



NORTHERN INYO HEALTHCARE DISTRICT
One Team. One Goal. Your Health.

July 27, 2026

REQUEST FOR PROPOSAL

Radiology Professional

Services RFP 2026-01

Due 5:00pm PDT Monday August 31, 2026

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Section 1 – Introduction

Northern Inyo Healthcare District is requesting proposals from qualified firms or individuals for Radiology Professional Services.

Proposers may deliver their proposals in the following ways:

1. Hard-copy proposals can be addressed and delivered to: Dianne Picken – Medical Staff Director, Northern Inyo Healthcare District, 150 Pioneer Lane, Bishop, CA 93514. If you will be submitting hard copies, please include two copies, with any Proprietary Information in a separate envelope. Proposals can also be delivered in person to the same address. (The Administration Building is generally open Monday-Friday, 0800- 1600 and can be accessed via Door #5.)
2. Proposals may be sent as one PDF file, with the exception of any Proprietary Information, which should be sent as a separate PDF file. Electronic submissions may be sent to:
Dianne.Picken@nih.org
3. Proposals must be received on or before 5:00pm PDT Monday August 31, 2026, at which time a representative of the Executive Team will announce publicly the names of those firms or individuals submitting proposals. No proposals will be accepted after this time. Any public disclosure will be made in accordance with the California Public Records Act and the provisions of this RFP.
4. Proposers should not assume that proposals have been received until an Acknowledgement of Proposal receipt is provided by NIHD.

Northern Inyo Healthcare District's Overnight Delivery (FedEx, Airborne, and UPS)

address is: Dianne Picken, Medical Staff Director
Northern Inyo Healthcare
District 150 Pioneer Lane
Bishop, CA 93514

NORTHERN INYO HEALTHCARE DISTRICT

Christian Wallis

Christian Wallis
Chief Executive Officer
Issuing Executive

07/29/2026

Section 2 – RFP Procedures

Inquiries

All inquiries concerning this RFP must be submitted in writing to Dianne Picken, Medical Staff Director at **Dianne.Picken@nih.org** no later than 5:00pm PDT on August 21, 2026. Respondents will carefully examine all documents included in this Request for Proposal (RFP) and shall make a written request for interpretation or correction of any ambiguity, inconsistency, or error herein. Any interpretation or correction will be issued as an Addendum and be posted on the website, www.nih.org. Only a written interpretation or correction by Addendum shall be binding. Respondents are cautioned against relying upon any interpretation or correction given by any other method.

Proposal Withdrawal

Proposers may withdraw their proposals by notifying the District in writing at any time prior to the proposal response time deadline. Proposers may withdraw their proposals in person or through an authorized representative. Proposals, once opened (hard copy or email), become property of the District and will not be returned to the Proposers.

Proposal Disclosure

Proposers should be aware that proposals will become public records when in judgment of the District, the Public Records Act, requires disclosure. Proposers must invoke, in writing, the exemptions to disclosure provided by law in their response to the RFP by providing a specific statutory authority for claimed exemptions, identifying the data or other materials to be protected, and stating the reasons why such exclusion from public disclosure is necessary.

Proposals will be made available for public inspection at the time the District posts notice of its decision or intended decision concerning contract awards.

Any resulting contract award may be reviewed by any person after the contract has been executed by the District. The District has the right to use any and all information/material submitted in response to this Request for Proposals and/or resulting contract from it. Disqualification of a Respondent does not eliminate this right.

Public Records Act

All material submitted regarding this RFP becomes the property of the District. Proposers should take special note of this as it relates to any proprietary information that might be included in their offer. Any resulting contract may be reviewed by any person after the contract has been executed by the District. The District has the right to use any or all information/material submitted in response to this RFP process and/or any resulting contract from the same.

Disqualification of a proposal does not eliminate this right.

Anticipated RFP Schedule

The following schedule is tentative and may be modified by the District in its discretion:

	Event	Scheduled Dates	
1.	RFP Public Announcement	August 5, 2026	
2.	Deadline for Receipt of Questions	August 21, 2026	
3.	NIHD Responses to Questions, if any	August 24, 2026	
4.	Deadline for Receipt of Proposals	August 31, 2026, at 5:00pm PDT	
5.	Optional Interviews, Presentations, or Requests for Clarification	September 2026, if requested by NIHD	
6.	Anticipated Contractor Selection/Award Notification	On or about October 2, 2026	
7.	Anticipated Contract Execution	On or about November 2, 2026	
8.	Anticipated Service Start Date	May 3, 2027	

Any selection or award is subject to completion of all applicable District review and approval processes and execution of a definitive agreement acceptable to the District.

Delays

The District may delay or modify scheduled event dates if it is to the advantage of the District to do so. The District will notify Proposers of all changes in scheduled due dates by posting any changes by addenda on the website.

Addenda

If revisions or clarifications to the RFP become necessary, the District will provide written addenda posted on the District website, www.nih.org.

It is the responsibility of Proposers to closely monitor postings on the District's website. A listing acknowledging any and all posted addenda must accompany your proposal. In the event this listing is not with your proposal, it will be assumed that the respondent is aware of any and all addenda.

The District will not issue addenda less than five (5) days prior to the scheduled deadline date and time for receiving proposals, unless said date is to be postponed.

Oral Presentations and/or Interviews

At its sole discretion, the District may invite short-listed respondents to conduct oral presentations or interviews. Presentations or interviews provide an opportunity for Proposers to clarify their proposals for the District. The District will schedule any such presentations or interviews.

Acceptance or Rejection of Proposals

The District reserves the right to reject any and all proposals when (1) such rejection is in the best interest of the District; or (2) the proposal contains any irregularities; provided, however, that the District reserves the right to waive any minor irregularities and to accept the proposal determined most responsive and responsible and best meeting its needs. The right to accept or reject proposals is completely within the District Board and management's discretion regardless of the scoring or competitive details of the proposals. The District reserves the right to select one or more Proposers to proceed to negotiate terms of a contract and to continue to choose to negotiate with any one or more Proposers until such time as the District awards a final contract.

The District also reserves the right to cancel this RFP at any time and/or to solicit and re-advertise for other proposals. This RFP does not commit the District to award a contract or contracts.

Communication & Lobbying Restrictions

From the time the District posts this RFP, until it awards a contract to a successful Proposer, any Proposer (or any of its representatives or agents) is prohibited from any communication concerning this RFP with the Hospital's Executives, Staff, District Board of Directors and/or any agents thereof, except through the designated RFP contact identified in the Inquiries section. This restriction does not prohibit ordinary course clinical or operational communications unrelated to this RFP, including communications required under an existing agreement with the District. No department or office at the District has the authority to solicit or receive official proposals except as specified in this RFP. All solicitation is performed under direct supervision of the Issuing Executive. This does not apply to oral presentations before evaluation/selection teams, contract negotiations or public presentations made to the Hospital during any duly noticed public meeting. Violation of these provisions may result in disqualification, in the District's discretion.

Development Costs

Neither the District nor its representatives shall be liable for any expenses incurred in connection with the preparation, submission or presentation of a response to this RFP.

Conflicts of Interest

All Proposers must disclose with their proposal the name of any officer, director, or agent who is an elected official, appointed official, independent contractor or an employee of Northern Inyo Healthcare District and/or Northern Inyo Hospital. Further, all Proposers must disclose the name of any elected

official, appointed official, independent contractor or employee of the Hospital or the District who owns directly or indirectly, any interest in the Proposer's firm or any of its branches.

Non-Collusion

By submitting and signing a proposal response, the Proposer certifies that their offer is made without prior understanding, agreement, or connection with any corporation, firm or person submitting an offer for the same materials, services, supplies or equipment and is in all respects fair and without collusion or fraud. No premiums, rebates or gratuities are permitted, either with, prior to or after any delivery of material or provision of services. Any violation of this provision may result in contract cancellation, return of materials, or discontinuation of services and possible removal from the District's Vendor/Bid List(s).

Subcontracting

Firms submitting proposals may subcontract portions of the engagement to other firms. If this is to be done, that fact, and the name of the proposed subcontracting firms, must be clearly identified in the proposal. However, following award of the contract, no additional subcontracting or changes in subcontractors will be allowed without express prior written consent of the District. No compromise to insurance requirement shall be made for under insured vendors. Any approved subcontractor and its physicians must satisfy the applicable requirements of this RFP, and the successful Proposer will remain responsible for all subcontracted services.

Licenses and Permitting

Proposers, both corporate and individuals, must be or, by contract execution, become legally authorized to provide the professional medical services described in this RFP in the State of California. Each physician proposed to provide services must hold, or be eligible to obtain, all licenses and certifications required to perform the services and must obtain them before providing services. Proposers must identify in their proposals any pending licensure or certification and the anticipated date of completion. The successful Proposer and all physicians providing services must satisfy the credentialing and privileging requirements in Section 5 before providing services. Should the Respondent be unable to satisfy these requirements before commencement of services, the District may reject the proposal or withdraw the award.

Section 3 – Purpose of the RFP

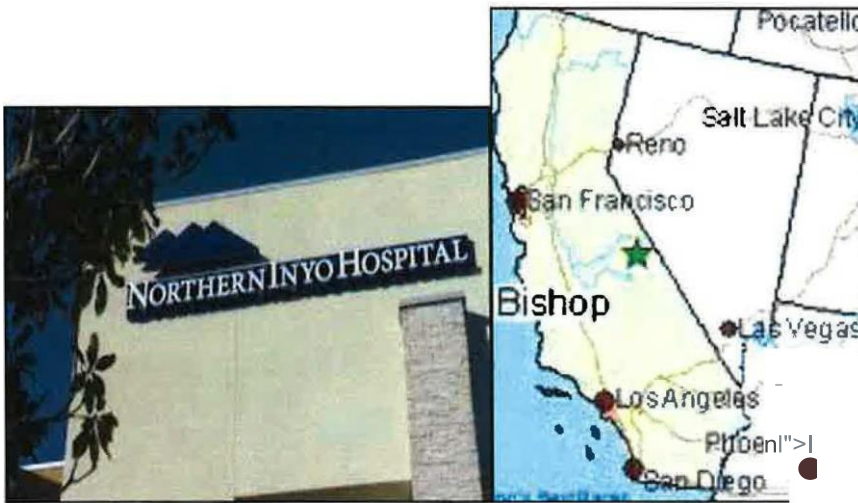
Intent

NIHD is seeking proposals to provide Radiology Professional Services that are able to deliver cost-effective, high quality service for our patients, NIHD and clinicians.

Background Information

About Us

NIHD is located in Bishop, California, a town in between two destination mountain ranges, the Sierra Nevada mountains to the West and the White Mountains to the East. There are many outdoor recreation opportunities to enjoy in and around Bishop and you can enjoy those activities in the most beautiful scenery most people will ever experience.



NIHD operates Northern Inyo Hospital, a 25-bed critical access, district designated, hospital. The hospital has 16 Medical-Surgical beds, 4 Intensive Care Unit beds and 5 Perinatal beds that has been providing healthcare in the Eastern Sierra region since 1946 and provides healthcare services in a county of 18,000+ people. There are also three state-of-the-art surgical suites and a large, modern Emergency Department. The district also operates a Rural Health Clinic that includes women's services and Northern Inyo Associates, which include outpatient clinics for General surgery, Orthopedics, Pediatrics, Allergy, Internal Medicine, and Telehealth Virtual Clinic Specialties.

There are approximately 1500 admissions per year; with 77% admitted through the ED. Our average inpatient daily census is approximately 6.98 with an average length of stay of about 3.64 days. (FY 2026).

Our Accreditation.

NIHD is the only acute care hospital for 150 miles that is accredited by The Joint Commission. This accreditation recognizes our healthcare quality improvement and risk management orientation. Staff from across the organization work together to develop and implement approaches that have the potential to improve care for the patients in our community.

Our DI department is accredited by the American College of Radiology for the following services:

- Computed Tomography
- Ultrasound
- Mammography
- Nuclear Medicine
- Magnetic Resonance Imaging
- Breast
- MRI

Our Mission

Improving our communities, one life at a time. One Team. One Goal. Your Health.

Our Vision

Northern Inyo Healthcare District will be known throughout the Eastern Sierra Region for providing high quality, comprehensive care in the most patient friendly way, both locally and in coordination with trusted regional partners.

NIHD Diagnostic Imaging (Radiology) Services

The Diagnostic Imaging (DI) Department provides emergency and inpatient radiography, CT and US services 24 hours per day, seven days per week. In addition, we provide in-patient, out-patient, and emergency patient services from Monday through Friday (excluding NIHD observed holidays) from 7am - 5:30pm. The DI Department requires 24-7-365 Teleradiology services that provide timely interpretations of all imaging exams and have the ability to provide subspecialized interpretations as requested / warranted.

In addition to the TeleRadiology coverage, NIHD requires on-site coverage by a provider(s) competent to perform the interventional / therapeutic procedures and breast health diagnostic / therapeutic procedures identified below. NIHD requires that on-site coverage provider schedule proposals account for the timely performance (within two weeks) of all on-site procedures outlined below.

The DI department includes the following modalities and services:

- General Radiography
- Fluoroscopy
- Computed Tomography (CT)
- Magnetic Resonance Imaging (MRI)
- Ultrasound (including vascular)
- Dual Energy X-ray absorptiometry (DEXA)
- Nuclear Medicine (NM) - including Cardiac
- Mammography

- Diagnostic and therapeutic procedural services (described below)
- Breast health services (described below)

Therapeutic and diagnostic procedural services include but are not limited to the following:

- *Epidurals
- *Facet injections
- *SI joint injections
- *Myelograms
- *Lumbar punctures
- *Hip injections
- *Shoulder injections
- *Knee injections
- *Wrist injections
- *Ankle injections
- *Hysterosalpingograms
- *Thoracentesis / Paracentesis
- *CT guided biopsies
- *US guided biopsies
- *All GI fluoroscopic exams

*Require on-site Provider presence

The breast health program includes but may not be limited to the following:

- Screening Mammograms (w/ Tomography)
- Diagnostic Mammograms (w/ Tomography)
- MRI Breast
- Breast Ultrasound (whole breast and targeted)
- *Stereotactic Breast biopsies
- *US guided Breast biopsies
- *Breast Wire Localizations
- *Sentinel Node Imaging and Injections

*Require on-site Provider presence

Annual Volumes in the DI department for the most recent 12 month period (July 2025 – June 2026) are below.

X-ray/ Fluorosc y	CT	MRI	Ultrasound	DEXA	NM	Mammo	TOTAL
10,475	4,814	1,985	6,025	659	361	2,575	26,894

An estimated overall payer mix for DI procedures is as follows:

Payer	%
Medicare	44%
Medicaid	19%
Commercial	32%
Worker's Compensation	2%
All Other	3%
Total	100%

Term of Contract

A three (3) year term with the possibility of a one-time 3-year renewal

Section 4 – Specifications/Scope of Work

It is the sole responsibility of the Proposer to read and understand the requirements and specifications herein, as well as the Mandatory Requirements in Section 5.

In this RFP, NIHD seeks the submission of proposal to provide services from any and all interested and qualified proposers. NIHD seeks, by way of this RFP, to obtain the services described in the Services section above, in a manner that maximizes the quality of services while also maximizing the value to the patients of NIHD.

Proposers must be able to show that they are capable of performing the services requested. Such evidence includes, but is not limited to, the respondent's demonstrated competency and experience in delivering services of a similar scope and type and local availability of the proposer's personnel and equipment resources.

The proposer's proposal should address the following:

1 Qualifications and Experience

1.1 Please provide the following information:

Radiology Individual/Group Name - Key Contacts			
Name	Title	Email	Phone

Radiology Individual/Group Information	
# Radiologists	
# Specialists	
# Support Staff	

# Other Employees	
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Key Medical Specialists		
Name	Title	Specialty

Imaging Centers Owned or Operated		
Imaging Center Name	Address	Home

- 1.2 Please provide a list of all hospital contracts you have won in the last 12 months.
- 1.3 Please provide a list of all hospital contracts terminated or not renewed in the last 12 months and briefly explain the reason for each termination or nonrenewal.
- 1.4 List the professional qualifications for each individual that would be assigned to provide services requested by this RFP, including any applicable degrees, additional applicable training, and any professional certifications/licensing.
- 1.5 Describe the services provided by you (individual) or your organization and a statement of the extent of experience/history of providing services requested by this RFP.
- 1.6 Provide three (3) references of clients that you currently serve. Provide the company name and address and the name, positions, telephone number and email address of a contact person. Supply references that are most comparable to NIHD.

2 Staffing Model, Service Coverage & Staff Management

- 2.1 Describe how the individual or group proposes to provide radiologist coverage and services to the hospital 24x7x365. Include any 3rd party groups that would be included in the proposed services. Please include your on-site staffing plan, including the proposed on-site schedule and backup coverage, and indicate if you will assign radiologists to work exclusively at our hospital.
- 2.2 Describe any areas of sub-specialty provided by your group and how those services are provided. Please indicate the qualifications used to determine specialty service and describe the availability and expected turnaround times for those services.
- 2.3 What advantages does your organization have in its ability to recruit and hire quality radiologists?
- 2.4 How are your radiologists compensated and incentivized to achieve performance goals?
- 2.5 Describe your proposed transition plan and timeline, including licensing, credentialing and

privileging, staffing, technology integration, and readiness for the anticipated service start date.

3 Customer Service

- 3.1 What is your approach to patient satisfaction and/or patient experience?
- 3.2 In the event of the identification of a problem by NIHD, its patients and/or other applicable constituents, describe how you will address such problems and the time frame for addressing them.
- 3.3 Describe how referring consultations are supported. Please include hours of availability, how consultations are coordinated and access to second opinions.

4 Quality Assurance and Performance Improvement

- 4.1 Describe your approach towards ensuring delivery of high quality services.
- 4.2 Describe how identified quality issues are addressed, tracked, reported and communicated with the hospital.
- 4.3 Describe your standard approach to "Peer Review" and your peer review process. Please include tools used, "blinding" process, how quality is measured and the standards levels assessment used.
- 4.4 Describe your approach toward ensuring that "Critical Findings" are tracked and communicated effectively. Please include tools used, report tracking and team staff involved to support this process, including applicable communication timeframes and escalation procedures when the ordering or responsible provider cannot be reached, and include an example of the report that will be provided to the hospital.
- 4.5 In the event of a quality concern with an identified radiologist, describe the process to address and remove the radiologist from the hospital practice. Please describe any potential impact to the level of service for the hospital as a result of this process and how qualified replacement coverage will be provided without interruption of services.
- 4.6 Final Report Turn-around Times
 - 4.6.1 Describe your current turnaround times based on a 24x7 environment?
 - 4.6.2 Describe how report turnaround times are measured and reported to the hospital and include an example of a report that would be used to report turnaround time performance.
- 4.7 Describe any utilization reports, performance metrics, etc...that you will provide the hospital on an ongoing basis and the tools you will use to help us understand how our department is

performing.

4.8 Describe your experience in improving clinical effectiveness, such as experience with imaging protocol development, radiation dose reduction initiatives, review of order appropriateness, development of ordering guidelines, reducing practice variation.

4.9 Please provide the name and contact information for your identified quality officer.

5 Compliance/Risk Management

5.1 Please list and describe any claims and regulatory violations against your organization in the past five years.

5.2 Please describe the methods or processes that you use to maintain compliance and minimize risk?

6 Financial Considerations

6.1 How do you propose to structure this contract financially?

6.2 Provide a description of your capabilities and experience with professional billing.

6.3 How do you propose to address billing and collections? (Include complaint resolution and interaction with the hospital) If you will use an outside service, please provide the name, address and phone number of the proposed billing service.

6.4 Please provide financial statements for the last two years. If you are an individual and do not have business financial statements, please include pro-forma financial statements and a financial plan for the next three years. In the latter case, the payer mix and volumes shown in Section 3 may be useful.

7 Technology Capability

7.1 Describe capabilities and provide examples of how the Proposer would work with NIHD and the NIHD IT Department to store/transmit images from the NIHD Diagnostic Imaging Department to the proposer and from the proposer to provide results/images for providers to be viewed in the systems currently in use by NIHD.

Section 5 – Mandatory Requirements

The successful Proposer will provide Radiology Professional Services required to care for the patients treated at the Hospital and to operate the Department as determined by the Hospital and its Medical Staff in accordance with recognized professional standards. The Proposer will agree to the following:

1. There will be no relationship of employer or employee created by any subsequent agreement.

Any physician providing services for the service will not have a claim against the hospital for vacation pay, sick leave, retirement benefits of any kind.

2. The service provider shall supply a physician who shall act as Medical Director for the service.
3. Radiologists must be able to obtain appointment to the Hospital Medical Staff for the appropriate department and maintain such privileging.
4. Radiologists must maintain appropriate liability insurance coverage in the amounts of \$1,000,000 per occurrence and \$3,000,000 aggregate, as well as adequate "tail" coverage.
5. Participation in Performance Improvement and Peer review activities consistent with hospital licensing and accreditation standards.
6. Participation in the development of and adherence to protocols, which support evidence-based care, best practices and patient satisfaction.
7. Disaster coverage to be provided by one (1) on site Radiologist.
8. Complete required medical records/clinical documentation in accordance with time frames specified by Medical Staff By-Laws, Medical Staff Rules and Regulations and/or related hospital policies and procedures.
9. Regular consultation between the Administrator, Medical Executive Committee and/or other designated party or committees on matters related to the Department including productivity, quality, service and patient satisfaction.
10. Designate physician(s) to serve as Radiation Safety Officer and Magnetic Resonance Safety Officer.
11. Supervision and training of radiology personnel in conjunction with Director of Diagnostic Imaging.
12. Cooperation with NIHD to provide a Quality Assurance and Performance Improvement program consistent with agency and accreditation standards.

Special Provisions

A. Compliance with Laws/Permits/Licenses

Successful proposer shall give all notices and comply with all federal, state and municipal laws, ordinances, rules, statutes, regulations, code and orders of any public authority bearing on the performance of the contract including, but not limited to, the laws referred to in this RFP. Upon request, Proposer shall furnish copies of any licenses or permits required to comply with these laws, orders, ordinances, rules, statutes, regulations and codes, not currently maintained by the District. The successful Proposer shall be responsible for obtaining all necessary permits and licenses required for performance under any contract results from this RFP for which the District is not currently responsible.

B. Insurance and Liability

1. Within ten (10) days following the District Board's decision to award a contract to Proposer, such successful proposer shall provide Certificates of Insurance evidencing the required coverage. Throughout the term of the contract, successful Proposer shall submit original Certificates of Insurance reflecting the coverage herein.
2. The District shall be named as an additional insured party and a waiver of subrogation in favor of the District shall be issued on all policies of insurance, as its interest may appear as stated previously. The District shall be provided with 30 days' advance written notice prior to any termination, cancellation or material change to said insurance policies.

Rev. 07-15-2026 lew

Radiology RFP PD 2026 Final

Final Audit Report

2026-07-29

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