Clerk: Intake forms from Dispatch; PCR's; billing claim forms; remittance advice statements; other patient records from facilities. May access only as part of duties to complete patient billing and follow-up and only during actual work shift.
- IV. Pilots: Information necessary for manifest completion. Pertinent patient information pertaining to transport; may access only as part of completion of a patient event and post-event activities while on duty.
- V. Dispatchers: Intake forms, preplanned CAD information on individual patient transports; may access only as part of completion of an incident from receipt of information necessary to dispatch a call to the closing out of the incident and QA and only during actual work shift.
- VI. Medical Education Coordinators: Dispatch flight logs, PCR's; may access only as a part of training and QA/QI activities. All individually identifiable patient information should be redacted prior to use in training and QA/QI activities.
- VII. Medical Managers: Dispatch flight logs, PCR's; may access only to the extent necessary to monitor compliance and to accomplish appropriate supervision and management of personnel and QA/QI activities.

Access to PHI is limited to the above-identified persons only, and to the identified PHI only, based upon the company's reasonable determination of the persons or classes of persons who require access to PHI, and the nature of the health information they require, consistent with their job responsibilities. Access to a patient's entire file will not be allowed except when expressly permitted by company policy or approved by the Privacy Officer.

Disclosures to and Authorizations from the Patient

Medical staff is not required to limit disclosure to the minimum amount of information necessary when disclosing PHI to other health care providers for treatment of the patient. This includes doctors, nurses, etc. at the receiving hospital, any mutual aid provider, fellow crew members involved in the call, and any other person involved in the treatment of the patient who also needs to know that patient's PHI. In addition, disclosures authorized by the patient are exempt from the minimum necessary requirements unless the authorization to disclose PHI is requested by the Company.

Authorizations received directly from third parties, such as Medicare, or other insurance companies, which direct you to release PHI to those entities, are not subject to the minimum necessary standards. For example, if we have a patient's authorization to disclose PHI to Medicare, Medicaid or another health insurance plan for claim determination purposes, Air Methods Corporation is permitted to disclose the PHI requested without making any immune necessary determination. All requests for release of PHI by third parties are to be directed to the Custodian of Records (Mark Keene). No PHI is to be released to third party requestors at the program level.

For all other rules and disclosures of PHI, the minimum necessary rule is likely to apply. An example of the minimum necessary rule is when Air Methods Corporation conducts QA/QI activities. In most situations it is not necessary to disclose certain patient information such as the patient's name, address, social security number or all PHI of the treated patient, in order to conduct QA/QI review. This sensitive information should be redacted or blacked out from the PCR being used for QA review.

Air Methods Corporation Requests for PHI

If Air Methods Corporation needs to request PHI from another health care provider on a routine or recurring basis, we must limit our requests to only reasonable necessary information needed for the

intended purpose, as described below. For requests not covered below, make this determination individually for each request and consult supervisor for guidance.

Hospitals:

Purpose of Request: To have adequate patient records to determine medical necessity for service and to properly bill for services provided. To obtain follow-up information regarding patient condition.

Reasonable necessary information: Patient face sheets, discharge summaries, physician statements and statements of medical necessity, patient diagnosis, treatments and condition.

Ambulance or Paramedic Services:

Purpose of Request: To have adequate patient records to conduct joint billing for patients mutually treated/transported by the Air Methods.

Reasonable necessary information: PCR's for all other requests, determine what information is reasonably necessary for each on an individual basis.

Incidental Disclosures

Air Methods Corporation understands there will be times when there are incidental disclosures about PHI in the context of caring for a patient. The privacy laws were not intended to impede common health care practices that are essential in providing medical care to the individual. Incidental disclosures are inevitable, but these will typically occur by radio or face-to-face conversation between health care providers, or when patient care information is left out for others to access.

The fundamental principle is that staff needs to be sensitive about the importance of maintaining the confidentiality and security of all material created or used containing patient care information. Coworkers and other staff members should not have access to information that is not necessary for the staff member to complete his or her job.

All personnel must be sensitive to avoiding incidental disclosures to other health care providers and others who do not have a need to access PHI. Be attentive to bystanders when making verbal statements about a patient's health information and follow these procedures for avoiding accidental or inadvertent disclosures:

Verbal Security: Staff members should only discuss patient care information with those who are involved in the care of the patient, regardless of physical location. Be sensitive to the level of speech and to bystanders in the area where conversations are occurring. When possible, move conversations to private area to prevent inadvertent disclosures.

Physical Security:

Patient Care and Other Patient or Billing Records: Patient care reports (PCR's) should be stored in safe and secure areas. PCR's should not be left in open bins or on desktops unless in remote base not accessible to the public. Only those with a need to access PHI for the completion of their job duties should have access to PCR's. All original PCR's and accompanying forms will be forwarded to the billing office on regular intervals for long-term storage.

Computers and Data Entry Devices: Computer access terminals and other remote entry devices such as laptops should be kept secure. Access to any computer device should be by password only. Staff members should be sensitive to who may be in viewing range of

the monitor screen and take simple steps to shield viewing of the screen by unauthorized persons. All remote devices, such as laptops, should remain in the physical possession of the individual to whom it is assigned at all times. Passwords may not be shared with anyone.

Penalties for Violation

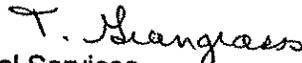
Air Methods takes their responsibility to safeguard patient information very seriously. There are significant legal penalties against companies and individuals that do not adhere to the laws that protect patient privacy. Staff members who do not follow policies on patient privacy will be subject to disciplinary action, up to and including verbal and written warning, suspension and/or termination. Air Methods will provide remedial education and training of policies and procedures when there is a first time violation of policies.

Questions about this Policy or any Privacy Issues

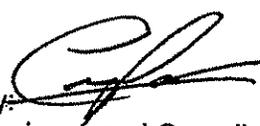
Air Methods has appointed a Privacy Officer (Craig Yale) to oversee policies and procedures on patient privacy and to monitor compliance. The Privacy Officer is available for consultation on any issues or concerns related to protected health information. Contact the Privacy Officer with questions or concerns. Air Methods will not retaliate against any staff member who expresses a good concern or complaint about any policy or practice related to the safeguarding of patient information and the Company's legal obligations to protect patient privacy.

FORMS: Notice of Privacy Practices

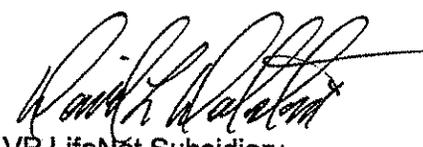
LifeNet

Approved By: 
Title: Medical Services

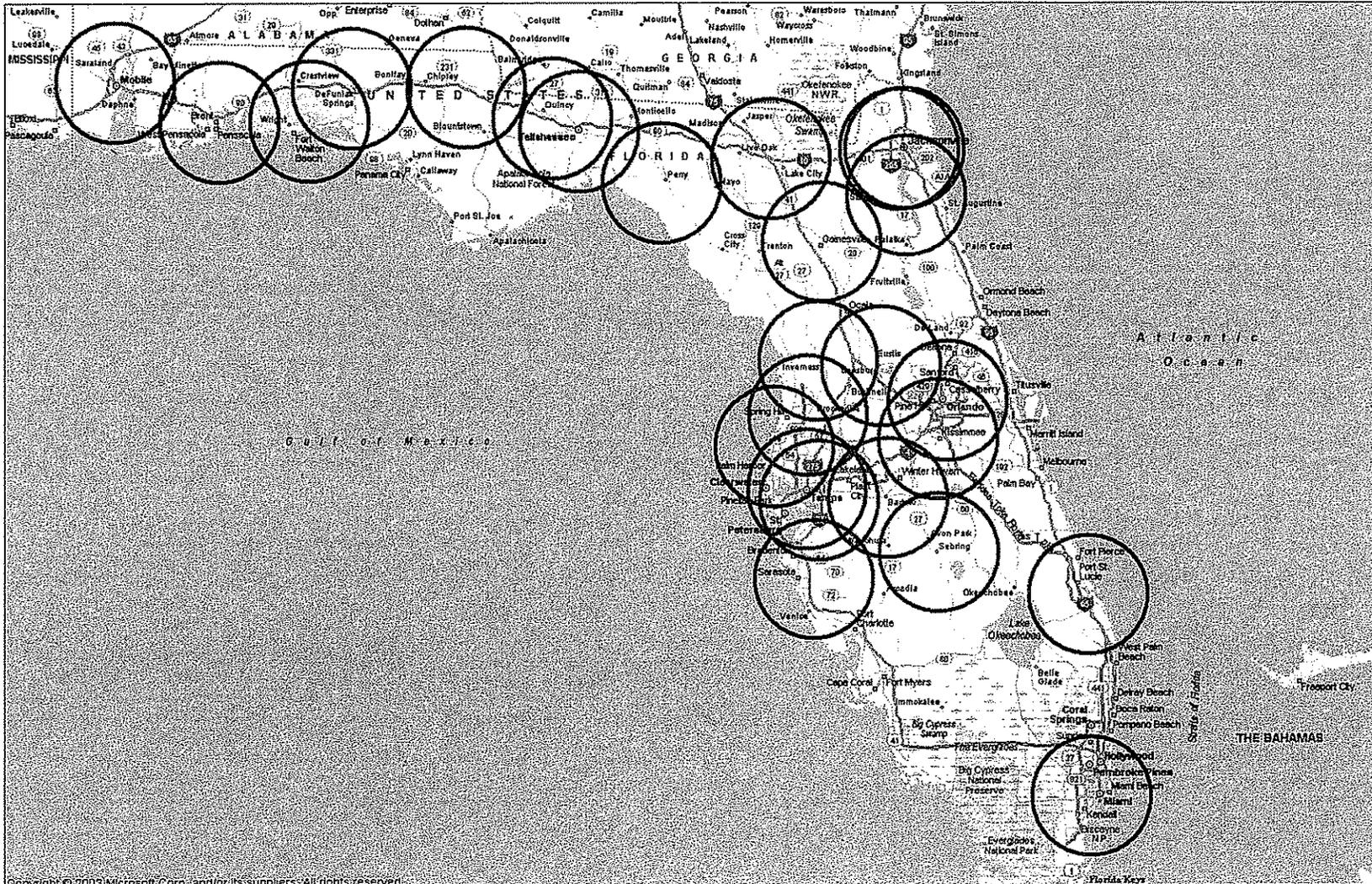
LifeNet

Approved By: 
Title: VP Business and Compliance

Air Methods

Approved By: 
Title: Senior VP LifeNet Subsidiary

ATTACHMENT 10 – Map of Florida Aircraft



Question

Air Methods Responses

Omni Flight Responses

1. Where will the helicopter be stationed?

This has not been determined. Possible locations are dependant on the County's input and needs. It is our experience that a hospital, Fire or EMS Station, or an airport are best suited for this type of operation.

a. An integral part of our strategic plan for the Orlando Metro Area is to station a helicopter and dedicated staff in Seminole County in order to provide timelier scene response to the citizens of the County. Also to facilitate interfacility transports for critical care medical and trauma patients. Orlando Regional Air Care Team has been in discussions with South Seminole Hospital as a location for basing an aircraft with in the next 5 months. South Seminole Hospital is a part of the Orlando Regional system and is a vital health care link to the citizens of Seminole County. The Orlando Sanford International airport is also an excellent location for the aircraft and crew. However, we will defer to the recommendations from the public safety officials of the County as to the base location.

b. Our initial response to the RFI proposed by the County included a single engine AS 350 "A-Star" as the aircraft for the Seminole County base. Since the time of that response, Omniflight has procured three (3) twin engine BK- 117's for the Orlando area in partnership with Orlando Regional Healthcare. This is the same type of aircraft that Air Care Team currently utilizes at Orlando Regional Medical Center and has the capacity to transport 2 patients at once. In order to standardize our aircraft in the region, Omniflight will be replacing the current aircraft at South Lake Hospital in Clermont with a BK-117, and would provide a BK-117 for the Seminole County base. Specifications and capabilities of the BK-117 can be provided to County Officials if necessary.

2. Which is the primary location for the maintenance station of the helicopter?

We have major repair facilities located in Orlando and Jacksonville. We are building a hanger facility at the Leesburg Airport. Generally speaking most maintenance is done on site.

a. The primary location for maintenance will be at the local base in Seminole County. Each one of our helicopters has a dedicated mechanic specifically assigned to that particular aircraft at the local base of operation. Maintenance staff is available and on call 24 hours a day 7 days a week. The majority of maintenance for the aircraft can be accomplished at the local base of operations. If maintenance requires the aircraft be moved to one of Omniflight's 3 regional facilities, a dedicated backup aircraft will be placed in Seminole County for the duration of the maintenance event at no cost to the County.

3. Have any arrangements been made to accommodate the maintenance service?

We have a compressive system in place in Florida for Maintenance.

a. Hangar facilities and maintenance personnel are available currently to provide service for the aircraft at the Orlando Sanford International airport in Seminole County.

Question

Air Methods Responses

Omni Flight Responses

4. Is there any cost to the county associated with the maintenance of the helicopter or the station of the helicopter? If yes, please indicate the cost.

This answer is dependent on the model of operation the County ultimately chooses and the volumes that are projected. Our independent model has no cost for maintenance, facilities, or staff.

a. No. Seminole County will incur no cost related to the operation, maintenance, staffing, or base station for the aircraft. This can be detailed via written agreement with Seminole County.

5. Will your company provide the staffing for the helicopter to include flight paramedics, etc...?

Depending on what the County ultimately chooses, we can provide full staffing including medical and aviation personnel or any aviation depending on the business model.

a. Yes, as with our other two Air Care Team bases that currently provide service to Seminole County, each aircraft is staffed with a Flight Nurse and a Flight Paramedic employed by Orlando Regional Air Care Team. This team is trained and experienced in trauma and interfacility transports and works as a team with Orlando Regional's trauma team and specialists, which provides for continuity of care and practice. This system has been in place at Orlando Regional since 1984 and provides superior care before, during and after transport. We would like to recruit paramedics from Seminole County Fire Department as a priority to provide continuity of care from the field, to the air ambulance, to the facility.

6. What type of reports will your firm provide to the county on a quarterly basis and what information will be included on those reports?

Quality assurance data for all Seminole County Transports and any other reports the County requests Air Methods is able to provide.

a. Flight volumes, patient types, procedures performed and outcomes post flight can be provided. Patient QA, financial reports and other specific information is available and can be detailed in a written agreement with the County. Air Care Team will be transitioning to using a web based Electronic Patient Care Record. Secure access to specific reports can be granted to the Seminole County public safety officials and also the Seminole County EMS Medical Director. Those reports and information will be available at anytime via the secure online access.

7. Will your firm provide a backup unit for the county? If yes, indicate the station where this unit will come from.

We have 4 back up aircraft in Florida, two assigned to the Central Florida Area.

a. As with all of our individual aircraft bases. Omniflight standard practice is to provide a backup aircraft for scheduled "out of service" time prior to the aircraft being taken out of service. For unscheduled out of service time, if the aircraft is unavailable to respond for longer than 24 consecutive hours. The Omniflight service recovery team will be activated to make critical decisions for supplying backup and/or using local system aircraft to supply service to the County.
b. Air Care Team currently has two staffed aircraft in Central Florida: one based in downtown Orlando, the other based in Clermont at South Lake Hospital. Both of these aircraft currently respond to Seminole County 24 hours a day 7 days a week and that availability will continue with the addition of the Seminole County base.

Question

Air Methods Responses

Omni Flight Responses

8. Indicate the cost per patient per transport. All related cost must be included.

Air Methods bills the patient directly and our charges are on lift off and loaded mile.

a. Omniflight is a Medicare / Medicaid provider. Cost to consumer is limited to co-pay as allowed by Medicare for all transports of Medicare beneficiaries. Based on the costs outlined below. Each patient transport will be billed at a different rate based on the mileage from point up pickup to the destination of the patient. Due to the close proximity to the Level One Trauma Center at Orlando Regional, the per-mile charge will be minimal.
b. Current Lift off rate is \$9500
c. Current loaded patient mile is \$110/mile.
d. There are no other related charges involved. Only the liftoff fee and the permile charge will billed to the patient.

9. Is there any cost to the county for the EMS services? If yes, please indicate the cost.

We would propose to work toward a model that is cost neutral to the County. This is dependant on what the County ultimately chooses as options and could be negotiated once the County chooses a firm to negotiate with.

a. No. There will be no cost to Seminole County for the EMS services which include but are not limited to: crew training, LZ training, public relations flights, aerial recon during or following disasters, search and rescue. Specific services can be detailed via written agreement with Seminole County.

10. If the county provides the flight paramedic staffing, indicate any reimbursement associated with the services, if any.

We would propose reimbursing the County for the staff if the staff was provided by the County.

a. In other services where Omniflight contracts for paramedic personnel, the entity providing the paramedics is reimbursed to cover the fair market value cost of providing the personnel. This can be negotiated and detailed via written agreement with Seminole County.

11. If the county provides for two (2) paramedic operating paramedic / paramedic combination, indicate any reimbursement associated with the services, if any.

We operate in this type model in other areas of the State and could negotiate this staffing model if the County chooses.

a. Omniflight and Air Care Team have found that an aircraft staffed with a highly trained and credentialed RN / Paramedic team is the best combination for a comprehensive critical care transport system. This staffing configuration provides the most well rounded care providers for both scene and interfacility transports. This mission profile and standard of care is very successful in all the markets and programs that Omniflight serves across the country. Omniflight and Air Care Team would prefer to staff the aircraft based in Seminole County with an RN/Paramedic team. We would also prefer to hire paramedics that are part of Seminole County Fire Department for continuity of care from the field.



ORLANDO REGIONAL
Air Care Team

In Partnership with

OMNIFLIGHT

Seminole County
Administrative Services Department
Purchasing and Contracts Division

RE: RFI-600219-07/BJC – Aeromedical Helicopter Services

As requested, this is the response to the questions posed by the Staff of the Board of County Commissioners concerning RFI-600219-07/BJC.

1. Where is the helicopter going to be stationed?

- a. *An integral part of our strategic plan for the Orlando Metro Area is to station a helicopter and dedicated staff in Seminole County in order to provide timelier scene response to the citizens of the County. Also to facilitate interfacility transports for critical care medical and trauma patients. Orlando Regional Air Care Team has been in discussions with South Seminole Hospital as a location for basing an aircraft with in the next 5 months. South Seminole Hospital is a part of the Orlando Regional system and is a vital health care link to the citizens of Seminole County. The Orlando Sanford International airport is also an excellent location for the aircraft and crew. However, we will defer to the recommendations from the public safety officials of the County as to the base location.*
- b. *Our initial response to the RFI proposed by the County included a single engine AS 350 "A-Star" as the aircraft for the Seminole County base. Since the time of that response, Omniflight has procured three (3) twin engine BK-117's for the Orlando area in partnership with Orlando Regional Healthcare. This is the same type of aircraft that Air Care Team currently utilizes at Orlando Regional Medical Center and has the capacity to transport 2 patients at once. In order to standardize our aircraft in the region, Omniflight will be replacing the current aircraft at South Lake Hospital in Clermont with a BK-117, and would provide a BK-117 for the Seminole County base. Specifications and capabilities of the BK-117 can be provided to County Officials if necessary.*

- 2. Which is the primary location for the maintenance station for the helicopter?**
 - a. The primary location for maintenance will be at the local base in Seminole County. Each one of our helicopters has a dedicated mechanic specifically assigned to that particular aircraft at the local base of operation. Maintenance staff is available and on call 24 hours a day 7 days a week. The majority of maintenance for the aircraft can be accomplished at the local base of operations. If maintenance requires the aircraft be moved to one of Omniflight's 3 regional facilities, a dedicated backup aircraft will be placed in Seminole County for the duration of the maintenance event at no cost to the County.*

- 3. Have any arrangements been made to accommodate the maintenance service?**
 - a. Hangar facilities and maintenance personnel are available currently to provide service for the aircraft at the Orlando Sanford International airport in Seminole County.*

- 4. Is there any cost to the county associated with the maintenance of the helicopter or the station of the helicopter?**
 - a. No. Seminole County will incur no cost related to the operation, maintenance, staffing, or base station for the aircraft. This can be detailed via written agreement with Seminole County.*

- 5. Will your company provide the staffing for the helicopter to include flight Paramedics, etc?**
 - a. Yes, as with our other two Air Care Team bases that currently provide service to Seminole County, each aircraft is staffed with a Flight Nurse and a Flight Paramedic employed by Orlando Regional Air Care Team. This team is trained and experienced in trauma and interfacility transports and works as a team with Orlando Regional's trauma team and specialists, which provides for continuity of care and practice. This system has been in place at Orlando Regional since 1984 and provides superior care before, during and after transport. We would like to recruit paramedics from Seminole County Fire Department as a priority to provide continuity of care from the field, to the air ambulance, to the facility.*

- 6. What type of report will your firm provide to the county on a quarterly basis and what information will be included on those reports?**
 - a. Flight volumes, patient types, procedures performed and outcomes post flight can be provided. Patient QA, financial reports and other specific information is available and can be detailed in a written agreement with the County. Air Care Team will be transitioning to using a web based*

Electronic Patient Care Record. Secure access to specific reports can be granted to the Seminole County public safety officials and also the Seminole County EMS Medical Director. Those reports and information will be available at anytime via the secure online access..

7. Will your firm provide a backup unit for the County?

- a. As with all of our individual aircraft bases. Omniflight standard practice is to provide a backup aircraft for scheduled "out of service" time prior to the aircraft being taken out of service. For unscheduled out of service time, if the aircraft is unavailable to respond for longer than 24 consecutive hours. The Omniflight service recovery team will be activated to make critical decisions for supplying backup and/or using local system aircraft to supply service to the County.*
- b. Air Care Team currently has two staffed aircraft in Central Florida: one based in downtown Orlando, the other based in Clermont at South Lake Hospital. Both of these aircraft currently respond to Seminole County 24 hours a day 7 days a week and that availability will continue with the addition of the Seminole County base.*

8. Indicate the cost per patient transport. All related costs must be included.

- a. Omniflight is a Medicare / Medicaid provider. Cost to consumer is limited to co-pay as allowed by Medicare for all transports of Medicare beneficiaries. Based on the costs outlined below. Each patient transport will be billed at a different rate based on the mileage from point up pickup to the destination of the patient. Due to the close proximity to the Level One Trauma Center at Orlando Regional, the per-mile charge will be minimal.*
- b. Current Lift off rate is \$9500*
- c. Current loaded patient mile is \$110/mile.*
- d. There are no other related charges involved. Only the liftoff fee and the per-mile charge will billed to the patient.*

9. Is there any cost to the County for the EMS services?

- a. No. There will be no cost to Seminole County for the EMS services which include but are not limited to: crew training, LZ training, public relations flights, aerial recon during or following disasters, search and rescue. Specific services can be detailed via written agreement with Seminole County.*

10. If the county provides the paramedic staffing, indicate any reimbursement associated with the services

- a. In other services where Omniflight contracts for paramedic personnel, the entity providing the paramedics is reimbursed to cover the fair market value cost of providing the personnel. This can be negotiated and detailed via written agreement with Seminole County.*

11. If the County provides for two (2) Paramedics operating a Paramedic/Paramedic combination, indicate any reimbursement associated with the services

- a. Omniflight and Air Care Team have found that an aircraft staffed with a highly trained and credentialed RN / Paramedic team is the best combination for a comprehensive critical care transport system. This staffing configuration provides the most well rounded care providers for both scene and interfacility transports. This mission profile and standard of care is very successful in all the markets and programs that Omniflight serves across the country. Omniflight and Air Care Team would prefer to staff the aircraft based in Seminole County with an RN/Paramedic team. We would also prefer to hire paramedics that are part of Seminole County Fire Department for continuity of care from the field.*

November 27, 2007

Betsy J Cohen
Seminole County Purchasing Division
110 East First Street
Sanford, Florida 32771

Ms Cohen:

Thank you for your continued interest in Air Methods Corporation and your questions dated November 19th, 2007 in reference to the Seminole County *RFI 60219-07/BJC – Air Medical Helicopter Service*. It is our understanding that **Seminole County and Air Methods** are exploring an opportunity to forge a mutually beneficial relationship that will create a **new air medical Program** in or near Seminole County, Florida. Seminole County is committed to facilitating critical care transport for patients and is exploring the possibility of entering into an agreement with Air Methods for the operation of the Program. The proposal included herein is designed to accomplish the following objectives:

- Develop a model for the provision of Critical Care Air Medical Transportation in the region that meets the needs of the partners, the patients and the demands of a complex market.
- Provide an opportunity for the Program to become financially self sufficient.
- Establish a partnership between Seminole County and Air Methods to serve as a framework for future projects.

We have replicated your questions and answered them to the best of our ability. It is our understanding that the RFI is a platform to enter into specific negotiations once the RFI is awarded. There are many types of business models that can be implemented based on what the county is specifically requesting. We are the largest provider of air medical helicopters in the world and have 32 aircraft assigned to Florida. We are very versatile and can customize the operation to meet the Counties specific needs. We are best suited to safely, effectively and efficiently provide an air medical model that Seminole County.

Please find our responses to your additional questions below.

1. Where will the helicopter be stationed?
This has not been determined. Possible locations are dependant on the County's input and needs. It is our experience that a hospital, Fire or EMS Station, or an airport are best suited for this type of operation.
2. Which is the primary location for the maintenance station of the helicopter?
We have major repair facilities located in Orlando and Jacksonville. We are building a hanger facility at the Leesburg Airport. Generally speaking most maintenance is done on site.
3. Have any arrangements been made to accommodate the maintenance service?
We have a compressive system in place in Florida for Maintenance.
4. Is there any cost to the county associated with the maintenance of the helicopter or the station of the helicopter? If yes, please indicate the cost.
This answer is dependent on the model of operation the County ultimately chooses and the volumes that are projected. Our independent model has no cost for maintenance, facilities, or staff.
5. Will your company provide the staffing for the helicopter to include flight paramedics, etc...?
Depending on what the County ultimately chooses, we can provide full staffing including medical and aviation personnel or any aviation depending on the business model.
6. What type of reports will your firm provide to the county on a quarterly basis and what information will be included on those reports?
Quality assurance data for all Seminole County Transports and any other reports the County requests Air Methods is able to provide.
7. Will your firm provide a backup unit for the county? If yes, indicate the station where this unit will come from.
We have 4 back up aircraft in Florida, two assigned to the Central Florida Area.
8. Indicate the cost per patient per transport. All related cost must be included.
Air Methods bills the patient directly and our charges are on lift off and loaded mile.
9. Is there any cost to the county for the EMS services? If yes, please indicate the cost.
We would propose to work toward a model that is cost neutral to the County. This is dependant on what the County ultimately chooses as options and could be negotiated once the County chooses a firm to negotiate with.

10. If the county provides the flight paramedic staffing, indicate any reimbursement associated with the services, if any.

We would propose reimbursing the County for the staff if the staff was provided by the County.

11. If the county provides for two (2) paramedic operating paramedic / paramedic combination, indicate any reimbursement associated with the services, if any.

We operate in this type model in other areas of the State and could negotiate this staffing model if the County chooses.

This document is designed to promote discussion. Any commitment by Air Methods will come in the form of an Agreement, signed by the appropriate representatives from the parties. Nothing in this letter should be considered a commitment by Air methods Corporation and is supplied for discussion and information. Air Methods reserves the right to withdraw itself from consideration.

Thank you for you time and consideration. Please feel free to contact me if you need any further information.

Sincerely,

Jeffery A See
Program Director-Florida
Air Methods Corporation