The Grady Memorial Hospital Corporation
d/b/a

GRADY HEALTH SYSTEM

Remarkable Service Exceptional Care

GRADY HEALTH SYSTEM

REQUEST FOR PROPOSAL
(RFP)

FOR
REMOTE LIMITED OBSTETRIC ULTRASOUND INTERPRETATION SERVICES

RFP#26008TM

Request for Proposal Posted: September 18, 2026
Proposal Due: November 18, 2026 by 2:00PM EST

SECTION 1: GRADY HEALTH SYSTEM BACKGROUND

Grady Health System (GHS) is one of the largest safety net health systems in the nation. Grady consists of the 953-bed Grady Memorial Hospital, six neighborhood health centers, Crestview Health & Rehabilitation Center, and Children's Healthcare of Atlanta at Hughes Spalding, which is operated as a Children's affiliate.

With its nationally acclaimed emergency services, Grady is Atlanta's premier Level 1 trauma center – the metro area's only nationally verified Level 1 center. Grady EMS serves as the 911 ambulance provider for the city of Atlanta, South Fulton County communities, and numerous counties across Georgia. It also operates the state's first Mobile Stroke Unit, taking cutting-edge pre-hospital care directly to patients. Grady's American Burn Association/American College of Surgeons verified Burn Center is one of only two in the state. The Marcus Stroke and Neuroscience Center is a Joint Commission designated Advanced Comprehensive Stroke Center.

Other key services/distinctions include Grady's Regional Perinatal Center with its Neonatal Intensive Care Unit, Georgia's first Cancer Center for Excellence, The Avon Comprehensive Breast Center, the Georgia Comprehensive Sickle Cell Center, and the Ponce de Leon Center - one of the top HIV/AIDS outpatient clinics in the country. Grady is one of an elite group of hospitals to earn the Baby-Friendly USA international recognition as a Baby-Friendly Designated birth facility. Grady has earned the prestigious Stage 7 on the HIMSS Analytics Electronic Medical Record Adoption Model - Georgia's first adult acute care hospital to earn the highest rating for improving patient care and safety through health information technology.

SECTION 2: OVERVIEW, QUALIFICATIONS & EXPERTISE

The objective of this RFP is to establish an agreement with a qualified Supplier to provide reliable, timely, and accurate remote professional interpretation and final diagnostic reporting for limited first- and second-trimester obstetric (OB) ultrasound studies performed at GSED. Grady Health System seeks to ensure continuous access to qualified board-certified radiologists, a completed interpretation within one (1) hour of a complete study becoming available for review, timely communication of significant or critical findings, and secure integration with applicable GHS clinical and imaging systems.

Vendor Registration

All vendors are required to complete a Vendor Registration Application through the GHS electronic vendor registration process once awarded a contract, and all representatives must register prior to visiting any location or department of the health system. All fees due are the responsibility of the awarded Vendor and their associates. The registration allows GHS to manage the vendors supplying critical services to the health system, profile of the vendors, and all representatives that visit the health system. The electronic Vendor Registration Application can be completed on the GHS website at www.gradyhealth.org/suppliers.

Qualifications & Expertise

GHS requires the successful Offeror to exhibit the highest standards of integrity and work ethics (e.g., confidentiality, diligence, and professionalism) and possess specialized experience in providing the proposed service.

Within all responses to this RFP the Offeror must provide the following details:

1. Provide a brief history of the organization with emphasis on any corporate reorganization that has occurred in the last three (3) years, office locations, and information documenting the company's financial position (i.e., financial statements, annual reports).

2. Indicate name and the business address of the entity, or individual that will be the party to the proposed contract and the Offeror's business telephone number, fax number, and e-mail address.

3. Indicate the type of ownership (sole proprietorship, partnership, corporation, joint venture, or limited liability company—list state in which incorporated) and parent company, if any.

4. Provide the name, address, and telephone number of the point of contact that will serve as the authorized negotiator(s) for the Offeror. The authorized negotiator shall have the authority to act on behalf of the Offeror and make binding commitments for the Offeror and any sub-consultants concerning this RFP.

5. Please disclose any ownership and/or relationships with Grady Health System and /or the Grady Memorial Hospital Corporation d/b/a Grady Health System.

6. Disclose whether the proposing entity, or any shareholder, member, partner, officer or employee thereof, is presently a party to any pending litigation, or has received notice of any threatened litigation or claim directly or indirectly bearing on Grady Health System or The Fulton-DeKalb Hospital Authority.

7. Disclose the name and title of any of Grady Health System's and/or The Fulton-DeKalb Hospital Authority board members, officers, administration, employees, contracted employees, or independent contractors that are employed by or affiliated with the Offeror's organization. This includes but is not limited to the Offeror's board members, committee members, and advisors to the Offeror's organization, holding company or any owned subsidiary. This disclosure will apply to anyone affiliated with Grady Health System in its description in Section 1 above.

8. Please provide three (3) references of similar size and scope of implementation.

SECTION 3: PROPOSAL EVALUATION, SELECTION PROCESS, AND SCHEDULE

Questions Due: October 9, 2026 by 2:00PM EST

***GHS response to questions will be emailed to all responders: October 23, 2026 by 5:00PM EST**

Response Due Date: November 18, 2026 by 2:00PM EST

***Presentations and Interviews: TBD**

***Award Recommendation: TBD**

Vendor to start TBD

** Date(s) are subject to change*

SECTION 4: SPECIFICATIONS / DESCRIPTION

§ 4-A Scope of Services

The selected Supplier shall provide remote professional interpretation and final diagnostic reporting for limited first- and second-trimester obstetric (OB) ultrasound studies performed at GSED. The Supplier shall review submitted diagnostic images and available clinical information, complete and electronically sign the final interpretation report, and communicate significant, urgent, or critical findings to the appropriate GHS clinical team in accordance with GHS requirements.
Unless otherwise expressly stated by GHS, image acquisition and performance of the ultrasound examination will be completed by GHS personnel. The Supplier's primary responsibility under this RFP is the professional interpretation and reporting component of the service.
The base scope is limited to OB ultrasound interpretation. Detailed fetal anatomic surveys, fetal echocardiography, ultrasound technologist staffing, performance of the ultrasound examination, and Maternal-Fetal Medicine (MFM) consultation services are not included in the base scope unless specifically requested or added by GHS.

§ 4-B Requirements / Specifications:

The Supplier shall provide, at a minimum, the following services for studies submitted by GHS:

- Professional interpretation of limited first-trimester OB ultrasound studies.
- Professional interpretation of limited second-trimester OB ultrasound studies.
- Review of submitted diagnostic images, measurements, clinical indications, and other available information relevant to the examination.
- Comparison with available prior relevant imaging when accessible and clinically appropriate.
- Completion of a clear, final, electronically signed diagnostic interpretation report.
- Issuance of report clarification or addenda when clinically required.
- Timely communication and documentation of significant, urgent, or critical findings in accordance with GHS requirements.

§ 4-C Term Three (3) years with two (2) one (1) renewals.

SECTION 5: EVALUATION CRITERIA AND PROCESS

The selection of the awardee to be engaged by GHS to accomplish the scope of work will be based on the following criteria that are utilized by the Technical Evaluation Team. The Technical Evaluation Team is comprised of members of the GHS staff.

§ 5-A Technical Proposal/Demonstrating an Understanding of the Services/Products Requested/Technical Modules
Proposals submitted must demonstrate the capability to comply with all requirements and specifications contained in this RFP. Failure to demonstrate the ability to meet specifications may result in non-consideration. Respondents shall provide a comprehensive Technical Proposal demonstrating a clear understanding of Grady Health System's requirements for Remote Limited Obstetric Ultrasound Interpretation Services.

- The Respondent's overall understanding of the requested services and proposed service delivery model.
- The process for receiving, reviewing, interpreting, and finalizing OB ultrasound studies submitted by GHS.
- The Respondent's ability to consistently provide completed interpretations within the required one (1) hour turnaround time.
- Proposed clinical coverage, including physician availability, nights, weekends, holidays, backup coverage, and the ability to provide 24/7/365 coverage, if required by GHS.
- Qualifications and experience of the board-certified radiologists who will be assigned to the GHS account, including demonstrated experience interpreting limited first- and second-trimester OB ultrasound studies.
- The Respondent's process for communicating significant, urgent, and critical findings to the appropriate GHS clinical team, including escalation procedures when the intended recipient cannot be reached.
- The proposed technology and workflow for integration with applicable GHS PACS, EMR/EHR, imaging, reporting, and communication systems.
- Cybersecurity, privacy, HIPAA, and protected health information safeguards associated with the proposed solution.
- Quality assurance and peer-review processes used to monitor interpretation accuracy, turnaround-time compliance, service availability, and clinical performance.
- The Respondent's current physician and operational capacity to support anticipated GSED study volumes and fluctuations in demand without negatively affecting quality or turnaround time.
- Business continuity, disaster recovery, downtime, and contingency procedures that will be used to maintain uninterrupted service.
- The proposed implementation approach, including credentialing, privileging, technology integration, testing, workflow validation, training, and the Respondent's earliest achievable go-live date.
- The Respondent's experience providing comparable remote radiology interpretation services within hospital or emergency care environments.
- Any assumptions, exceptions, dependencies, limitations, or GHS resources required to successfully implement and maintain the proposed services.

§ 5-B Previous Experience on Projects of a Similar Nature/References
Respondents must demonstrate relevant experience providing professional remote radiology interpretation services within hospital or emergency care environments, with specific experience supporting limited first- and second-trimester OB ultrasound studies.
GHS will review and evaluate the Respondent's experience performing services of similar scope, size, and complexity. Respondents should provide sufficient detail regarding comparable engagements to demonstrate their capability to deliver reliable, high-quality services in accordance with the requirements of this RFP.

At a minimum, Respondents should include:

- A description of comparable hospital or emergency-care engagements successfully completed.
- Experience providing remote limited OB ultrasound interpretation services.
- Typical and demonstrated turnaround times for comparable clients, including the ability to consistently meet a one-hour turnaround requirement.
- Experience implementing and supporting PACS, EMR/EHR, and related imaging and reporting integrations.
- Experience providing coverage during nights, weekends, holidays, and on a 24/7 basis, where applicable.

- Evidence of effective service delivery, including quality, responsiveness, timeliness, operational reliability, and cost control.
- Representative client references for similar engagements, including organization name, contact person, title, telephone number, email address, scope of services provided, and period of performance.

GHS will consider the Respondent's demonstrated capability, quality of prior performance, timeliness, cost controls, experience with comparable healthcare environments, and client references in evaluating this section.

§ 5-C Management Plan/Implementation/On Going Support

GHS will review and evaluate the Respondent's proposed project management team, implementation approach, and overall plan for successfully transitioning and implementing the services described in this RFP. GHS has identified an immediate operational need for these services; therefore, the selected Supplier must be prepared to support an expedited implementation following award and contract execution.

Respondents must identify the consultants, project leaders, radiologists, technical resources, and other key staff who will be assigned to the project or involved in providing the services specified in this RFP. The response should include biographical information for key personnel, a description of each individual's role and responsibilities, and identification of the senior-level staff member(s) who will represent the Respondent at meetings with GHS. Respondents should also provide biographies of other key members of the organization who are considered important to the firm's governance or ongoing relationship with GHS.

Respondents must provide a detailed implementation plan and timeline that identifies, at a minimum:

- Project kickoff activities and assigned project management and implementation resources.
- Roles and responsibilities of key Supplier personnel assigned to the GHS engagement.
- Radiologist credentialing and privileging activities.
- Technology and interface design, configuration, and connectivity activities.
- Cybersecurity and privacy review requirements and dependencies.
- Testing and validation of image transmission, interpretation, reporting, and communication workflows.
- Clinical workflow validation and testing of escalation procedures.
- Training, orientation, or onboarding required for GHS and Supplier personnel.
- Go-live readiness activities, transition support, and post-go-live support.
- Key project milestones, deliverables, and responsible parties.
- The Supplier's earliest achievable go-live date.
- Any assumptions, dependencies, GHS resources, approvals, decisions, or other requirements necessary to achieve the proposed implementation schedule.

The implementation plan should clearly demonstrate the Respondent's ability to mobilize appropriate clinical, technical, and project management resources; coordinate effectively with GHS stakeholders; identify and manage implementation risks; and achieve a timely and successful go-live with minimal disruption to GHS operations.

§ 5-D Cost Proposal

GHS will evaluate the overall proposed costs to determine whether they are reasonable, complete, and consistent with the Respondent's proposed scope of services and technical approach.

Cost evaluation may include consideration of the following factors:

- Reasonableness of proposed pricing in relation to the services to be performed.
- Completeness and transparency of all proposed fees, charges, and pricing assumptions.
- Consistency between the cost proposal, technical proposal, staffing model, and proposed service delivery approach.
- Identification of any one-time, recurring, implementation, technology, after-hours, weekend, holiday, or other supplemental charges.
- Any minimum volume, minimum revenue, or other financial commitments.

- Potential cost escalations or pricing adjustments during the contract term.
- Overall value to GHS, including the relationship between cost, service quality, reliability, responsiveness, and operational requirements.

GHS may compare proposed pricing across Respondents, evaluate pricing against available market information or historical costs, and assess whether any proposed costs appear materially understated, overstated, or inconsistent with the level of service proposed.

The lowest-priced proposal will not necessarily be selected. Cost will be considered in conjunction with technical capability, experience, implementation approach, service quality, and overall value to GHS.

§ 5-E Required Interpretation Services

The Supplier shall provide, at a minimum, the following services for studies submitted by GHS:

- Professional interpretation of limited first-trimester OB ultrasound studies.
- Professional interpretation of limited second-trimester OB ultrasound studies.
- Review of submitted diagnostic images, measurements, clinical indications, and other available information relevant to the examination.
- Comparison with available prior relevant imaging when accessible and clinically appropriate.
- Completion of a clear, final, electronically signed diagnostic interpretation report.
- Issuance of report clarification or addenda when clinically required.
- Timely communication and documentation of significant, urgent, or critical findings in accordance with GHS requirements.

§ 5-F Clinical Coverage and Availability

The Supplier must maintain sufficient radiologist staffing and operational capacity to provide dependable coverage for GSED. GHS anticipates the potential need for 24-hour, 7-day-per-week coverage, including nights, weekends, and holidays. Respondents must clearly describe the proposed coverage model and any limitations.

- Proposed hours and days of coverage.
- Whether full 24/7/365 coverage is available and any limitations or exclusions.
- Number and type of physicians available to support the GHS account.
- Primary and backup physician coverage arrangements.
- Escalation procedures for unexpected staffing shortages, volume surges, or service interruptions.
- Any separate pricing applicable to after-hours, weekend, holiday, or 24/7 coverage.

§ 5-G Turnaround Time

The required turnaround time for completed interpretations is within one (1) hour from the time a complete study and the information necessary for interpretation are available to the Supplier. The Supplier must demonstrate the ability to consistently meet this standard and maintain appropriate escalation procedures for delays or service interruptions.

Respondents shall describe how turnaround time is measured within their workflow, how GHS can validate performance, and the escalation process used when a delay is anticipated or the one-hour requirement is not achieved.

§ 5-H Radiologist Qualifications and Credentialing

All physicians assigned to provide services must be board-certified radiologists with demonstrated experience interpreting limited OB ultrasound studies, including first- and second-trimester examinations.

Each assigned physician must, as applicable:

- Maintain a current, unrestricted medical license required to provide interpretation services for GHS patients in the State of Georgia.
- Maintain all applicable board certifications and professional credentials.
- Maintain professional liability/malpractice insurance at limits acceptable to GHS.
- Meet all GHS credentialing, privileging, medical staff, and onboarding requirements before providing services.
- Remain in good standing and free of applicable sanctions or exclusions that would prohibit participation in federal healthcare programs.
- Maintain competence and experience appropriate to the limited OB ultrasound studies included in this RFP.

The Supplier is responsible for timely submission and maintenance of all physician credentialing documentation and shall provide qualified backup physicians to support continuity of service.

§ 5-I Communication of Significant and Critical Findings

The Supplier must maintain a reliable, closed-loop process for communicating significant, urgent, or critical findings to the appropriate GHS clinical team. Communication shall occur in accordance with GHS policies and clinical escalation requirements.

- Direct notification to the appropriate GHS clinician or designated clinical contact when required.
- Documentation of the finding communicated, date and time of communication, method of communication, and the individual contacted.
- An escalation pathway when the intended GHS recipient cannot be reached.
- A mechanism for GHS clinicians to contact the interpreting radiologist for clarification of a report or finding.

§ 5-J Remote Service Delivery

Remote interpretation services are acceptable. The Supplier must maintain the staffing, technology, connectivity, security, and operational infrastructure necessary to provide secure and reliable remote interpretation services throughout the required coverage period.

The Supplier must maintain contingency and backup processes designed to minimize interruption of services and shall promptly notify GHS of any event that materially affects service availability or turnaround-time performance.

§ 5-K Technology and Systems Integration

The selected Supplier must be capable of integrating with applicable GHS PACS, EMR/EHR, imaging, reporting, and communication systems. The Supplier will collaborate with GHS Information Technology to determine interface, connectivity, cybersecurity, privacy, testing, and technical requirements.

Respondents must identify:

- All technology, software, interfaces, licenses, or connectivity required to deliver the proposed service.
- Any GHS hardware, software, network, user-access, or support resources required for implementation and ongoing operations.
- Supported image and healthcare interoperability standards, including DICOM and other applicable interface methods supported by GHS.
- The proposed workflow for receipt of studies, interpretation, final report transmission, amendments/addenda, and communication of critical findings.
- Any third-party platforms or subcontracted technology services that will access, transmit, store, or process GHS data.
- All one-time and recurring technology or interface costs.

§ 5-L Privacy, Information Security, and Compliance

The Supplier must comply with all applicable federal and state privacy and information-security requirements and all applicable GHS policies and contractual requirements associated with protected health information (PHI).

The Supplier must be prepared to:

- Execute any required GHS Business Associate Agreement (BAA) and related privacy/security documentation
- Protect PHI and other GHS data during transmission, processing, storage, and access.
- Maintain appropriate user authentication, role-based access, audit logging, and security controls.
- Participate in GHS cybersecurity, privacy, risk, and technical assessments as required.
- Maintain an incident-response process and promptly notify GHS of suspected or confirmed security or privacy incidents in accordance with contractual requirements.
- Disclose any subcontractors or third parties that will have access to GHS systems or information.

§ 5-M Quality Assurance and Performance

The Supplier must maintain an established clinical quality assurance and peer-review program. Performance expectations will include interpretation accuracy, service availability, turnaround-time compliance, and timely communication of critical findings.

The Supplier shall describe its quality program, including:

- Peer-review methodology and frequency.
- Process for identifying, classifying, tracking, and resolving interpretation discrepancies.
- Corrective-action and physician-remediation processes when applicable.
- Process for managing amended reports and clinically significant report changes.
- Service-level and turnaround-time monitoring.
- Process for communicating significant quality concerns to GHS.

Additional clinical quality standards and key performance indicators (KPIs) will be established by GHS in collaboration with Maternal-Fetal Medicine (MFM) and applicable clinical leadership.

§ 5-N Capacity and Scalability

The Supplier must demonstrate sufficient physician and operational capacity to support GSED's anticipated study volume and reasonable fluctuations in demand without adversely affecting quality, availability, or the required one-hour turnaround time. Estimated volumes are currently being evaluated and will be provided as available.

Respondents must identify:

- Current capacity to support the proposed service.
- Any daily, weekly, monthly, or annual capacity limitations.
- Ability to accommodate unexpected or temporary increases in study volume.
- Any minimum volume or minimum revenue commitments.
- Any pricing tiers or changes triggered by study volume.

§ 5-O Business Continuity and Downtime

The Supplier must maintain documented business continuity, disaster recovery, and downtime procedures sufficient to support continued interpretation services during technology outages, connectivity failures, staffing disruptions, cybersecurity events, natural disasters, and other operational interruptions.

Respondents must describe the backup workflow that would be used if the primary reading platform, interface, network connection, or physician coverage model is unavailable.

§ 5-P Implementation Requirements

GHS has identified an immediate operational need for these services. The selected Supplier must be prepared to support expedited implementation following award and contract execution.

Respondents must provide an implementation plan and timeline identifying, at a minimum:

- Project kickoff and assigned implementation resources.
- Radiologist credentialing and privileging activities.
- Technology/interface design and connectivity activities.
- Cybersecurity and privacy review dependencies.
- Testing and validation of image transmission, reporting, and communication workflows.
- Clinical workflow validation and escalation-path testing.
- Training or orientation required for GHS and Supplier personnel.
- Go-live readiness activities and support.
- The Supplier's earliest achievable go-live date.
- Any assumptions, dependencies, or GHS decisions required to achieve the proposed schedule.

§ 5-Q Service Management, Reporting, and Governance

The selected Supplier shall designate an account or service-management contact responsible for operational coordination, issue escalation, performance review, and ongoing communication with GHS.

At a minimum, the Supplier must be capable of providing periodic performance reporting that includes:

- Number of studies interpreted during the reporting period.
- Turnaround-time performance and exceptions.
- Service interruptions or downtime events.
- Critical-finding communication performance.
- Quality-assurance or peer-review trends, as appropriate.
- Open operational issues, corrective actions, and resolution status.

The frequency, format, and final content of performance reports and governance meetings will be established by GHS.

§ 5-R Exceptions, Assumptions, and Dependencies

Respondents must clearly identify any exceptions to these specifications, assumptions used in developing the proposal, dependencies on GHS resources or third parties, service exclusions, and requirements that could affect implementation, coverage, pricing, or performance. Silence regarding a requirement may be interpreted by GHS as the Respondent's ability to meet the requirement as stated, subject to the final negotiated agreement.

SECTION 6: REPRESENTATIONS AND INSTRUCTIONS

§ 6-A-1 Response Guidelines

The information required by this RFP is comprehensive and necessary for accurate Offeror selection. Please be concise with answers. Each applicable question must be answered. For questions deemed not applicable, please state "not applicable."

Proposals must be completed and returned in the same format. Your RFP response, in its entirety, will be included in the subsequent contract negotiated between GHS and the selected Offeror. All documents shall be submitted electronically to: gradyrfp@gmh.edu and imann@gmh.edu no later than **November 18, 2026 @ 2:00PM EST**. In the email, indicate this **RFP#26008TM** and the name of the company submitting the proposal in the subject line of the email. All forms in Appendices A, B, and C must be signed by an officer of the firm having the authority to make such offers, verifying that the Proposal is valid and will remain valid.

Any cost incurred in the preparation and presentation of this response is to be absorbed by the Offeror. All documents submitted will become the property of GHS unless otherwise requested in writing by the Offeror at the time of submission. Further, any materials submitted by the Offeror that should be considered "**CONFIDENTIAL"** must be clearly marked as such. Submission of any materials, confidential or otherwise, will implicitly grant the right of use by the Corporation. All portions of the Proposal that are not designated as confidential will become part of the public record immediately following an award. Documents designated as confidential will be treated as such to the extent permitted by law, including but not limited to the Georgia Open Records Act.

§ 6-A-2 Submission Guidelines

Offerors are forbidden to contact, directly or indirectly anyone other than ***Ivan Mann*, Senior Contract Specialist. *Ivan Mann*** is the sole point of contact for this RFP during the RFP process. Contact with any person other than ***Ivan Mann*** is grounds for disqualification from this process. Offerors are also strictly forbidden to attempt to influence, through internal or external third-party sources, the outcome of this RFP. Your submission to this RFP serves as your confirmation that you, your firm and anyone acting as an agent, representative or influencer on behalf of your firm has not engaged in any action that may be construed as an attempt to influence the outcome of this RFP.

Incumbent Transition Acknowledgment
By submitting a response to this RFP, the incumbent supplier acknowledges and agrees that, in the event they are not selected for award, they will fully support and participate in a seamless transition of services. This includes extending the current agreement for the duration necessary to complete the transition, with no changes to existing pricing, terms, or service levels. The incumbent further agrees to cooperate in good faith to ensure continuity of operations and an efficient handoff to the awarded supplier.

Submission of a proposal by an Incumbent Vendor and any resulting contract extension shall not obligate GHS to award a contract to the Incumbent Vendor, nor shall it be construed as a commitment by GHS to continue services beyond the extension period.

In the event the Incumbent Vendor is not selected for award, the Incumbent Vendor agrees to provide reasonable transition assistance, as requested by GHS, to facilitate a smooth and orderly transition of services to the newly awarded vendor. Transition assistance may include, but is not limited to, cooperation with GHS and the incoming vendor, knowledge transfer, documentation support, coordination activities, and other assistance necessary to minimize disruption to GHS operations. Unless otherwise approved in writing by GHS, all transition assistance shall be provided **at no additional cost** to GHS.

Failure to comply with any of the above stated guidelines may result in immediate disqualification. If you have any questions regarding this RFP, email your questions/concerns to **Ivan Mann, Senior Contract Specialist, at imann@gmh.edu and gradyrfp@gmh.edu.**

§6-A-3 RFP Terms and Conditions:

Compliance with GHS terms and conditions are required for any Offeror selected to provide goods, equipment, or services by the awarding of any RFP.

§ 6-A-4 RFP Completion Instructions:

Acceptance of Offerors Proposals: GHS reserves the right to accept or reject any Proposal, change these specifications or waive any formalities. Should it be necessary to modify an application to fulfill the needs of GHS, GHS will retain exclusive rights of ownership and use of all design documents, programs, and documentation developed. The Proposals, as submitted, will be the basis for contract negotiations, and will be included in any contract between GHS and the selected Offeror. Representations made within the Proposals will be binding on responding to the Offeror. Offerors' responses should be written in a concise and forthright manner. Offerors may be excluded from further consideration for failure to fully comply with the specifications of this RFP, including the failure to return ALL required documents, as well as, not using the forms and files as included. GHS will not be responsible for any costs associated with Proposals as submitted.

Offeror Selection: Vendor selection GHS reserves the right to make an award based solely on the Proposals as submitted, or any other basis, or to negotiate further with one or more Offerors. The Offeror(s) selected will be chosen based on greatest benefit to GHS, as determined by GHS, and not necessarily on the lowest price. Award of a contract, if any, resulting from this RFP, will be subject to the terms and conditions of GHS purchasing policies. Upon completion of the initial review and evaluation of the Proposals, selected Offerors may be invited to participate in oral presentations.

Full Right of Selection and Rejection: The right to reject in its entirety or to select an Offeror providing other than the lowest cost product is reserved. GHS reserves the right to select and award, at its option, the runner-up's Proposal in the event the selected offer for award or Offeror receiving the award, upon further review and solely in the opinion of GHS, fails to meet all qualifications or specifications or proves to be a selection not in the best interest of GHS.

Proposal Open Record: If a request to inspect the Proposal, or any portion thereof, is made by a third party, GHS will endeavor to treat all materials requested to be kept confidential and non-disclosed to the extent provided by the Georgia Open Records Act. The Offeror understands that GHS may be subject to the provisions of such Act together with the Uniform Trade Secrets Act. GHS will endeavor to inform the Offeror of any third-party request for disclosure of such information pursuant to the Georgia Open Records Act or as may be otherwise made to GHS.

If the Offeror requests that such information be held confidential and not disclosed by GHS, the Offeror will assume the defense of such position, up to and including litigation, and will indemnify, save and hold harmless GHS, its officers and employees, from any expense, fees, costs or liability associated with such third-party request or such litigation. If the Offeror does consider the Proposal or any portion thereof to contain confidential information, it shall submit a letter on the Offeror's letterhead signed by the owner or Chief Executive Officer, requesting that GHS treat the Proposal confidential and private information to the extent possible under Georgia law. Otherwise, the Offeror agrees that its' submission may be deemed as public information.

Regulatory and Ethical Compliance: No Proposal shall be accepted from, and no contract will be awarded to, any person, firm or corporation that, within the past five years, has been found in non-compliance with Georgia statutes or the standards and rules set by the Ethics Commission of the State of Georgia. (http://www.ethics.state.ga.us).

Prior to any contract award, GHS will verify that the prospective Offeror's company, officers, and/or principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from transactions by any Federal department or agency. This will be verified through the Office of Inspector General (OIG). If the Offeror and/or its principles appear on the OIG list, GHS reserves the right to reject the Offeror's Proposal and refuse award of a contract.

Notice of Award: The notice of award is issued by the Resource Management Department. Unsuccessful Offerors shall be notified in writing, after award has been made.

SECTION 7: SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES

It is an overall objective of Grady Memorial Hospital Corporation d/b/a Grady Health System ("GHS") to encourage involvement by Small, Emerging, and Community-based businesses as contractors and suppliers in business activities generated by GHS, while assuring that such activities will be conducted in accordance with all applicable laws. It is the declared policy and intent of GHS to maximize participation by Small, Emerging, and Community-based businesses in all business contracting opportunities. GHS is committed to ensuring that Small, Emerging, and Community-based businesses have every opportunity to participate in contracting.

In adherence to GHS's commitment to Small, Emerging, and Community-based businesses & Equity, contracted GHS suppliers must clearly, as defined by GHS, demonstrate good faith efforts to achieve the Small, Emerging, and Community-based businesses goal set forth by reporting to GHS Direct Tier II goods and/or services purchased from Small, Emerging, and Community-based businesses certified by one (1) or more of the third-party certification agencies recognized by GHS. Such spending with Small, Emerging, and Community-based businesses will be monitored. In connection with such monitoring, Contractor will be required to report Small, Emerging, and Community-based businesses' Spend to GHS quarterly in a manner subject to GHS's sole discretion. Failure to meet the GHS Small, Emerging, and Community-based businesses objectives or to report in the manner prescribed by GHS shall be a material breach of any controlling contract between GHS and Contractor or vendor.

GHS prohibits discrimination based on race, color, gender, sex, religion, sexual orientation, national origin, or disability in connection with employment of any person, or the award of any contract. GHS will provide equal opportunities without regard to race, color, gender, sex, religion, sexual orientation, national origin, or disability, by requiring that any vendor doing business with GHS provide equal opportunity to persons and businesses employed by or contracting with the supplier of products and services to GHS. GHS expects that the policies, programs, and practices of its vendors/Contractors are implemented equitably and that Certified Small, Emerging, and Community-based businesses are afforded an equitable opportunity to share in contract/subcontract opportunities.

Small, Emerging, and Community-based businesses. The goal for this contract is 20% of the total contract value.

Past Performance: Offeror shall (1) summarize in writing its past performance for client healthcare institutions in actively fostering the participation of Small, Emerging, and Community-based businesses utilized by the institution, (2) provide three (3) or more client references for this purpose for whom it has provided applicable service to within the past two (2) years, with the name, phone number and e-mail address of a specific knowledgeable contact person for each such client reference.

Present Commitment: The offeror shall submit in writing its present commitment and business plan to facilitate and promote the participation of Small, Emerging, and Community-based businesses by completion of the attached Small, Emerging, and Community-based businesses Subcontracting Plan (DSSP). Small, emerging, and Community-based businesses used as Tier II contractors and suppliers must be certified by one or more of the 3rd-Party Certification Agencies recognized by GHS.

Post-award performance: The specific, measurable performance criteria included in the Proposal for present commitment to Small, Emerging, and Community-based businesses shall, subject to negotiation and mutual consent, become part of the awarded contract as specific, measurable requirements of vendor performance for the duration of the contract. Such spending with Small, Emerging, and Community-based businesses will be monitored. In connection with such monitoring, Vendor will be required to report to GHS monthly, in a manner subject to GHS's sole discretion, all direct and/or indirect certified spend with Small, Emerging, and Community-based businesses.

Definition: Small, Emerging, and Community-based businesses

(MBE) National Minority Supplier Development Council: A minority-owned business is a for-profit enterprise, regardless of size, physically located in the United States or its trust territories, which is 51% owned, operated and controlled by minority group members, defined from the following:

Asian Indian - A U.S. citizen whose origins are from India, Pakistan, or Bangladesh.

Asian-Pacific -A U.S. citizen whose origins are from Japan, China, Indonesia, Malaysia, Taiwan, Korea, Vietnam, Laos, Cambodia, the Philippines, Thailand, Samoa, Guam, the U.S. Trust Territories of the Pacific, or the Northern Marianas.

African American - A U.S. citizen having origins in any of the Black racial groups of Africa.

Hispanic - A U.S. citizen of Hispanic heritage, from any of the Spanish-speaking areas of the following regions: Mexico, Central America, South America, or the Caribbean Basin only.

Native American - A person who is an American Indian, Eskimo, Aleut or Native Hawaiian, and regarded as such by the community of which the person claims to be a part.

(WBE) Women's Business Enterprise National Council: A Woman-Owned Business Enterprise is an independent business concern that is at least 51% owned and controlled by one or more women who are U.S. citizens or Legal Resident Aliens; whose business formation and principal place of business are in the US or its territories; and whose management and daily operation is controlled by one or more of the women owners.

(LGBT) National Gay and Lesbian Chamber of Commerce: A Lesbian, Gay, Bi-Sexual or Transgender Business Enterprise is a business that is at least 51% owned, operated, managed, and controlled by a LGBT person or persons who are either U.S. citizens or lawful permanent residents; who exercises independence from any non-LGBT business enterprise; has its principal place of business (headquarters) in the United States; and has been formed as a legal entity in the United States.

(DOBE) Disability IN: A disability-owned business enterprise (DOBE) is a for-profit business that is at least 51% owned, managed, and controlled by a person with a disability regardless of whether that business owner employs person(s) with a disability.

Veteran Business Enterprise:

(VBE) *Veteran-Owned Business* - A small business that is at least 51% owned, operated and controlled by one or more veterans.

(DVBE or SDV) *Service-Disabled Veteran-Owned Business* - A small business that is at least 51% owned, operated and controlled by one or more veterans with a service-connected disability.

(DVE) *Disadvantaged Veteran Enterprise* – A business that is at least 51% owned by, and whose management and daily business operations are controlled by one or more veterans.

U.S. Small Business Administration: As defined by the Small Business Act, a small business concern is "one that is independently owned and operated, and which is not dominant in its field of operation." *Small Business* -- Depending on the industry, 'small' is defined by either the number of employees or average annual receipts of a business concern. Website reference for size standards by NAICS code is www.sba.gov/services/contractingopportunities/sizestandardstopics/index.html.

(SDB) *Small Disadvantaged Business* **-** A small business that is at least 51 percent owned, operated and controlled by one or more individuals who are both socially and economically disadvantaged.

(SBE) Small Business Enterprise - Includes businesses physically located in the United States or its trust territories that are independently owned and operated, not dominant in its field of operation, with 500 or fewer employees (maximum allowable employees to qualify as a Small Business Enterprise may be greater than 500, depending on your industry.

HUB Zone Business - A small business operating in a "Historically Underutilized Business Zone." HUB zones are defined at http://map.sba.gov/hubzone/init.asp

BUSINESS IDENTIFICATION AND NONDISCRIMINATION

(TO BE SUBMITTED WITH BID)

	Yes	No
Small Business as defined by the US. Small Business Administration (SDB, SBE, Hub Zone)		
Minority Business Enterprise (MBE) If yes, please indicate the percentage of minorities who own, control, or operate your company:		
WOMAN-OWNED BUSINESS ENTERPRISE (WBE)		
LESBIAN, GAY, BISEXUAL, TRANSGENDER BUSINESS ENTERPRISE (LGBTE)		
DISABLED-OWNED BUSINESS ENTERPRISE (DOBE)		
DISABLED VETERAN BUSINESS ENTERPRISE OR VETERAN BUSINESS ENTERPRISE (DVBE, VBE, SDV)		
IS YOUR COMPANY CERTIFIED AS ONE OF THE BUSINESS DESIGNATIONS ABOVE? If yes, please give the certifying agency and include a copy of your current certification with your bid response. The 3rd party certifying agencies recognized and accepted by GHS are included.		
LOCAL SMALL BUSINESS If yes, please indicate in which county your company is located? Please include a copy of business license with address. ____DeKalb ____Fulton _____Business location in both counties ____Other		

African American	%	Asian American	%
Hispanic/Latino	%	Pacific Islander	%
Native American	%	Other	%

PART II - NONDISCRIMINATION POLICIES AND PROCEDURES

	Yes	No
Are you an individual and do not employ anyone? If yes, you do not need to complete the remainder of the questions.		
Does your company have an Equal Employment Opportunity/Affirmative Action statement posted on company bulletin boards?		
Do you notify all recruitment sources in writing of your company's Equal Employment Opportunity/Affirmative Action employment policy?		
Do your company advertisements contain a written statement that you are an Equal Employment Opportunity/Affirmative Action employer?		
Do you belong to any unions? If yes, have you notified each union in writing of your commitments to non-discrimination?		
Does your company have a collective bargaining agreement with workers? If yes, do the collective bargaining agreements contain non-discrimination clauses and/or your Equal Employment Opportunity policy covering all workers?		
Does your company, at least annually, maintain a written record of and review the Equal Employment Opportunity policy and Affirmation Action obligations with all employees including those having any responsibility for employment decisions?		
Do you conduct, at least annually, an inventory and evaluation of minority and female personnel for promotional opportunities and encourage these employees to seek, train and prepare for such opportunities?		
Do you conduct, at least annually, a review, of all supervisors' adherence to and performance under the vendors, and Contractor's Equal Employment Opportunity policies and Affirmative Action obligations?		
Is there a person in your company who is responsible for Equal Employment Opportunity? If yes, please give name, phone and email address.		

Please explain any no answers, use additional paper as necessary:
Authorized Representative Signature: _____ Date: _____

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES SUBCONTRACTING PLAN (PROGRAM MANAGEMENT

(TO BE SUBMITTED WITH BID)- SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES

The following are questions concerning the efforts your company will make to ensure that Small, Emerging, and Community-based businesses will have an equitable opportunity to compete for lower tier subcontracts associated with the Grady Health System agreement:

What product/service areas do you envision the inclusion of Small, Emerging, and Community-based businesses, and how is this determined?_____

_____

How are the capabilities of small, emerging, and Community-based businesses determined by your company?_____

_____

_____

How will you ensure the maximum possible inclusion of Small, Emerging, and Community-based business in all of your purchasing solicitations (i.e. Request for Proposals, Request for Information, and Request for Quotes, etc.)?_____

_____

_____

How will your company ensure that Small, Emerging, and Community-based businesses are made aware of upcoming subcontracting opportunities and how will you prepare them to respond appropriately?_____

_____

_____

How will you monitor your company's Small, Emerging, and Community-based businesses' subcontracting performance under this agreement and make any adjustments to achieve the subcontracting plan goals?_____

_____

Will your Small, Emerging, and Community-based businesses be subcontracting administrator:

Yes / No

_____Develop and maintain lists of Small, Emerging, and Community-based businesses from all possible sources

_____Oversee the establishment and maintenance of your company's contract and subcontract award records associated with this Grady Health System agreement?

_____Conduct or arrange the training of your company's purchasing personnel on the Grady Health System agreement goals and processes to achieve this goal?

_____Review purchasing solicitation documents to remove statements, clauses, etc. which may tend to prohibit Small, Emerging, and Community-based businesses.

_____Screen proposed purchasing solicitation documents for subcontracting opportunities and implement appropriate procurement policies and procedures to improve and increase opportunities for Small, Emerging, and Community-based businesses.

_____Introduce Small, Emerging, and Community-based businesses to company purchasing personnel based on commodity or service in which these vendors may have a mutual or potential concern

_____Maintain records demonstrating that procedures have been adopted and implemented to comply with the reporting requirements and Small, Emerging, and Community-based business goals within the Grady Health System

_____Prepare and submit monthly, required Small, Emerging, and Community-based business reports to Grady Health System.

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES SUBCONTRACTING PLAN (DSSP) PG.2

(DIRECT SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES REPORTING)

In adherence to GHS's commitment to Small, Emerging, and Community-based businesses, GHS suppliers must clearly, as defined herein, demonstrate a good faith effort for Tier II direct goods and/or services to be purchased from Small, Emerging, and Community-based businesses certified by one or more of the 3rd party certification agencies recognized by GHS. Such spending with Small, Emerging, and Community-based businesses will be monitored. In connection with such monitoring, Contracted GHS Suppliers will be required to report to GHS monthly, in a manner determined by GHS, all direct spending with Certified Small, Emerging, and Community-based businesses. The Small, Emerging, and Community-based businesses Goal for this Solicitation is 30% of the total contract value.

Company Name:_____ Agreement Term:_____
GHS Business Unit:_____ GHS Business Unit Contact Name:_____
Phone Number:_____ Vendor Contact e-mail:_____

Description of goods/services provided under this primary agreement (include name of project if applicable):
_____

Who will be responsible for coordinating your company's Small, Emerging, and Community-based businesses subcontracting activities during the period of this contract?

Name/Title:_____ Company:_____
Address:_____ Phone:_____
Fax:_____ E-Mail Address:_____

State the total dollar value planned to be subcontracted associated with this GHS agreement:
_____

Please list all of the GHS Accepted 3rd Party Small, Emerging, and Community-based businesses you have identified that will serve as Direct Tier 2 Subcontractors associated with this GHS project and the projected spend amounts with each company:

Vendor Name	Address	Contact	Phone	E-Mail	Certification Type	Business Classification (Product/Service)	Direct Projected Spend in Dollars	Direct Projected Spend by Percentage

Submitted by:

_____ _____
Authorized Representative Signature Title

_____
Date

CERTIFICATION OF EFFORTS

(TO BE SUBMITTED WITH BID) – SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES

Vendor: _____

Solicitation Name: _____ **Solicitation Number:** _____

I certify that the following efforts were made to achieve participation by Certified Small, Emerging, and Community-based businesses.

a) Provided written notices to certified Small, Emerging, and Community-based businesses who can perform the work of the contract or to provide the service **__Yes __ No**
b) Direct mailing, electronic mailing, facsimile or telephone requests **__Yes __No**
c) Provided interested certified Small, Emerging, and Community-based businesses with adequate information about plans, requirements and specifications of the contract in a timely manner to assist them in responding to a solicitation **__Yes __No**
d) Allowed certified Small, Emerging, and Community-based businesses the opportunity to review specifications and all other solicitation related items at no charge, and allowed sufficient time for review prior to the bid deadline **__Yes __No**
e) Acted in good faith with interested certified Small, Emerging, and Community-based businesses, and did not reject certified Small, Emerging, and Community-based businesses as unqualified or unacceptable without sound reasons based on a thorough investigation of their capabilities **__Yes __No**
f) Did not impose unrealistic conditions of performance on certified Small, Emerging, and Community based businesses seeking subcontracting opportunities **__Yes __No**
g) Additionally, I contacted the referenced certified Small, Emerging, and Community-based businesses and requested a bid. The responses I received were as follows:

Name and Address of certified Small, Emerging, and Community-based businesses	**Type of work and Contract Items, Supplies or Services to be Performed**	**Response**	**Reason for Not Accepting Bid**

(If additional space is required this form may be duplicated)

If applicable, please complete the following:

I hereby certify that certified Small, Emerging, and Community-based businesses were "Unavailable" or "Unqualified" to submit bids to provide goods and services for this Solicitation response. I further certify that efforts have been made to establish "Joint Ventures", and said entities were also unavailable at this time.

Reasons for the "Unavailability" or being determined "Unqualified";

Submitted by:

_____ _____
Authorized Representative Signature Title

_____
Date

STATEMENT OF INTENT

TO BE COMPLETED BY ALL KNOWN JOINT VENTURE PARTNERS/ SUBCONTRACTORS/CONSULTANTS

(TO BE SUBMITTED WITH BID)- SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES

Vendor: _____

Solicitation Name: _____ **Solicitation Number:** _____

_____ agrees to enter into a contractual agreement with
Prime Supplier

_____, who will provide the following goods/services
Joint Venture Partner/Subcontractor/Consultant

in connection with the above referenced Solicitation as a certified Small, Emerging, and Community-based business:

_____

_____

_____

for an estimated amount of $_____ or _____% of the total contract value.

_____ _____
Prime Supplier Joint Venture Partner /Subcontractor/Consultant

Intend to work together in accordance with this Contract Compliance Section of the bid, contingent upon award and execution of a contract with Grady Health System with to the aforementioned Prime Supplier.

I hereby certify that this statement is true and correct:

Prime Supplier Signature:

_____

Print Name:

_____

Title:

_____

Date:

_____

Joint Venture/Subcontractor/Consultant Signature:

_____

Print Name, Title and Date:

_____

Address:

_____

Phone :

_____

Fax:

_____

SMALL, EMERGING, AND COMMUNITY-BASED BUSINESSES CERTIFICATION:

I certify that the statements made by me in this Small, Emerging, and Community-based businesses Section are complete and true to the best of my knowledge and belief and are made in good faith. I understand that if I knowingly make any misstatement of fact, I am subject to disqualification and debarment from participation in future GHS contracting opportunities, held liable for breach of contract, and subject to the enforcement of any remedies available under the contract or under contract law. I agree that no changes shall be made to this section without the written consent of GHS.

Authorized Representative Signature

_____ _____

Title Date

APPENDIX A: REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS OF OFFERORS

****REQUIRED INPUT WITH SUBMISSION****

CERTIFICATION

The undersigned certifies that he/she has read, understands, and agrees to be bound by the terms and conditions of the Request for Proposal **(RFP#2008TM)**. The undersigned further certifies that he/she is legally authorized by the Offeror to make the statements and representations on this form, and that said statements and representations are true and accurate to the best of his/her knowledge and belief. The undersigned understands and agrees that if the Offeror makes any knowingly false statements, or if there is a failure of the successful Offeror (i.e., contractor) to implement any of the stated agreements, intentions, objectives, goals, and commitments set forth herein without the prior approval of GHS, then the Offeror's act or omission shall constitute a material breach of the contract. The right to terminate shall be in addition to and not in lieu of any other rights and remedies GHS may have for defaults under the contract. Additionally, the Offeror may be prohibited from obtaining future contracts awarded by GHS. GHS reserves the right to terminate any contract where a material breach has occurred.

NAME: _____

TITLE: _____

COMPANY: _____

ADDRESS: _____

_____

TELEPHONE: _____

FACSIMILE: _____

E-MAIL: _____

_____ _____

(SIGNATURE) **(DATE)**

APPENDIX B: COST PROPOSAL

Offeror's Name: _____

Total contract value for ALL requirements, including *G&A: _____**

*G&A: All general and administrative costs, profits, travel, per diem, and ALL costs associated with this contract.

**This figure is the figure that will be used in the evaluation. _____

Where there is reference in the RFP to deliverables, submission requirements, or other response and contract performance discussions, said reference may not include all requirements in the RFP. It is incumbent upon the Offeror to read this entire RFP carefully and respond to and price all requirements and ensure "Total contract value for ALL Requirements" above includes all requirements.

_____
(Print Name of Authorized Company Officer)

_____
(Signature)

_____
(Date Signed)

APPENDIX C: SOLICITATION/CONTRACT FORM

REQUEST FOR PROPOSAL NUMBER: RFP#26008TM

RFP DESCRIPTION: REMOTE LIMITED OBSTETRIC ULTRASOUND INTERPRETATION SERVICES

PROPOSAL RESPONSES MUST ARRIVE NO LATER THAN ***November 18, 2026, by 2:00PM EST.***

NOTE: Mark the outside lower-left corner of your submission with the RFP number shown above.

This document contains **25** pages. Questions regarding RFP**#26008TM** should be directed to ***Ivan Mann*** **no later than** ***October 9, 2026 by 2:00PM EST.***

You are invited to submit your Proposal for the services listed within this RFP. Responses must arrive at:

ELECTRONIC EMAIL DELIVERY ADDRESS

imann@gmh.edu and gradyrfp@gmh.edu

Executive Director
Procurement & Strategic Sourcing: DocuSigned by: 26544EBCA72D4AF... **DATE:** 9/18/2026

PLEASE BE ADVISED: Offerors must **complete and return all pages** required with Proposal submission. Failure to return these completed pages with responses may result in non-consideration of Proposal submission.

Please acknowledge receipt of the following Addenda to the solicitation documents below by entering the number and the date of each:

Addendum No.: _____ **Date:** _____

Addendum No.: _____ **Date:** _____

NAME OF RESPONDING FIRM: _____

NAME OF COMPANY OFFICER: _____
(Company officer must have authority to legally bind the company)

TITLE: _____

DATE: _____

(MANDATORY) SIGNATURE OF COMPANY OFFICER ABOVE (Certifying agreement with specifications, terms and conditions unless otherwise noted).

_____
Signature

ATTACHMENT A: PRICING REQUIREMENTS

Respondents must complete and submit the Pricing Requirements Sheet with their proposal. The sheet may be modified as necessary to accommodate the Respondent's pricing structure; however, all requested pricing elements must be clearly identified and provided.

Respondents must provide comprehensive, transparent, and fully loaded pricing for the proposed services. Pricing must clearly distinguish per-study professional interpretation fees from coverage, technology, implementation, after-hours, weekend, holiday, and any other recurring or one-time charges.

Respondents must disclose all pricing assumptions, minimum volume or revenue commitments, capacity limitations, escalation factors, and any circumstances that may result in additional charges. Any fees or costs not specifically listed on the Pricing Requirements Sheet must be separately identified and clearly explained in the proposal.

Fees not clearly disclosed in the proposal may be subject to exclusion from the resulting agreement. Failure to submit the completed Pricing Requirements Sheet may result in the proposal being deemed non-responsive.

Pricing Component	Rate / Fee	Notes / Assumptions
Limited first-trimester OB ultrasound interpretation - per study	$_____	
Limited second-trimester OB ultrasound interpretation - per study	$_____	
Other OB ultrasound interpretation category, if applicable - identify	$_____	
Base or minimum coverage fee, if applicable	$_____	
24/7/365 coverage fee, if applicable	$_____	
After-hours fee, if applicable	$_____	
Weekend fee, if applicable	$_____	
Holiday fee, if applicable	$_____	
Implementation / project setup fee	$_____	
PACS / EMR/EHR / interface or technology fee	$_____	
Credentialing or onboarding fee, if applicable	$_____	
Minimum volume or minimum revenue commitment, if applicable	$_____	
Other recurring or one-time fee - identify	$_____	