Vendor Guide to Doing Business with Alberta Health Services (AHS)

Revised January 31, 2023
How AHS Does Business

This Guide provides information for vendors and prospective vendors on how AHS does business. Contracting, Procurement and Supply Management (CPSM) is the AHS department responsible for corporate contracting, purchasing, inventory management, distribution of supplies and equipment, and medical device safety processes.

CPSM develops contracting and procurement-related policies and support frameworks (including development of tools, guidelines and best practices), provides strategic and tactical procurement advice, and medical device safety advice to the organization and senior AHS Leaders. CPSM is the link between AHS procurement-related information to AHS staff and the vendor community in these areas.

Applicable Legislation & Trade Agreements

AHS seeks to fully comply with applicable provincial and federal legislation. In addition, AHS is also subject to a number of applicable provincial, national, and international trade agreements. These agreements seek to, among other things, remove, reduce, or eliminate barriers to trade and promote open, non-discriminatory trading practices. Two of the most important trade agreements for AHS are the following:

- **Canadian Free Trade Agreement (CFTA)** – The CFTA is an intergovernmental trade agreement signed by the federal government along with every Canadian province and territory. The CFTA seeks to reduce and eliminate, to the extent possible, barriers to the free movement of persons, goods, services, and investments within Canada to establish an open and efficient, and stable domestic market. To view the CFTA please go to: [https://www.cfta-alec.ca](https://www.cfta-alec.ca).

- **New West Partnership Trade Agreement (NWPTA)** – The CFTA permits parties to enter into additional agreements to liberalize trade, investment and labor mobility. NWPTA’s text includes provisions for labor mobility, business registration, streamlined regulations, and an accessible bid protest mechanism that applies to itself and to procurements under the CFTA. To view NWPTA please go to: [www.newwestpartnershiptrade.ca](http://www.newwestpartnershiptrade.ca).

Promoting Business and Construction Opportunities

AHS sourcing opportunities are advertised publicly on the Internet. These opportunities are broken down into two distinct categories, as described below:

- **Business opportunities** with AHS are typically posted on the Alberta Purchasing Connection (APC) website: [http://www.purchasingconnection.ca](http://www.purchasingconnection.ca)

- **Construction related opportunities** are typically posted on the APC website (noted above) and the BuildWorks Canada website: [https://buildworkscanada.com](https://buildworkscanada.com)
In addition to the above, AHS will occasionally conduct public procurement opportunities with the intent of pre-qualifying vendors for future services, with a defined term. Once pre-qualified lists are developed AHS may conduct further competitive procurement activities directed to only those on the applicable lists for the duration of the defined term.

**AHS Bid Submission**

For the majority of its competitive bid processes, AHS uses the Bonfire strategic sourcing platform to accept and evaluate proposals electronically which can be accessed here: [https://ahs.bonfirehub.ca](https://ahs.bonfirehub.ca).

**AHS Procurement Policies & Procedures**

Numerous policies and procedures touch on AHS procurement and business practices although the following are particularly relevant:

- **Corporate Contracts (Policy Document #1152)** – This policy sets out the policy principles and parameters for corporate contracts, to ensure that processes for contracting are in accordance with AHS bylaws, policies, procedures, applicable legislation, and trade agreements. These documents can be viewed in its entirety on the AHS website [here](#).

- **Basic Procurement Process and Competitive Bid Thresholds (Procedure Document #1152-02)** – The objectives of this procedure are to ensure that goods and services are acquired by AHS in manner that:

  - results in a safe and clinically acceptable product or service for the delivery of patient care;
  - uses public funds in a prudent manner which ensures optimal cost, quality, and service; and
  - ensures the procurement process is fair and equitable in the context of transparency and efficiency.

  This procedure stipulates:

  - certain procedural matters related to the procurement of goods and services; and
  - which procurement processes are appropriate having regard to value, urgency and other factors related to the procurement.

- **Competitive Bid Process (Procedure Document #1152-03)** – This procedure establishes and records the process under which AHS conducts competitive bidding and seeks to have competitive bidding processes promote sound financial stewardship practice.
helps establish and maintain fair, equitable and open processes in accordance with applicable law and trade agreements.

- Non-Competitive Procurement (Procedure Document #1152-04) – This procedure describes the process and conditions for non-competitive procurement of goods and services. It outlines the circumstances under which the different types of non-competitive procurements may be approved and the analysis used to review whether a particular procurement or procurements may be exempt or otherwise permitted under applicable trade agreements.

- Renewals and Extensions to Contracts (Procedure Document #1152-05) – This procedure sets out the requirements for managing contract renewals and extensions.

These documents can be viewed in its entirety on the AHS website:

- Corporate Contracts
  - Basic Procurement Process and Competitive Bid Thresholds
  - Competitive Bid Processes
  - Non-Competitive Procurement
  - Renewals, Extensions and Amendments to Corporate Contracts

**AHS Contract Award Notification and Vendor Debriefs**

CPSM will notify unsuccessful bidders when the competitive process evaluations are complete. Vendors can request a debrief where AHS can provide an unsuccessful vendor with an explanation of the reasons why AHS did not select its proposal.

Generally speaking, during an AHS vendor debrief meeting, discussion may include:

- setting out a general overview of the evaluation process outlined in the applicable procurement document;
- discussion on the strengths and weaknesses of the vendor’s bid submission in relation to the specific evaluation criteria and the vendor’s evaluated score;
- feedback from the vendor on current AHS procurement processes and practices; and
- AHS’ response to specific questions and issues raised by the vendor in relation to the vendor’s bid submission

During a debrief AHS will not disclose information concerning other vendor submissions. Nor will questions unrelated to the procurement process be addressed.

Specific details about how the bids will be evaluated as well as how vendor debrief meetings are booked and conducted are included in the bid documents.
Bid Dispute Mechanism

Effective January 1, 2019 the Government of Alberta (along with the Governments of British Columbia, Saskatchewan and Manitoba) put in place a new bid protest mechanism (BPM) that applies to the avoidance and resolution of disputes between vendors and government entities (such as AHS) relating to a specific procurement under the trade agreements that AHS is subject to including CFTA and NWPTA.

The BPM can be located at [http://newwestpartnership.ca/bid-protest.html](http://newwestpartnership.ca/bid-protest.html). Note that a vendor’s ability to access and utilize the BPM is governed by and is to be determined solely in accordance with the trade agreement alleged by the vendor to apply to the specific procurement at issue.

To initiate a challenge under the BPM a vendor must make a written request for consultations to the procuring entity in question (AHS in this case) and provide a copy of the complaint to the BPM administrator. This is required to be done within ten (10) days of the date that the vendor knew or should have known of the basis for its complaint. The vendor and the procuring entity then have up to twenty (20) days to consult with a view to arriving at a mutually satisfactory resolution of the complaint. This time period can be extended upon the mutual agreement of the parties.

The BPM represents one available option to challenge an AHS procurement although there may be others. AHS recommends that vendors seek out legal counsel for further advice should a vendor feel that a procurement was not consistent with the trade agreements.

Transparency

As part of its commitment to open, transparent business and procurement practices, CPSM publishes annual listings of AHS non-competitive contracts at: [https://www.albertahealthservices.ca/about/Page12826.aspx](https://www.albertahealthservices.ca/about/Page12826.aspx).

The types of contracts reported in these listings include:

- Approved Procurement Exceptions (APE) – APEs are procurements that are, for reasons set out in the trade agreements (including CFTA and NWPTA), exempted from having to undergo an open competitive procurement as normally required by the trade agreements.

- Below Trade Agreement Thresholds – Certain procurements do not need to be competitive based on the fact that they fall below certain thresholds. While these thresholds vary amongst the various trade agreements, AHS’ practice is to adopt the most liberal threshold conducive to the promotion of trade. This threshold, which appears in NWPTA, only requires AHS to procure in an open and competitive bidding process if the cost of the sought-after goods and services is over $75,000 or, in cases of construction work, over $200,000.

- Sole source contracts (those secured without competitive bid and not specifically identified as an APE) are required from time to time where there is a pressing or urgent need (e.g., pandemic), where critical patient care may be directly or indirectly impacted, or other
urgent justification. AHS may also extend an existing competitively awarded contract, without a new competitive process, in order to ensure there is no disruption to a service. Given that these types of non-competitive procurements are less common, and given the rationale for public procurement rules, sole sources are only approved after a higher level of management approval.

**AHS Guidelines for Purchase Order (PO)**

AHS’ PO terms and conditions are available at:  
https://www.albertahealthservices.ca/assets/about/org/ahs-org-purchasing-order.pdf

PO’s are sent to vendors by Electronic Data Interchange (EDI), Auto Fax, Manual Fax, email or telephone confirmation. Vendors are requested to carefully review the PO and provide AHS with confirmation of receipt and acceptance. PO terms and conditions may be superseded where an applicable agreement is in place between AHS and the Vendor.

**AHS Vendor Invoicing Guidelines**

AHS has consolidated billing locations. To expedite invoice payment, vendors must ensure that:

- All invoices are sent directly to Accounts Payable at the following centralized address:
  
  Alberta Health Services  
  Accounts Payable  
  PO Box 1600  
  Edmonton, AB T5J 2N9

Invoices sent to another location (such as the requestor) could cause delays in a vendor receiving payment.

- All invoices quote the applicable PO and also the contract number (contract numbers are typically preceded by the prefix “CM”)

- In emergency situations, emergent requests are exempt from requiring a PO or contract number. However, the invoice must reference the contact’s name (first and last name), telephone number of the individual requesting service, and date / time of the request.

- Invoice lines should reference the correct PO line number and be sequenced in the same order as the PO. This will facilitate the reconciliation process and help to ensure payment can be expedited in a timely manner. For discrepancies between the PO line details and the invoice line, payments will be placed on hold until the discrepancy is resolved.
AHS Receipt of Deliveries

For AHS sites with dedicated receiving areas, all deliveries must be delivered to the receiving dock attendant for processing. If this process is bypassed, payments to vendors may be delayed.

AHS Vendor Payment Information

AHS vendor payments are typically made in accordance with the agreed upon terms.

As of March 1, 2023, AHS will provide payment through electronic funds transfer (EFT). AHS is taking this step to help ensure vendors receive payment quickly, and to reduce the risk of fraudulent activity.

To set up EFT Payment, or invoicing and payment inquiries, vendors are encouraged to contact the Accounts Payable Help Desk at AHS.APHelpDesk@ahs.ca or by phone at 1-877-595-0007, option 2.

Conflicts of Interest

AHS is committed to promoting a standard of conduct that preserves and enhances public confidence in the integrity, objectivity, and impartiality of its clinical and business activities. The complete AHS Conflict of Interest Bylaw can be found under the Bylaws heading, here: https://www.albertahealthservices.ca/about/Page210.aspx.

AHS staff and representatives must comply with AHS’ “Code of Conduct” and “Conflict of Interest Bylaw” which can be found at https://www.albertahealthservices.ca/about/Page210.aspx. All vendor activities and supports to AHS are subject to audit and compliance with AHS policies and procedures.

Communication with AHS on Procurement Notifications

Keeping AHS informed on any product changes, backorders, discontinuation or general product information must be provided to AHS in a timely manner using the communication protocol found in an applicable corporate contracts or located at: https://www.albertahealthservices.ca/assets/about/org/ahs-org-cpsm-vendor-communication-changes.pdf.

Vendor Requests to Meet Clinical Staff & Physicians

AHS understands and values the needs of the patient and the staff who care for them. It is important that vendors have the opportunity to engage with AHS staff under the appropriate circumstances.

Vendors meeting with AHS clinical staff and physicians will be required to comply with the following:
For meetings that are outside of the RFP process and are clinically focused, AHS staff may engage in pre-approved meetings with vendors providing it does not interfere directly or indirectly with patient care and services, does not create a business relationship, does not interfere with existing contracts or the RFP process, or provide any one vendor with undue advantage.

Vendors may meet with Clinical AHS staff and physicians regarding products (equipment and supplies), for the purposes of education, technical support or updates to product use if the product is currently under contract with AHS.

If the product is new, please see the section on “How AHS Evaluates New Products”.

Meetings with vendors may not interfere with patient / client confidentiality, appointment or clinic times. Vendor meetings should be scheduled a minimum of three (3) days in advance and have a clearly stated purpose. The area Manager has the right to accept, amend or reject the meeting.

Meeting times should not conflict with AHS staff work times or workflow.

At all times, vendor meetings must comply with the AHS Conflict of Interest Bylaw, and AHS Code of Conduct.

Vendor meetings that have potential to alter or form business relationships, contracting, pricing or RFPs may only be done in the presence of appropriate CPSM staff. These meetings must be minuted / documented and a copy of the minutes retained by CPSM.

Providing Vendor Product or Service Information to AHS

It is important that CSPM be aware of products that are currently in use within AHS. Introducing new products may interfere with contractual agreements, adversely impact AHS’ trade obligations, compromise AHS procurement requirements, as well as impact patient care being provided by multiple end users. AHS Clinical staff are not able to accept equipment or other materiel from vendors outside of a formal procurement process initiated by CPSM.

AHS Clinical staff wanting information about new products should email ClinicalSourcing@ahs.ca

The request for information will be forwarded to the appropriate information channel within CPSM to provide a response to the inquiry.
How AHS Evaluates New Products

Vendor engagement in evaluations, trials, and new products is key to leading edge patient care and service. In order to ensure that AHS mission and goals are met, AHS is developing a central access point for monitoring evaluations. Once the process is formalized, this guide will be updated with those details. Until then, questions can be directed to the CPSM Support Centre at cpsm.customersupport@ahs.ca

Medical Device Safety – Reporting and Recalls

AHS follows robust medical device post-market surveillance reporting and recall management processes and has high expectations in these areas. Dedicated Medical Device Safety Teams in CPSM (Product Quality & Safety) and Capital Management (Clinical Engineering Safety) support all staff and physicians, sites and programs in those processes. Note: Although content here references medical devices, the processes also apply to any items that are received in AHS warehouses and/or distributed by AHS.

Medical Device Incident or Problem (MDIP) Reporting

Policy requires front line staff and physicians report Medical Device Incidents or Problems (MDIPs) to AHS Medical Device Safety (MDS) Teams, who assign an AHS MDIP reference number, report to vendors and regulators, coordinate device investigations, monitor and analyze data for signals of larger-scale issues, and share learnings across the organization.

Expectations & Required Actions:

- Provide your regulatory team contact information for AHS MDIP reporting.
- Always include the AHS reference number in MDIP correspondence.
- Notify MDIP@ahs.ca if you receive device incident or problem information outside the established MDIP process, e.g., directly from a physician or staff member. Always ask for an AHS reference number.
- Acknowledge initial MDIP reports within 2 business days, and when requested, include instructions for shipping suspect devices to your designated investigation facility.
- Do not reach out directly to busy frontline personnel about MDIPs without prior agreement from the assigned MDS Team member.
- Provide the highest level of file closure response possible for each MDIP reported.
- Provide information and reports in a timely manner – respond to an urgent request for information within one business day, provide an initial harm incident response within 30 days, and a problem investigation and correction report within 90-days.
Safety Notifications Including Recalls

Tell EP.Advisory@ahs.ca First!

AHS is responsible for the timely and effective communication and completion of recall, field correction, and other safety advisory actions. To that end, AHS has a long-established:

- Single point of contact specifically for recall and other safety notifications that affect AHS and related entities such as Covenant Health, CapitalCare, and CareWest. Notifying the Safety Alerts Coordinator at EP.Advisory@ahs.ca is included in standard contract wording.
- Centrally coordinated response preparation process, and
- Targeted standardized internal communication and distribution mechanisms.

Expectations & Required Actions:

- **Notify the Safety Alerts Coordinator at EP.Advisory@ahs.ca first, via email** about all safety notifications affecting AHS and related entities. Do not email other areas unless agreed-upon in advance with "EP Advisory."

- **Routinely include additional AHS-specific information** such as distribution locations by lot/serial number and availability of unaffected product.

- **Be immediately available for further communication and consultation.**

- If your internal procedures require this, **notify your consignee locations by courier or mail** after notifying EP.Advisory@ahs.ca.

- **Proactively notify EP.Advisory@ahs.ca** when a safety advisory does NOT affect Alberta, if possible. AHS procedures require “EP.Advisory” to cross-reference information and follow up with vendors directly, about safety notices received from a source other than the vendor (e.g., from a hospital, ECRI, or Health Canada)

- **Follow up with EP Advisory** directly with any safety notification-related questions, including Effectiveness Checks. EP Advisory is your partner in communication and recall effectiveness.

Note: This process was reviewed by Health Canada’s Inspectorate and was confirmed to comply with Health Canada regulations.
# Appendix I:

Contact Information for Commonly Asked Vendor Relationship Questions

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<th>Contact Information</th>
<th>Type of Questions</th>
<th>Rationale</th>
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<tr>
<td>CPSM Support Centre</td>
<td>General questions</td>
<td>The CPSM Support Centre will forward the question or request to the correct department for follow up and response to requests for:</td>
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| T: 1-877-595-0007 E: cpsm.customersupport@ahs.ca |                           | • Need new type of product information  
• Technical Support or in servicing is required. If AHS staff have the vendor contact information, they may call directly  
• Vendor contact information is required  
• Introduction of new products to AHS   |
| Recall / Safety Notification  | For recall or other safety notifications | The AHS Safety Alerts Coordinator will provide assistance and guidance                                                                 |
| T: 1-403-955-9903 E: EP.Advisory@ahs.ca |                           |                                                                                                                                 |
| Medical Device Incident/Problem | Medical device incidents or problems experienced at the point of use | The AHS Medical Device Safety team will provide assistance and guidance  |
| T: 1-403-955-9902 E: MDIP@ahs.ca |                           |                                                                                                                                 |
| Clinical Sourcing             | For AHS staff wanting to report an AHS vendor concern | The AHS Clinical Sourcing team will provide assistance and guidance                                                                 |
| E: ClinicalSourcing@ahs.ca |                           |                                                                                                                                 |
|                               | For AHS staff or vendors to request clarification on vendor meetings with AHS staff | Vendor meetings are at the discretion of AHS staff for educational / product information and are not to form business relationships with AHS clinical staff.  |
|                               |                           | • AHS Clinical Staff may meet with vendors for specific product / equipment support or education  
• AHS CPSM Staff may meet with vendors for product / equipment / service RFP, Contracting, and other business / relationship related reasons  
• Vendor meetings with AHS staff should be pre-arranged in a time that does not interfere with patient scheduling of clinic, patient treatment or education time, and have a clearly stated purpose  
• All contracting, procurement, RFP, pricing and other like discussions must be done through CPSM  |