



DEER-GROVE EMERGENCY SERVICES DISTRICT

**REQUEST FOR PROPOSALS
RFP #2021-01**

EMS Billing and Collection Services

Due Date: Friday, September 3, 2021

**Deer-Grove EMS
4030 County Road N
Cottage Grove, WI 53527
608-839-5658
chief@deergroveems.com**

PART I: DESCRIPTION

The Deer-Grove EMS District (DGEMS) invites SEALED PROPOSALS for the procurement set forth below:

1. GENERAL INFORMATION

The rove EMS District is requesting proposals for the purpose of selecting a highly qualified vendor of ambulance billing and collection services in accordance with these specifications.

- A. **Contract Period:** The contract shall become effective January 1, 2022. The contract entered into between DGEMS, and the vendor shall be for 3 years, with the option (at the DGEMS's sole discretion) for two 1-year extensions.
- B. **Fees and Pricing:** Fees and pricing for services shall be fixed for the duration of the initial contract period.
- C. **Award:** The final award will be based on the most advantageous proposal considering all evaluation criteria of qualifying bids.
- D. **Intent:** The intent of this RFP is to select one vendor to provide ambulance billing and collection service to the DGEMS. However, the DGEMS may also elect to enter into an agreement with any proposer for any or all optional services.
- E. **Public Information:** All proposals submitted, and information included therein or attached thereto shall become public records upon completion of the evaluation process.
- F. **Demographics:** Deer-Grove EMS responds to EMS calls for DGEMS in Dane County, Wisconsin. The DGEMS is licensed to the ALS Interfacility level of care and has 3 ambulances. The district operates one primary – 9-1-1 ambulance 24/7 and completes interfacility transfers as able. Annual run volume is approximately 1050 calls with approximately 900 billable runs. Detailed financial information is provided in Exhibit A.

Part II: SCOPE OF SERVICES

1. IMPLEMENTATION PLAN

Provide overview of transition plan from current billing and collection vendor with sample timeline.

2. DATA

- A. **ePCR:** The DGEMS uses a commercially developed electronic patient care reporting system to collect data. Describe ability to import data from any ePCR system.
- B. **Digital Images:** Describe ability/process to accept digital images of paper documents.
- C. **Data verification:** Describe process for verifying the data received from DGEMS. Additionally, describe procedures for obtaining any missing information (including insurance payors) and sources used.

3. BILLING

- A. **Unbundled vs Bundled:** Vendor will have the ability to accommodate service request for both bundled disposables and unbundled disposable base rates.
- B. **Software Platform Access:** Allow the service billing liaison to independently review claim status, including: aging reports; minor without a guarantor report; unable to locate patient report
- C. **Annual Rate Survey:** Provide annual rate surveys from local comparable providers for budgetary planning.

4. CLAIM PROCESSING

- A. **Electronic Claims:** Describe ability to process electronic claims for all payors when possible.
- B. **Multiple Payors:** Process claims for primary, secondary, tertiary, etc. payors.
- C. **Third-Party Payors:** Process claims for third-party payors (e.g. auto insurance).
- D. **Trained/Certified Coding Staff:** Use of Certified Ambulance Coders (CAC) is preferred. Describe training, provide certification and expertise of coding staff.

5. PAYMENT PROCESSING

Qualifying bids will incorporate inclusive banking services to include payment posting, refund processing, reconciliations, and cash management. Qualifying bids will accept credit card payments (MC, Visa, Discover and American Express) and ACH payments. Qualifying bids will process physical payments, online payments, and payments over the phone.

- A. **Payment Types:** Describe all types of payments accepted (check, ACH, etc.)
- B. **Payment Methods:** Describe all payment methods (phone, online, etc.)
- C. **Online Payments:** Provide online payment/inquiry system.
- D. **Refunds:** Describe refund processing from identification to customer/client reimbursement.

6. DENIALS

Describe process/timeline for resolving denied claims.

7. DELINQUENT ACCOUNT COLLECTION

- A. **Licensed Collection Agency:** Vendor should be a licensed Collection Agency. Outsourcing to a third-party collection agency is acceptable, but not preferred. Provide copy of state collection agency license, if applicable. Collectors should have ACA designation.
- B. **Approach:** Describe methods/process for maximizing delinquent account collection.

- C. **Tax Refund Intercept Program:** Vendor must participate in Wisconsin Department of Revenue TRIP.

8. QUALITY ASSURANCE

Describe process for providing, monitoring, maintaining high quality billing and collection service.

9. COMPLIANCE

Vendor must be compliant with all governing federal, state and CMS rules and regulations including, but not limited to, HIPAA, GLBA, FACTA, PCI/DSS, FCRA, GAAP.

- A. **Compliance Officer:** Provide name and resume of Compliance Officer.
- B. **CMS Expertise:** Describe experience, training, and level of expertise with Medicare and Medicaid programs.
- C. **Auditing:** Describe internal and/or external audit program to ensure a high level of compliance.
- D. **Medicare Revalidation:** Vendor will manage the client's Medicare Revalidation Application.
- E. **OIG Medicare Exclusion List:** Vendor will ensure their staff members are eligible for processing claims.

10. REPORTING

- A. **Monthly Reports:** Income and Expenditures, Gross Revenue, Charge Detail and Summary, Aging Detail and Summary, Reconciliation Summary, Credit Detail and Summary.
- B. **Weekly Reports:** Provide weekly reporting as needed (i.e., GY Modifier, Invalid signatures, etc.)
- C. **Annual Summary:** Provide annual reporting.
- D. **Custom Reports:** Provide ad hoc reports as needed.
- E. **Sample Reports:** Provide samples of monthly and annual reports.
- F. **Web Portal:** Provide a web portal to access all reports, include the required reports listed above.

11. TRAINING

- A. **Onsite Training:** Provide training to field staff on documentation/data collection and federal/state program rules and regulations.
- B. **Online Training:** Provide online system for documentation training to complement onsite training.
- C. **Knowledgeable Trainers:** Trainers must have extensive EMS and training experience (CADS certification, significant EMS Billing experience).

12. CUSTOMER/CLIENT SERVICE

Qualifying bids must provide 60+ hours of live US Based customer service per week.

- A. **Toll-free Number:** Provide toll-free number for customers.
- B. **Customer Inquiries:** Provide professional staff to answer billing inquiries and accept telephone payments. Staff must be fully knowledgeable in EMS billing and collection.
- C. **Client Inquiries:** Provide professional staff 24/7 to answer client inquiries and resolve issues.
- D. **Hardship Waiver:** Provide a process to collect data from customers and formulate a recommendation to the ability to pay.
- E. **Multilingual:** Provide ability to work with non-English speaking customers.

13. RECORDS MANAGEMENT/DISASTER RECOVERY

- A. **Disaster Recovery Plan:** Provide procedures to protect DGEMS from data loss due to disaster or computer failure.
- B. **Records Management:** Maintain and make readily accessible all records for a minimum of seven years.
- C. **Records Management:** Provide for the release of protected health information. The vendor will act as the custodian of DGEMS patient care report PHI and will provide details on their records release policy, records request form, verification process, methods for documentation of the release, and the methods with which they will notify DGEMS of the release.

PART III: PROPOSAL

1. QUESTIONS

Questions must be submitted by email to Chief Eric Lang at chief@deergroveems.com no later than one (1) week prior to submission due date. All questions will be answered in the form of an addendum. In the interest of fairness to all respondents, do not contact other staff or elected or appointed officials.

2. PREPARATION

The proposal should be prepared simply and economically, providing a straightforward, concise description of the proposer's capabilities to satisfy the requirements described herein. While additional data may be presented, the items listed in Section II must be addressed in the proposal. They represent the criteria against which the proposal will be evaluated.

A. **Content:** Proposals should include the following:

- Title Page showing RFP name and number and vendor's name and contact information
- Table of Contents
- Transmittal Letter – signed letter stating the vendor's understanding of the services to be provided, commitment to perform the services and why the vendor believes itself to be best qualified to provide billing and collection services to DGEMS.
- Company Overview – detailing vendor history, experience and expertise in EMS billing and collection
- Detailed Technical Proposal – addressing all items listed in Part II: Scope of Services
- References – minimum of five references, current clients similar in size to DGEMS receiving services similar to those requested in this RFP.
- Personnel – include resumes of key personnel
- Price proposal, which includes all fees for services performed
- Signed Guarantees and Warranties
- Addendum acknowledgement, if applicable

3. TERMS AND CONDITIONS

The DGEMS reserves the right, where it may serve the DGEMS's best interest, to request additional information or clarification from proposers, or to allow corrections of error or omissions. At the discretion of the DGEMS vendors submitting proposals will be requested to make oral presentations as part of the evaluation process.

There is no expressed or implied obligation for the DGEMS to reimburse responding vendor for any expenses incurred in preparing proposals in response to this request.

4. SUBMISSION

Proposals should be in a sealed envelope/package and mailed or delivered to address below.

Proposal package must include one original proposal signed in blue ink (on 8 ½ by 11" size paper, single sided), two additional copies, and a PDF file of the proposal on a USB drive.

Proposals received after September 3, 2021, at 1700 (5:00PM) will be rejected and returned unopened.

DeerGrove EMS
Chief Eric Lang
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5. EVALUATION

A. **Scoring:** Proposals will be evaluated using the following criteria/points:

- Ability to Provide Services 25 points
- Experience/Expertise 25 points
- References 15 points
- Compliance 15 points
- Proposal Responsiveness 10 points
- Value 10 points

B. **Oral Presentation:** The review committee may request the highest rated proposers to make oral presentations. Such presentations will provide firms with an opportunity to answer any questions the review committee may have on a firm's proposal. The number of proposers asked to make such oral presentations will be determined based on the quality of the written proposals.

6. RIGHT TO REJECT PROPOSALS

Submission of a proposal indicates acceptance by the vendor of the conditions contained in this request for proposal unless clearly and specifically noted in the proposal submitted and confirmed in the contract between the DGEMS and the selected vendor. The DGEMS reserves the right without prejudice to reject any or all proposals.

7. GUARANTEES AND WARRANTIES

A. The proposer certifies it can and will provide and make available, as a minimum, all services set forth in Part II, Scope of Services.

B. Proposer warrants that it currently has an errors and omissions insurance policy providing the amount of coverage identified in this RFP for the willful or negligent acts, or omissions of any officers, employees, or agents thereof.

C. Proposer warrants that it will not delegate or subcontract its responsibilities under an agreement without the prior written permission of the DGEMS.

D. Proposer warrants that all information provided by it in connection with this proposal is true and accurate.

E. Proposer must identify below any specific area(s) where they cannot meet the requirements set forth in this RFP.

Signature of Authorized Signer: _____

Date: _____

Printed Name: _____

Title: _____

Firm: _____

Exhibit A

Financial/Volume Information

January 2020 through December 2020

Total Run Volume: Includes no transports and non-billable runs	1015
Billable Run Volume: Total number of calls billed	804
Treat/No-Transport Volume: Total number of calls patient treated but not transported	114 ALS=26 BLS= 88
Interfacility Transports: Total hospital/nursing home to hospital/nursing home transports	1

	Gross	Net
Charges	\$1,161,846.96	
Collections	\$538,526.46	497,430.47
Mandatory Write-Offs	\$500,216.65	
Total Write-Offs	\$657,266.07	

	Percent of Dollars Collected	Dollars Collected	Number of Payors
Commercial	74.22	\$252,269.93	222
Medicare	32.30	\$185,374.65	383
Medicaid	15.87	\$18,456.77	90
Self-Pay	62.76	\$82,485.11	97

	Charge for Service	Total Number Provided
BLS	\$167,550	171
ALS1	\$568,600	499
ALS2	\$41,000	28
SCT	\$1,800	1
BLS Non-Emergency		N/A
ALS Non-Emergency		N/A
Mileage	\$203,845.60	
Air Transport		NA
Treat/No-Transport	\$18,400.00	140