

## ADDENDUM NO. 4 TO RFP 9600-87: Anesthesia Services

Date: Friday, October 27, 2023

To: All participants submitting Proposals for RFP # 9600-87

From: Freddy Vigilmartinez, Management Analyst, NMC Contracts Division

Subject: Addendum No. 4 to RFP #9600-87

## This addendum is issued to request additional information regarding proposed staffing coverage as per the expectations and directions outlined in <u>Section 5.3 Professional Services</u> within RFP 9600-87: Anesthesia Services

1. Per the expectations and directions outlined in Section 5.3 Professional Services of RFP 9600-87 and the information provided below, please complete the matrix in *Attachment C to RFP 9600-87: Proposed Staffing Coverage*.

<u>Current schedule</u>: 3 Scheduled Rooms M-F (8 hours) 7A-3P "Primetime Hours" 4th Room M-F (PRN) utilized >70% (updated 9/2023) during Primetime Hours 2 Rooms Sat-Sun-County Holidays (12 hours).

2. Describe in detail your ability to match and adjust the staffing levels with patient volumes and effectively manage surgery volume; reduce costs; increase staff and operating room productivity; and continuously improve quality of care.

## Signature page to follow

Please be sure to sign and submit the signature page to acknowledge receipt of Addendum No. 4

Per Section 3.7. "IT IS THE CONTRACTORS' SOLE RESPONSIBILITY TO ENSURE THAT THEY RECEIVE ANY AND ALL ADDENDA FOR THIS RFP by either informing Natividad Medical Center of their mailing information or by regularly checking the NMC web page at www.natividad.com (Vendors tab). Addenda will be posted on the website the day they are released."

This acknowledgement signature page of Addendum No. 4, completed matrix in *Attachment C to RFP 9600-87: Proposed Staffing Coverage*, and written answer to bullet point 2 must be submitted via email to Freddy Vigilmartinez at <a href="mailto:vigilmartinez@natividad.com">vigilmartinez@natividad.com</a> no later than 5:00pm on Friday, November 10, 2023.

## RECEIPT IS HEREBY ACKNOWLEDGED OF ADDENDUM NO. 4, RFP # 9600-87

Authorized Company Signature:	Printed Name:
Company Name:	Date: