REQUEST FOR INTEREST ("RFI")

RFI No. RICA-HTH-730-BP1-MIHA-35

Procurement of Mobile Integrated Health Ambulances

June 30, 2026

Note: *It is the Provider's responsibility to check the public procurement notice website or to contact the Request for Interest ("RFI") point-of-contact identified in the RFI for any addenda issued to this RFI. The State shall not be responsible for any addenda issued to this RFI. The State of Hawaii Department of Health shall not be responsible for any incomplete responses submitted as a result of missing addenda, attachments or other information regarding the RFI.*

State of Hawaii | Department of Health
Emergency Medical Services & Injury Prevention Systems Branch

HAWAII STATE DEPARTMENT OF HEALTH
EMERGENCY MEDICAL SYSTEMS & INJURY PREVENTION SYSTEMS BRANCH

June 30, 2026

REQUEST FOR INTEREST NOTICE
For
RFI No. RICA-HTH-730-BP1-MIHA-35

Procurement of Mobile Integrated Health Ambulances

Pursuant to Chapter 103D-202, Hawaii Revised Statutes, and Chapter 3-122-16, Subchapter 4.5, Hawaii Administrative Rules, "Source Selection for Federal Grant," the State of Hawaii Department of Health ("State"), through the Emergency Medical System & Injury Prevention Systems Branch ("EMSIPSB"), request to solicit interest from current and prospective providers for the United States Department of Health and Human Services, Centers for Medicare & Medicaid Services ("CMS") Rural Health Transformation ("RHT") Program.

Each interested provider responding to this RFI must submit a response setting forth the provider's qualifications and plans for meeting or exceeding performance expectations based on the evaluation criteria. Responses must be organized to address each requirement in a format that is easy to follow. Responses shall be financially advantageous to the State.

For purposes of this RFI, the terms "Applicant" and "Provider" may be used interchangeably and shall refer to the entity submitting a proposal in response to this solicitation.

From the release date of this RFI until the submission deadline, any inquiries shall be directed at the sole point-of-contact identified below.

State of Hawaii Department of Health
Emergency Medical Services & Injury Prevention Systems Branch
Leahi Hospital, Trotter Building Basement
3675 Kilauea Avenue
Honolulu, Hawaii 96816
Telephone: (808) 204-2616

Any questions prior to the deadline may be addressed via e-mail to:
EMSIPSB: doh.rica.emscares@doh.hawaii.gov.
Carbon Copy douglas.asano@doh.hawaii.gov.

I. IDENTIFICATION AND PURPOSE

The Rural Health Transformation Program is a federal initiative intended to strengthen and modernize rural health systems through sustainable, community-driven approaches that improve healthcare access, quality, and health outcomes in rural communities.

Project duration, award amounts, matching requirements, and additional funding details will be subject to CMS guidance and the final federal funding announcement.

The full details of the federal funding opportunity are posted on the CMS website at: https://www.cms.gov/priorities/rural-health-transformation-rht-program.

Federal Funding Disclosure: This solicitation is funded by a Rural Health Transformation Plan grant award totaling $188,892,439.75, one hundred percent (100%) funded by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, with $0.00 (0%) financed from non-governmental sources.

II. DESCRIPTION OF THE GOOD(S) OR SERVICE(S)

SCOPE OF WORK

A. Overview

The Provider shall furnish and deliver three (3) new, current-model, tested, and certified commercially produced surface Mobile Integrated Health Ambulances (MIHA), built on a Ford Transit-350 Extended Length (EL) chassis. Each unit shall include all standard production equipment as advertised by the manufacturer, except where otherwise specified herein.

MIHA will be built on an All-Wheel Drive ("AWD") Ford Transit-350 EL chassis.

One (1) unit shipped to Kaunakakai Harbor Molokai, Hawaii for EMSIPSB.

Two (2) units shipped to Hilo Harbor, Hawaii island for Behavioral Health Administration (BHA).

The specifications below cover the general requirements, which include: the type of construction to which the MIHA shall conform; and certain finishing details such as equipment and appliances. The minor details of construction and materials, which are not specified, shall be the responsibility of the Provider to design and construct all features, but subject to final approval of the State's Designated Officer-in-Charge ("OIC").

The manufacturer of the specified vehicle shall be in the process of becoming a current participant in Ford's Pro Upfitter Program or have an existing Ford Qualified Vehicle Modifier ("QVM") on file for review by OIC upon request to ensure that chassis manufacture warranties are not affected by the MIHA upfit.

B. Time of Performance

The initial period of performance for this scope of work is anticipated to begin in July 2026 to and including October 30, 2026. Based upon performance, need, federal funding requirements, and any other requirements, the time of performance may be extended for additional periods as determined by the State.

C. Specifications

1 MINIMUM REQUIREMENT STANDARD

1.01 MATERIALS

The highest degree of quality materials and building processes are required for the MIHA proposed. At a minimum, the manufacturer must meet all current safety and design guidelines set forth by the Society of Automotive Engineers (SAE). The proposal must also result in the completion of a Mobile Integrated Health

Ambulance that complies with all the requirements for emergency response vehicles as set for by the National Highway and Transportation Safety Administration (NHTSA) and the United State Department of Transportation (USDOT).

2. CHASSIS

2.01 ORIGINAL EQUIPMENT MANUFACTURER (OEM) CHASSIS

Quantity: 3 – Ford Transit T350 Extended Length Chassis, All-Wheel Drive (AWD), meeting all the specifications of Section 2 of this RFI.

a) 3-year/36,000 mile ″Bumper to Bumper″ warranty
b) High Roof Option
c) Extended Length

2.01.01 SPECIFIC RATINGS

a) Drive– All-Wheel Drive
b) T-350 Heavy Duty (HD) Dual Rear Wheel (DRW)
c) Gross Vehicle Weight Ratio. – up to 11,000 pounds
d) Wheelbase – 148″
e) Overall vehicle length - 236″

2.01.02 POWER TRAIN

a) Warranty 5 years/60,000 miles
b) Engine
    i. 3.5L Ecoboost V6 Engine
c) Transmission
    i. 10-speed automatic overdrive with selectable drive modes
d) Exhaust System
    i. System complies with Federal Motor Carrier Safety Regulations, Part 393.83

2.01.03 STEERING

a) Electric power-assisted
b) Manual tilt and telescoping steering wheel/column

2.01.04 SHOCK ABSORBERS/STABILIZER BARS

a) Front independent MacPherson strut suspension with stabilizer bar
b) Heavy-duty gas shock absorbers
c) Solid rear axle, leaf springs

2.01.05 BRAKES

a) Four-Wheel Disc Brakes with Anti-Lock Brake System (ABS)

b) AdvanceTrac® with RSC® (Roll Stability Control™), Side-Wind Stabilization System

2.01.06 TIRES AND WHEELS

a) Tire Pressure Monitoring System (TPMS), SOS Post-Crash Alert System™
b) Four forged polished aluminum outer wheels
c) Three OEM steel wheels, with two inner wheels painted white
d) Spare tire painted white and wheel shipped loose
e) Jack and tire changing tools

2.01.07 ELECTRICAL

a) Dual Alternators – 250A
b) Batteries – Dual Absorbent Glass Mat (AGM) batteries – 70 amp-hr each
c) Stationary Elevated Idle Control

2.01.08 INSTRUMENT PANEL AND CONTROLS

a) Gauges
    i. Speedometer
    ii. Turbocharger Boost
    iii. Fuel Level
    iv. Indicator lights
    v. Odometer/Trip Odometer
b) Tire Pressure Monitoring System
c) Cruise control, with steering mounted controls
d) Audio – Amplitude Modulation (AM)/ Frequency Modulation (FM) stereo with MP3
e) SYNC 4 – 12″ touchscreen in center stack
f) Rearview Camera

2.01.09 CAB EXTERIOR

a) Trim Level – XLT
b) Bumper – Chrome
c) Grille – Bright chrome
d) Tow Hooks – Two front
e) Horn – Dual electric
f) Mirrors
    i. Mirrors – Short-Arm — Power-Adjusting, Manual-Folding
    ii. Integrated clearance lamps/ turn signals
g) Lights
    i. Headlamps – Auto On/Off, Quad beam jewel effect
    ii. Daytime running lamps
    iii. Fog lamps

2.01.10 CAB INTERIOR

a) Trim Level – XLT

b) Seats
   i. Cloth 40/20/40
   ii. Combination lap and shoulder harness
   iii. Side door armrest
c) Flooring – Black vinyl
d) Climate Control
   i. Heavy duty, fresh air, high capacity heater/defroster
   ii. Manual, single-zone air conditioning system
e) Airbags
   i. Driver and passenger frontal and side airbag/curtain
   ii. Passenger side airbag deactivation switch
f) Other
   i. Dome light, with dual map lights
   ii. Auxiliary 12 VDC Powerpoint
   iii. Interior hood release
   iv. Power door lock & windows
   v. Remote keyless entry w/Anti-Theft
   vi. Cloth sun visors

2.01.11 COLORS

a) Exterior – White
b) Interior – Dark Palazzo Gray

2.02 CHASSIS MODIFICATIONS

The following modifications shall be made to the chassis by the vendor.

2.02.01 RUNNING BOARDS

Running boards made of bright aluminum diamond plate for a Ford T-350 shall be securely mounted on both sides of the chassis with OEM fasteners.

2.02.02 MUD FLAPS

Two black rear mud flaps shall be installed: one behind each set of rear wheels. Two black front mud flaps shall be installed: one behind each front wheel.

2.02.03 CHASSIS MISCELLANEOUS

a) An ABC-rated five (5) pound fire extinguisher with an Amerex #861H SAE-J3043 compliant bracket shall be installed on the vehicle.
b) White transportation plastic shall be installed on the chassis hood prior to the completed vehicle leaving manufacturer's facility.

2.02.04 ANTI-THEFT SYSTEM

MIHA shall be equipped with an anti-theft system that maintains functionality of all electronic functions including environmental controls, land mobile radios,

lights, computers, etc. without leaving the vehicle vulnerable to theft. Inter-motive idle lock or equal to allow engine to idle with key removed and transmission locked in park.

3. CONVERSION UPFIT SPECIFICATIONS

3.01 UPFIT LAYOUT / DESIGN:

MIHA shall be equipped with three private rooms. The design shall allow for walk though access between room #1 and room #2 from the streetside sliding door. A bulkhead wall shall be installed behind the front driver's compartment wall with a clear window for viewing from room #1.

See 5.01 Figure #1 for design example.

3.01.01 ROOM #1

Private front room for patient assessment and therapy sessions

a) Shall have an aft privacy partition wall with room #2.
b) Lagun style pivot work surface located in the room therapy area for with desk space for clinician.
c) Two count 20" captain swivel chairs both located in Room #1 of the van.
d) Provide one 28-inch Television (TV) type smart screen on pivot mount. Screen shall be located on streetside wall.

3.01.02 ROOM #2

Private middle room for dosing / dispensing medications shall have the following:

a) Front door access to the room with a rear window designated solely for medication dispensing.
b) Space to mount and securely accommodate Medixsafe Station Compact type safe with dimensions 12'W x 14'H x 16'D power supply Direct Current 12 volt.
c) Space to accommodate refrigeration for medication in commercial grade 25 liter or larger cooler with cooling range from 68 degrees F to -7.6 degrees F.
d) All electrical on-board power storage located in room #2
e) Provide one 28-inch TV type smart screen on pivot mount. Screen shall be located on streetside wall.
f) Versatile attachment points on streetside and curbside walls for medical equipment.
g) Locking overhead cubby style storage along ceiling of van loacted on both street and curb side of vehicle.
h) A sink module with a pull-out drawer.
    i. A wastewater holding tank that collects "gray water" shall be located in the sanitation station
    ii. A portable hot water removable system shall provide on-demand heated water for sanitation.

3.01.03 ROOM #3

Room #3 shall serve as a rear walk-up area providing access through the rear entry door for patient medication dispensing.

a) Room shall have a rear privacy partition window and wall separating the patient dosing/dispensing room from room #2.

3.02 VENTILATION SYSTEM

3.02.01 AIR CONDITIONING

Units shall be equipped with dual rooftop air conditioner units to service three rooms on vehicle.

3.02.02 ROOF TOP VENTS

Vehicle shall be equipped with rooftop air vents for ventilation as needed in room #1 and #2.

3.03 SIREN

A Whelen CenCom CORE siren, including a #C399 controller module, magnetic microphone clip, microphone extension cord and a Wean #CCTL6 control head shall be installed. The siren's hands-free function shall operate through the OEM horn ring circuit when the siren HF Button is selected, and slide bar is in position #3.

a) Single Whelen #SA315 100-wa\ speaker with mounting bracket shall be installed behind the OEM grille.

3.04 LIGHTING

3.04.01 INTERIOR LIGHTING

a) Vehicle shall include adequate interior lighting to provide patient care and consultation in all three rooms.
b) Shall also include Light Emitting Diode (LED), Red, Green, Blue (RGB) Mood lighting throughout all rooms.

3.04.02 EXTERIOR LIGHTING

a) Vehicle shall be equipped with side light pods to operate under curbside awning when extended.
b) Emergency Warning System
   Vehicle shall be equipped with a Whelen CenCom CORE vehicle control system to include:
   i. Whelen Front Flashers light bar with M6 light heads
   ii. Rear Flashers
   iii. Streetside flashers M9 light heads

iv. Curbside flashers M9 light heads

c) Scene Flood Lights
   i. Vehicles shall be equipped with M9 scene flood lights on streetside and curbside. Rear vehicle flood lights are to be fitted to vehicle size and allow for maximum performance.

3.05 EXTERIOR BUILD COMPONENTS

3.05.01 ROOF RAILS

Provider SHALL provide and install roof rails.

3.05.02 SHORELINE AUTOEJECT

Utility power shall be furnished from 120 volt Alternating Current (AC) shore power via a Kussmaul Super Auto-Eject plug with a white cover on a stainless-steel plate installed on the streetside forward near driver's door. A Kussmaul Bar Graph Display battery indicator panel shall be installed on the plate above the auto eject and shall monitor battery charge status. Circuit breakers shall be installed for overcurrent protection and circuit isolation.

3.05.03 RETRACTABLE AWNING

Vehicles shall be equipped on the curbside with a manual-crank awning housed in a durable, corrosion-resistant aluminum case. The canopy shall be constructed of 3.75 mm UV-resistant, waterproof fabric and supported by reinforced aluminum arms with wind-resistant support legs.

3.05.04 REAR DOOR STORAGE BOX

Vehicles shall come with rear door storage box with built in shelf.

3.05.05 REAR STEP BUMPER

Vehicle shall come with rear step bumper with reverse lights.

3.06 COMMUNICTIONS

3.06.01 ROUTER

Provider should provide and install a Cradlepoint R1900 5G router in communications cabinet. A protected, aircraft-style toggle switch shall be installed in Room #2 on the streetside wall to allow the router to be reset without accessing the communications cabinet.

3.06.02 SATELLITE SYSTEM

Provider shall provide and install on vehicles roof a Starlink mini satellite dish and all associated mounting hardware. Dish mount shall have a durable, secure

enclosure at its base to protect the mount and wiring from debris. All required connections shall be completed, including antenna, cabling, power, and grounding. The State will provide satellite internet service subscription.

3.06.03 ANTENNAS BASE PORT

Provider shall provide and install three Larsen 27 MHz to 6 GHz NMO universal antenna mounts with RG-58U low loss, dual shield cables, with FME male connectors. Base ports located on the vehicle roof, with cable connections routed to the communications compartment. All connections shall be completed, and each cable shall be labeled and terminated within the communications compartment. Base ports not used shall be weatherproof, capped and sealed for future use as needed.

3.06.04 TRI-BAND ANTENNA

Provider shall provide and install a VHF/UHF/7-800 MHz SIT-CO Brand Flexi-Whip Tri-Band Antenna shall be installed in antenna port #1 with functional L3 Harris XL-200M antenna base.

3.06.05 CELLUAR ANTENNA

Provider supplied Panorama PN# LG-IN2444-W Mako 5G dome antenna with a range covering 617-960/1710-6000MHz shall be install in antenna port #2 and connected to the Cradlepoint R1900 with appropriate antenna cable and mounts. All connections shall be made, and cables shall be labeled.

3.06.06 LAND MOBILE RADIO

*** For the EMSIPSB unit only. Install State-supplied L3 Harris XL-200M multiband radio transceiver with two remote heads, auxiliary speakers, and microphones. All connections shall be made, including antenna, antenna cable(s), battery power or ignition power, and grounds. Prior to powering up module, all in-line fuses of radio equipment shall be removed and secured to their fuse holders. Remote head locations shall be determined during a pre-build conference. The LMR shall automatically power on when the vehicle starts and power off 30 minutes after the vehicle is shut down, without any driver or operator intervention.

3.06.07 NETSMART TELEHEALTH SOLUTION

Vendor to provide Netsmart's Care Router and Telehealth Solutions for the two Behavioral Health MIHA vehicles.

3.07 SECURITY SYSTEM

3.07.01 CAMERA SYSTEM

Vendor shall supply and install 360-degree security camera system.

a) 4 exterior cameras

b) 3 interior cameras
c) Remote monitoring for increased safety and security.

3.08 ON BOARD POWER

3.08.01 POWER STORAGE

Vehicle shall come equipped with:

a) 6000 watt hour power storage unit or greater shall be installed.
b) 2000 watt inverter shall be provided.
c) 100 amp charging capacity off factory alternator.
d) 15 amp shore line power connection.
e) 200 watt of roof mounted solar cells shall be installed.
f) Multi-location load switching.
g) 12 count, 120 volt GFCI outlets located thought out the build shall be provided.

3.09 LETTERING/DECALS

3.09.01 DECALS – BEHAVIORAL HEALTH ADMINISTRATION

Two MIHA vehicles for Behavioral Health Administration shall be shipped color "white" with only the "Great Seal State of Hawaii" and "FOR OFFICIAL USE ONLY" door decals. Vector graphics to be provided by the State. Printed on 3M - IJ680CR reflective with protective UV laminate for longevity.

3.09.02 DECALS – EMERGENCY MEDICAL SERVICES (EMS) BRANDING

EMS branding will be standard to Hawaii ambulances patterns. All graphics will be nominal to vehicle size, color, letter outline and fonts. Specifics will be provided to the State and a detailed computer aid drawings shall be submitted and approved by the OIC prior to application of decals

a) Material: 3M IJ680CR reflective with protective UV laminate for longevity.
b) "Great Seal of the State of Hawaii" will be provided in vector graphic for streetside and curbside doors.
c) Orange (#680CR-14) strip 1"H, 1" gap, 6"H, 1" gap, 1" H – strip should wrap around vehicle minus area covered by safety chevrons.
d) High visibility rear safety Chevrons: 6″ 3M Diamond Grade Red (#983-72) and Fluorescent Yellow Green (983-23)
e) Font: Helvetica Neue Condensed Bold. Nominal fit to vehicle. Blue (680CR-75) with Black (680CR-85) outline:
    i. "HAWAII STATE"
    ii. "DEPARTMENT of HEALTH"
    iii. Star of Life - Border & Rod of Asclepius: To match White (#680CR-10)
    iv. "EMERGENCY MEDICAL SERVICES"
    v. "MOBILE INTEGRATED HEALTH"

3.10 VEHICLE TINTING

Clear ceramic UV window film with Total Solar Energy Rejection of 40% or greater shall be applied to the windshield, driver, and passenger windows.

3.11 MISCELLANEOUS EQUIPMENT

3.11.01 LOOSE EQUIPMENT

Provider shall provide a trash receptacle for Room #1 and Room #2. The receptacles shall be heavy duty, unitized construction, footpedal–operated trash cans equipped with a self closing lid. All interior and exterior surfaces shall be nonabsorbent and resistant to retaining fluids, biological contaminants, and pathogens.

a) OEM vehicle touch-up paint.
b) A pair of Ziamatic Corp AC-32 medium wheel chocks shall be provided and shipped loose with vehicle.
c) One warning kit: Qty: 6 ultra bright LED emergency traffic puck / flasher flare in a plastic container that meets federal safety standards.

4. SERVICE

4.01 WARRANTY

The Provider shall have an established facility on the islands of Molokai and Big Island of Hawaii to service and repair the furnished MIHA and equipment during the vehicle warranty period.

The facility must be AUTHORIZED BY THE MANUFACTURER OF THE MIHA to provide warranty service and repairs.

If the Provider does not have its own facility on those islands, the Provider shall designate a facility that is authorized by the MIHA manufacture to do repairs during the warranty period. The State reserves the right to inspect the facility. The Provider shall be able to offer local support services on the islands Molokai and Big Island of Hawaii to include, but not limited to, the following:

a) Provide warranty services and inspection.
b) Provide repair and mechanical services.
c) Provide technical support, training, troubleshooting, and diagnostic testing.

The State may request a copy of the agreement between the manufacture of the MIHA being offered and the service and repair facilities. In addition, if the service and repair facilities are other than the Provider’s own, the State may request a copy of the agreement between the Provider and the designated facility to provide services and repair under the manufacturer's warranty.

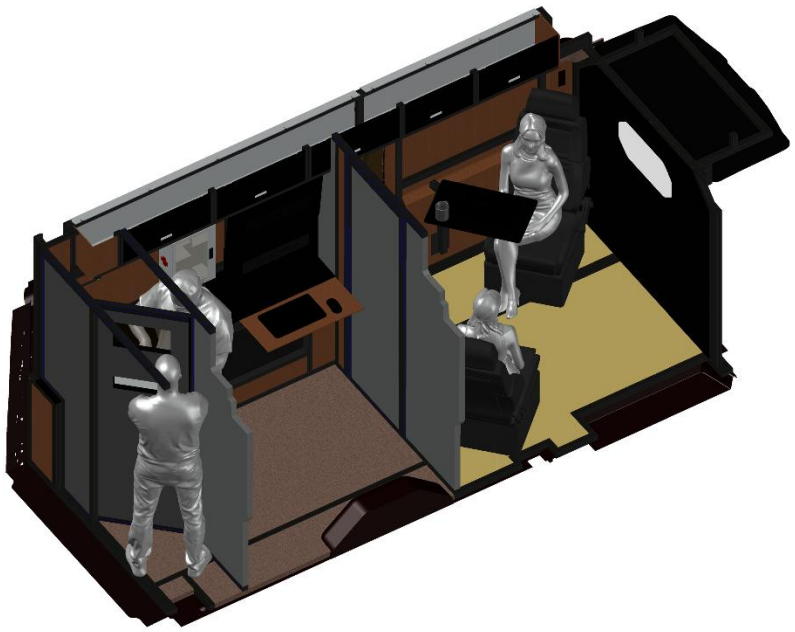
4.02 PRE-BUILD CONFERENCE

Prior to the commencement of manufacturing, the Provider shall participate in a pre-build conference with the State at a mutually agreed upon date and time. The conference shall be conducted in-person or by video conference as determined by the State.

The Provider shall ensure that personnel with decision-making authority and technical knowledge of the vehicle's design, engineering, and production are in attendance.

5. FIGURES

5.01 FIGURE #1



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III. EVALUATION CRITERIA

The selection of the Provider will be based on how well they meet the requirements of the strategies, organizational capacity, and demonstrated readiness.

The evaluation of responses received in response to the RFI will be conducted comprehensively, fairly, and impartially. Structural, quantitative scoring techniques and weighted totals will be utilized to maximize the objectivity of the evaluation.

When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

A. General Qualifications

The Provider shall have all the following qualifications:

1. Compliance with applicable federal, state, and industry design, construction, and performance standards for the type of vehicle and services required under this solicitation.
2. Manufacturing capacity to perform primary body construction in an established in-house manufacturing facility, including the ability to perform required warranty work.
3. A minimum of ten (10) years of experience as a final-stage MIHA vehicle manufacturer.
4. Sufficient staffing, resources, and operational capability to coordinate vehicle delivery, inspection, training, and the provision of all required support manuals and documentation.

B. Evaluation Categories and Thresholds

Evaluation Categories	**Points**
Administrative Requirements General Qualifications Applications that do not meet General Qualifications will not be scored.	NOT SCORED Pass/No Pass
Application	
Experience and Capability: Evaluates the Provider's relevant experience, expertise, and proven ability to perform similar work successfully.	15 points
Manufacturing Qualifications: Demonstrates the Provider's ability to manufacture or provide the required products/services in accordance with project requirements.	15 points
Technical Specifications: Measures how well the proposed solution meets the technical requirements and standards outlined in the solicitation.	30 points
Service Delivery: Evaluates the Provider's approach to providing services efficiently, reliably, and within required timelines.	10 points
Warranty: Reviews the Provider's commitment to correcting defects, providing support, and ensuring quality after delivery.	10 points
Price: Assesses the reasonableness, competitiveness, and value of the proposed cost.	20 points
TOTAL POSSIBLE	100 points

Full points will be awarded to the response that exceeds the minimum requirements listed in the RFI.

IV. PROCEDURE FOR SUBMISSION

All responses shall be submitted electronically via email. If the electronic submission exceeds applicable email size limitations, the Provider shall notify the State and submit the response through an alternative electronic or physical file transfer method approved by the State. Only typed responses to this RFI shall be accepted.

All responses must be prepared in English and include a table of contents with page numbers as well as page numbers on each page. Responses must follow all forms and formats required by this RFI, and all financial information must be provided in U.S. currency.

Multiple or alternate responses shall not be accepted unless authorized. If a Provider submits alternate responses when such responses are not authorized, but clearly identifies one response as its primary response, the State reserves the right to consider only the primary response for evaluation and award purposes.

A. Delivery Requirements

1. Electronic Submissions

Providers are responsible for ensuring that all submission materials, including attachments, are complete, legible, and successfully transmitted to the designated email address by the submission deadline. The State shall not be responsible for delayed, incomplete, corrupted, misdirected, blocked, or undelivered email transmissions, including those caused by internet service interruptions, spam filters, file size limitations, or other technical issues.

Unless otherwise specified, all documents shall be submitted in PDF format. The State reserves the right to request resubmission of any files that are corrupted, inaccessible, or otherwise unreadable; however, the State is under no obligation to permit correction of deficiencies after the submission deadline.

a) All electronic submissions shall be sent

To: doh.rica.emscares@doh.hawaii.gov
Copied (CC): douglas.asano@doh.hawaii.gov

b) The subject line of the email shall state:

"RFI No. _____ Submission – [Provider Name]"

c) The body of the email shall include, at a minimum:

i. Primary contact person; phone number, and email

ii. Secondary contact person, telephone number, and email address (if applicable)

B. Format

Administrative Requirements	
1. Cover Letter	The cover letter shall include: - The legal name of the provider. - The name, title, email address, and telephone number of the authorized contact person for the response; and - The total funding amount requested for the proposed project.
2. Table of Contents	Table of contents shall clearly identify all required sections and attachments.
3. Form A	Response Application Identification Form, attached as Exhibit A.
4. Blank Invoice	Submit a blank sample invoice in the format anticipated to be used for billing under the resulting contract.
5. Provider Compliance (Optional at the time of submission, required if an award is granted.)	If using Hawaii Compliance Express (HCE): Submit a current Certificate of Vendor Compliance issued through Hawaii Compliance Express. - If the HCE certificate indicates a Hawaii Department of Commerce and Consumer Affairs ("DCCA") exemption, also submit a Certificate of Good Standing ("COGS") issued by DCCA. If NOT using Hawaii Compliance Express: Submit all applicable compliance documents listed below. Each certificate must be valid at the time of submission: - State of Hawaii Tax Clearance Certificate (Department of Taxation) - IRS Tax Compliance Documentation (as applicable or equivalent federal tax clearance documentation) - Department of Labor and Industrial Relations ("DLIR") Certificate of Compliance - Certificate of Good Standing issued by the DCCA Business Registration Division (not required for sole proprietorships or entities exempt from registration)
Evaluation Categories	

6. Experience and Capability	The Provider shall provide the number of years in business and the number of years providing the specific services required. This should include capability to be a final stage MIHA vehicle manufacturer. The Provider shall provide references, client listings, and/or at least three examples demonstrating relevant experience and capacity to perform the proposed services. Each reference shall include the organization name, contact person, contact information, project description, contract period, and scope of services provided.
7. Manufacturing Qualifications	The Provider shall provide sample projects and/or examples of relevant deliverables provided in the past showing Providers' ability to successfully perform the required services.
8. Technical Specifications	The Provider must provide a description of the specifications they intend to provide as outlined in this RFI.
9. Service Delivery	The Provider shall provide a timeline identifying key activities and deliverables including the expected delivery dates to the final destination(s).
10. Warranty	The Provider shall submit a detailed description of the warranty coverage provided, including the coverage period, covered components, exclusions, warranty service process, and any applicable limitations.
11. Cost	The Provider shall submit a Firm-Fixed-Price for the complete manufacture of the MIHA vehicles and delivery to destination.

C. Confidentiality

If a Provider believes any portion of a response contains information that should be withheld as confidential, the Provider shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the response, be clearly marked, and shall be readily separable from the response to facilitate eventual public inspection of the non-confidential sections of the response.

Note that price is not considered confidential and will not be withheld.

V. DEADLINE

Submissions for the RFI shall be received no later than:

Close Time: 4:30 PM Hawaii Standard Time (HST)

Close Date: July 9, 2026

VI. SPECIAL PROVISIONS

A. Compliance

All Providers shall comply with all applicable federal, state, and local laws, regulations, ordinances, and requirements governing entities conducting business in the State of Hawaii.

B. Tax Clearance

Pursuant to Hawaii Revised Statutes ("HRS") §103-53, as a prerequisite to entering into contracts of $25,000 or more, providers are required to have a tax clearance from the Hawaii State Department of Taxation ("DOTAX") and the Internal Revenue Service ("IRS").

C. Labor Law Compliance

Pursuant to HRS §103-55, providers shall be in compliance with all applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety.

Prior to contracting, owners of all forms of doing business in the state except sole proprietorships, charitable organizations, unincorporated associations and foreign insurance companies shall be registered and in good standing with the Department of Commerce and Consumer Affairs, Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website.

1. Providers may register with Hawaii Compliance Express for online compliance verification from DOTAX, IRS, DLIR, and DCCA. There is a nominal annual registration fee (currently $12) for the service. The HCE's online "Certificate of Vendor Compliance" provides the registered provider's current compliance status as of the issuance date and is accepted for both contracting and final payment purposes.

2. Providers not utilizing HCE to demonstrate compliance shall provide paper certificates to the State purchasing agency. All applications for applicable clearances are the responsibility of the Providers. All certificates must be valid on the date they are received by the State purchasing agency. The tax clearance certificate shall have an original green certified copy stamp and shall be valid for six months from the most recent approval stamp date on the certificate. The DLIR certificate is valid for six months from the date of issue. The DCCA certificate of good standing is valid for six months from date of issue.

D. Wages Law Compliance

If applicable, by submitting a response, the Provider certifies that the Provider is in compliance with HRS §103-55, wages, hours, and working conditions of employees of Providers performing services.

E. Campaign Contributions by State and County Contractors

HRS §11-355 prohibits campaign contributions from certain State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body.

F. General and Special Conditions of Contract

The general conditions that will be imposed contractually are attached to the Solicitation/Notice. Special conditions may also be imposed contractually by the State purchasing agency, as deemed necessary.

G. Insurance

Prior to the contract start date, the provider shall procure at its sole expense and maintain insurance coverage acceptable to the State in full force and effect throughout the term of the Contract. The provider shall provide proof of insurance for the following minimum insurance coverage(s) and limit(s) in order for the contract to be executed. The type of insurance coverage is listed as follows:

1. Commercial General Liability Insurance coverage issued by an insurance company in the amount of at least $1,000,000 for bodily injury and property damage liability arising out of each occurrence and $2,000,000 aggregate.

2. Automobile Insurance issued by an insurance company in an amount of at least $1,000,000 per occurrence.

VII. STATEMENT OF OBLIGATION

Neither the State nor any interested provider or interested party shall have any obligation under this RFI. This RFI is issued pursuant to Subchapter 4.5 of Hawaii Administrative Rules (HAR) Chapter 3-122.

Participation in this RFI is entirely optional. Submission of information or recommendations does not obligate any provider to participate in any future procurement process, nor does it confer any right to be included in any subsequent solicitation or award.

This RFI does not commit the State to award a contract, nor will the State defray any costs incurred in preparing responses or participating in any presentations or negotiations.

Furthermore, participation in this RFI is not required as a condition for responding to any future procurement action the State may issue.

STATE OF HAWAII
DEPARTMENT OF HEALTH
EMERGENCY MEDICAL SERVICES & INJURY PREVENTION SYSTEMS BRANCH

APPLICATION IDENTIFICATION FORM

RFI NUMBER: _____

RFI TITLE: _____

BUSINESS INFORMATION

Legal Business Name:
Doing Business As:
Business Telephone Number:

Business Address (Street Address) City, State, Zip Code:

Business Mailing Address
(if different than Business Address):

Payment Mailing Address
(if different than Business Mailing Address):

*If awarded, Form W-9 will be required for each address.

PRIMARY POINT OF CONTACT

Name:

Title:

Office Phone Number:

Mobile Phone Number (if any):

Email:

FISCAL RELATED POINT OF CONTACT

Name

Title

Office Phone Number:

Mobile Phone Number (if any):

Email:

BUSINESS ENTITY

Type of Business Entity *(check one)*:

☐ Non-Profit Corporation ☐ Limited Liability Company ☐ Sole Proprietorship
☐ For-Profit Corporation ☐ Partnership

If applicable, state of incorporation and date incorporated:

State: Date:

FINANCIAL

Please indicate your preferred procurement method (e.g., purchase agreement, rate schedule, cost-reimbursement, budget-based, or other applicable procurement vehicle):

I certify that the information provided above is to the best of my knowledge true and correct.

_____ _____
Authorized Representative Signature *Date of Signature*

_____
Authorized Representative Name

_____
Authorized Representative Title