REQUEST FOR PROPOSAL (RFP)

FOR

EMS MEDICAL BILLING AND COLLECTION

FOR

DUPLIN COUNTY North Carolina

PROPOSALS TO BE SUBMITTED TO:

Duplin County Health Department (Attention: Billie Jo Dunn)

P O Box 948

340 Seminary Street

Kenansville, NC  28349

PROPOSALS MUST BE SUBMITTED BY:

5:00 P.M. (EST), Friday, April 10, 2015
I. INSTRUCTIONS TO PROPOSERS

Qualified firms are invited to submit a proposal to furnish EMS AMBULANCE BILLING AND COLLECTION SERVICES for Duplin County by replying to the enclosed specification. In order for your proposal to be considered, you must fill in completely all items in this specification. Proposals should be submitted in a sealed package clearly marked “EMS BILLING AND COLLECTIONS BID” and marked with the due date. If more than one package is submitted, they should be marked 1 of 2, etc. All proposals must be submitted in four (4) copies - one (1) identified original copy plus three (3) additional copies) to:

Duplin County Health Department
Attention: Billie Jo Dunn
P O Box 948
340 Seminary Street
Kenansville, North Carolina 28349

Proposals must be received at the above address no later than 5:00 P.M. (EST), Friday, April 10, 2015. Late proposals will not be considered regardless of the reason. After the bids have been submitted the prospective bidders will be given the opportunity to make a (one) 1 hour presentation to the members of the selection committee. This meeting will take place no later than April 24, 2015 at a time convenient to the committee.

INTERPRETATION OF SPECIFICATION

During the proposal period, questions of interpretation and clarification should be directed to Billie Jo Dunn. Questions should be submitted at least three (3) business days before the due date of the Request for Proposal (RFP). It is required that all questions be submitted in writing, via facsimile to 910-296-0252 to Mrs. Dunn’s attention. Please note that no part of a proposal may be submitted via Fax. Any questions answered during the proposal period, if said answer affects the essence of the proposal, will be incorporated in an addendum; which will be forwarded equally to all proposers. No verbal instructions or interpretations of drawings and specifications will be made other than indicated above.

II. INFORMATION FOR PROPOSERS

REQUEST FOR PROPOSAL

This RFP provides interested vendors with sufficient information to enable them to prepare and submit proposals for consideration by Duplin County, hereinafter referred to as the “COUNTY”. This RFP contains instructions governing the proposals to be provided, requirements which must be met for eligible consideration, general evaluation criteria and other requirements to be met by each proposal. The COUNTY reserves the right to accept or reject any or all proposals received as a result of this request or to negotiate separately with competing contractors. The COUNTY
has the right to waive any informalities, defects or irregularities in any proposal. The COUNTY reserves the right to accept the proposal of a vendor other than that of the lowest bidder.

Proposals should be simple and economical, providing a straightforward and concise description of the vendor's ability to meet the requirements of the RFP. To be considered vendors must submit a complete response to this RFP using the format provided. Each proposal must be submitted in four (4) copies. Proposals must be signed by an official authorized to bind the vendor to its provisions.

CONTRACTUAL CONDITIONS

For this RFP, the proposal must remain valid for at least ninety (90) days. Moreover, the contents of the proposal of the successful bidder will become contractual obligations if a contract is entered into. The selected firm will be required to enter into a formal agreement with Duplin County. The COUNTY reserves the right to delete or amend any of the services as listed and described in this RFP. If a satisfactory contract cannot be negotiated, negotiations will be formally terminated. Contract negotiation will then be started with the first alternate vendor. The successful vendor will be required to include a disclosure statement of any potential conflicts of interest that the firm may have due to other clients, contracts, or interest associated with this project.

The selected vendor will be required to assume responsibility for all services offered in the proposal whether or not she or he provides them. Further, the COUNTY will consider the selected vendor to be the sole point of contact in regards to contractual matters. News releases pertaining to this project will not be made without prior COUNTY approval.

KNOWLEDGE OF CONDITIONS

At the time of the opening of the proposals each proposer will be presumed to have inspected, to have read and to have been thoroughly familiar with the specifications. The proposer shall satisfy himself as to the nature and location of the work and general and local conditions. He or she shall gain full knowledge of working conditions and other facilities in the area which will have a bearing on the performance of his or her work. Any failure by the proposer to acquaint himself/herself with all of the available information shall not relieve that proposer from any responsibility for performing all work properly. No additional compensation shall be allowed for conditions increasing the proposers cost which were not known, or appreciated by that proposer when submitting the proposal. Proposers shall understand that the COUNTY will not be responsible for any errors or omissions by the proposer in the presentation of the response.

All materials submitted become the property of the COUNTY, and may be returned only at the COUNTY’s option. The COUNTY has the right to use any or all ideas presented in any reply to the RFP. The COUNTY reserves the right to reject any or all bid submissions. By sending out
this RFP the COUNTY is not bound to select any of the bidders. Selection or rejection of the proposal does not affect this right.

CRITERIA FOR SELECTION

All proposals received from vendors will be reviewed and evaluated by a committee of qualified personnel. This committee may recommend for selection the proposal which most closely meets the requirements of the RFP. The committee is not bound to recommend any of the proposals. The following criteria will be of major importance in reviewing the proposals.

A. QUALIFICATIONS: Ability of the vendor to satisfy the requirements specified in Scope of Work section of this RFP including, but not limited to, the firm’s qualifications/experience.
B. TECHNICAL: Vendor’s plan for accomplishment of the task to include the quality and experience of personnel assigned to the project; understanding of the scope of work; collection philosophy including recent collection experience; technology and equipment.
C. PRICE/FEES
D. OTHER: At least three (3) professional references from clients that are considered government EMS agencies including the location of the agency.
E. PROPOSER’S WARRANTY: The following language must be included in every proposal

PROPOSER'S WARRANTY

The undersigned person warrants that:

A. She/he is an officer of the organization.
B. She/he is authorized to offer a proposal in full compliance with all requirements and conditions as set forth in the RFP.
C. She/he has fully read and understands the RFP and has full knowledge of the scope, nature, quantity and quality of the work to be performed, and the requirements and conditions under which the work is to be performed.

PROPOSER:

BY:

(SIGNATURE)

(PRINT NAME & TITLE)

(NAME OF COMPANY)

(CITY, STATE, ZIP)

(TELEPHONE NUMBER)
III. VENDOR INFORMATION

PURPOSE

The Duplin County Board of County Commissioners is seeking proposals from qualified firms, hereinafter referred to as the CONTRACTOR, to PROVIDE EMS AMBULANCE BILLING SERVICES, for Duplin County Emergency Medical Services, hereinafter referred to as “DCEMS”, in accordance with the terms, conditions, and specifications contained in this Request for Proposals (RFP).

ELIGIBILITY

To be eligible to respond to this RFP, the proposing firm must demonstrate that they, or the principals assigned to the project, have successfully completed services, similar to those specified in the Scope of Services section of this RFP, to at least three (3) governmental entities within the State of North Carolina and are licensed, insured, bondable and HIPPA compliant in the State of North Carolina. Insurance must be by a North Carolina recognized and approved insurance company.

The proposal should demonstrate at least five (5) years of documented, successful experience with and current knowledge of primary response EMS ambulance services billing. Experience must include filing claims with government programs such as Medicare and Medicaid, as well as commercial health insurance programs (HMO’s and PPO’s) and the capability to process 8,000 transports per year, with a minimum of a documented 75% collection percentage rate.

CONFIDENTIAL INFORMATION

Information and materials received by the COUNTY in connection with all Proposers’ responses shall be deemed to be public records subject to public inspection upon opening of the bid. However, certain exemptions to the public records law are statutorily provided for. Therefore, if the Proposer believes any of the information contained in his or her response is exempt from the Public Records Law, then the Proposer must in his or her response specifically identify the material which is deemed to be exempt and cite the legal authority for the exemption; otherwise, the COUNTY will treat all materials received as public records.

CONTRACT TERM

The initial contract term shall commence upon final approval and execution of the contract by the COUNTY and shall be for an initial term to end June 30, 2018. Fees quoted shall remain fixed for the initial term. After the initial term, The COUNTY reserves the right to extend the contract for an additional three (3) year term providing both parties agree, all terms and conditions remain the same, such extension is approved by the COUNTY, and the same fee or a negotiated fee is agreed upon by both parties.
Fees shall be based upon CONTRACTOR performance and expressed as a percentage of actual collections remitted to the DCEMS. These fees shall be all-inclusive of materials and personnel required for the performance of the final negotiated contract.

IV. SCOPE OF SERVICES

Background

The COUNTY is requesting proposals for the collection of EMS fees from patients; and their insurance carriers, transported via ambulance to health facilities or other facilities by DCEMS and for billable non-transport charges. This RFP is intended to cover all points of a contract from the reporting by DCEMS of the service to the satisfaction of the receivable.

DCEMS currently does not outsource EMS Billing. DCEMS is currently using EMS Charts as the electronic patient care (ePCR) reporting system. DCEMS will continue to use EMS Charts as the ePCR. The CONTRACTOR will not be financially responsible for the cost of DCEMS' ePCR.

The COUNTY wishes to obtain proposals from a qualified service provider for the actual billing of funds due and Accounts Receivable posting of funds received by DCEMS for these services.

At this time charges for service are as follows.

- A0433 - Advanced Life Support II $625.00 plus mileage
- A0427 - Advanced Life Support I $525.00 plus mileage
- A0429 - Basic life Support $425.00 plus mileage
- A0425 – Mileage $10.50 per transport mile
- A0998 – Treatment but no Transport $250.00

There are no additional fees currently being proposed for related services. However, additional fees could come at a later date; and the Proposer should be able to accommodate these charges. Records reflect that the DCEMS has estimated the following number of transports which would fall under the scope of services under this contract:

**Number of Billable Transports:**

- 2012 – 2013  6,079
- 2013 – 2014  6,365

**Net Charges:**

- FY 2013-2014  $3,963,709.90
Total Collections:
   FY 2013-2014 $ 2,835,719.68

Average Revenue Collected per Transport:
   FY 2013-2014 $ 445.52

Average Loaded Mileage Per Transport:
   FY 2013-2014 $ 13.56

Transports by Call Type:
   FY 2012-2013
      A0433 - Advanced Life Support II (ALS II) 65
      A0427 - Advanced Life Support I (ALS I) 3,536
      A0429 - Basic life Support (BLS) 2,478
   FY 2013-2014
      A0433 - Advanced Life Support II 81
      A0427 - Advanced Life Support I 3,459
      A0429 - Basic life Support 2,825

Currently, DCEMS includes the Notice of Privacy Practice (NPP) in the EMS Charts ePCR System. The CONTRACTOR will be responsible for mailing NPP’s.

DCEMS currently participates in the NC Department of Revenue’s Debt Setoff Program.

DCEMS currently does not use any other 3rd party collection agency in efforts to collect unpaid balances for EMS transport.

DCEMS does not currently have a lockbox for payments and correspondence.

There is no warranty or guarantee that future service requirements will remain constant.

CONTRACTOR

Scope of Work

The CONTRACTOR, under this contract, shall provide all services necessary to collect for services provided by DCEMS’s System. These services shall include but not be limited to:

A. The CONTRACTOR shall accept receipt of the patient data necessary for billing. The data will come from an ePCR system called EMS Charts. The CONTRACTOR will be furnished with the EMS chart summaries electronically. No insurance information will be provided from DCEMS ePCR.
B. The CONTRACTOR shall be responsible for obtaining the appropriate software that will be compatible to interface with our computerized report writing system known as EMS Charts and to enter furnished data into their computerized billing system.

C. The CONTRACTOR shall be responsible for reviewing each PCR for content to accomplish the following:

   a. To check for discrepancies and insure the number of PCRs received match the number of patients transported as documented on the PCRs. This is particularly important in the instance where there are multiple patients at one incident.

   b. Insure that the appropriate fee box has been selected and the documentation to support the charge is present.

   c. Assign the appropriate billing procedure code and diagnosis code based on the documentation, treatment and chief complaint of the patient.

   d. Review reports that require a “Treatment by no Transport Charge” to be assigned per documentation of the PCR.

   e. Obtain current patient insurance information per claim.

D. The CONTRACTOR shall be responsible for sorting the PCRs in numerical/date order as well as sorting all the paperwork in a systematic order for billing organization and future accessibility.

E. The CONTRACTOR shall provide electronic claims processing and paper filings to all insurance companies. The first invoice will be dated no later than five (5) days after the contracted billing company has received the PCR. The second notice will be sent to the patient or responsible party thirty (30) days after the original invoice. The third notice (final notice) will be sent to the patient or responsible party thirty (30) days after the second notice has been mailed. Services to be billed will include base fee, mileage, and on-scene medical treatment when applicable.

F. The CONTRACTOR shall be responsible for the initial collection, generation of any and all insurance forms, filings and record maintenance. The CONTRACTOR shall provide reports to DCEMS concerning all accounts that have had no payment activity for thirty (30) days after the date of first billing.
G. The CONTRACTOR shall be responsible for reviewing account status with DCEMS as required.

H. The CONTRACTOR shall provide the following documents:

   a. Daily Payment logs with deposit confirmation attached and a monthly summary showing balancing of daily deposits to collection report.

   b. Collections profiles for each month, dating back to the beginning of said contract.

   c. Status of all accounts (payer mix) for the current month and total in system.

   d. Distribution of Charges and Collections.

   e. Aging Receivable Report.

   f. Month End Reports.

   g. Monthly write off reports.

   h. Overpayment (Refund request) invoices.

   i. Non-Sufficient Funds Check Reports.

   j. Uncollectibles Report (listing undeliverable, unable to locate, etc)

   k. Patient Alpha Listing.

   l. Transport log.

   m. HIPAA Records release reports.

   n. Any additional reports that DCEMS may need or request will automatically be formatted to their requirements and sent to the department.

   o. Daily billing log with confirmation attached that PCR’s received have been billed and a monthly summary showing balancing of monthly PCR’s billed to monthly balancing of accounts receivable.
I. The CONTRACTOR shall comply with the policies and procedures developed and implemented by DCEMS in response to the improvement of the department and the privacy act of HIPAA. The CONTRACTOR shall enter into a business associates agreement with DCEMS to insure all HIPAA policies are adhered to. Any violations of HIPAA by the contracted billing company will be grounds to terminate all contractual agreements immediately.

J. The CONTRACTOR shall comply with HIPAA regarding protected health information (PHI) and guardian of all record sets and shall maintain any and all documentation records and patient information in a safe and secure manner allowing for inspection and/or audit by the COUNTY.

K. The CONTRACTOR shall be required to store all record sets for a minimum of thirty-six (36) months after term of contract and then turn them over to the COUNTY for permanent storage.

L. The CONTRACTOR shall be in compliance with the Final Security Rule of HIPAA and remain under a business associates agreement during the duration of the contract.

M. The CONTRACTOR shall provide sufficient Customer Service Representative(s) to assist patients and/or other third party payees in all billing inquiries in a timely manner, not to exceed one (1) business day. The contract will provide a plan explaining how the customer services representatives will be made available to assist patients and/or other third party payees.

N. The CONTRACTOR shall conduct any follow-up required to obtain necessary insurance information for payment processing. All payments will be received by the CONTRACTOR on behalf of DCEMS and be deposited to the COUNTY’S designated bank account daily. Records of deposits will be correlated with database reports on a daily basis, and this information will be emailed to the COUNTY on a daily basis.

O. The CONTRACTOR shall follow-up with patient or patient’s third party for collection of the receivable in increments of thirty (30) days, sixty (60) days, and ninety (90) days, after the initial billing. Initial bills to Insurance carriers shall be sent within five (5) days of the CONTRACTOR receiving the PCR from DCEMS. DCEMS shall be provided information on a monthly basis, on those accounts deemed “non-collectible except by further legal means”. DCEMS, with the assistance of the Duplin County Legal Department, will decide the method in which it wishes to proceed. No such account will be reported as long as payments are being made in good faith.
P. Duplin County employees and family members that are on the COUNTY’s insurance plan are waived from ambulance charges. When an employee contacts the CONTRACTOR upon receiving their first billing, the CONTRACTOR shall verify employment with the Duplin County Personnel Office before waiving/writing off those charges.

Q. Duplin County Jail is not billed for the transport of inmates.

R. The CONTRACTOR shall document follow-up efforts and results must be available to the COUNTY. Follow-up efforts subsequent to the initial effort must also be documented and retrievable.

S. The CONTRACTOR will mail statements to the patient within five (5) days after the CONTRACTOR receives the PCR from DCEMS. All patients should receive an initial bill regardless of insurance status.

T. The CONTRACTOR agrees to negotiate and arrange a modified payment schedule for those individuals who are unable to pay the full amount when invoiced. The CONTRACTOR is authorized to establish a monthly payment no less than $5.00 per month and ensure those individuals continue to pay at least that amount for the duration of the invoice. Collect remaining amounts after patient insurance or other third party payments are made from the patient where permitted by law and provider agreement. The CONTRACTOR is not authorized to accept payments marked as “paid in full” or “accord and satisfaction” unless the account is paid in full. At no time shall the CONTRACTOR negotiate for patient to pay a lesser amount of the bill in that DCEMS would have to forgive a portion of a bill.

U. The CONTRACTOR shall provide a read-only copy of DCEMS’s database for use on the DCEMS Computer system. The DCEMS read only system shall be updated simultaneously as the live data is updated. The DCEMS based system shall be capable of producing reports, and tracking or reviewing contractor follow-up on accounts.

V. The CONTRACTOR shall provide up to four (4) hours training for DCEMS personnel, at the discretion of the Emergency Services Director or EMS Operations Chief, on changes in the billing process and new requirements for data gathering as they occur. In addition, the CONTRACTOR must supply up to three (3) hours training on the use of the read-only version of the software to be provided under this contract for DCEMS-based use.

W. The CONTRACTOR shall provide:
1. All invoices and related insurance forms with remittance advice.

2. Return envelope with the address to be designated and approved by the DCEMS. Window envelopes are acceptable for satisfying this requirement.

3. Postage for the mailing of all said invoices and forms for the billing operation.

4. Patient statement must contain a message stating, “Cash, credit/debit cards and checks are accepted. Checks must be made payable to Duplin County EMS”. Patient statement must include a telephone number for patients to call and make a payment by phone. A web address should be included for patients to make payments.

5. Sample bill forms and sample messages that can be used on patient statements, as part of the response. All text, format, and color of printing and stock subject to approval by DCEMS.

6. Reasonable effort to locate and correct any incorrect billing information, ie: address, insurance, etc for billable patients. A report providing such efforts shall be provided.

7. A working arrangement with all DCEMS serviced hospitals.

8. A reconciliation report on the 15th and the last day of the month that will show all patients that have been billed for the previous fifteen (15) days. The invoice will display the PCR number, date of service, BLS or ALS, miles transported, patient billing code assignment and the total amount of the invoice.

9. A reconciliation report on the 15th and the last day of the month that will show a breakdown of ALS/BLS patients and the mileage charges for each category as well as On Scene Treatment fees. It will be broken down per category to insure all PCRs processed and mailed to the CONTRACTOR have been processed within the approved timeline.

10. DCEMS with a refund request including all pertinent information relating to refund payments to patients and/or insurance company, indicating the refund payee’s name, address and reason for refund.

11. A means for allowing EMS bills to be paid on site should a citizen decide to do so.

X. The CONTRACTOR shall provide the COUNTY with information necessary for DCEMS to pursue collection of non-sufficient fund checks.
Y. Given reasonable notification, the COUNTY has the right to audit all financial records pertaining to the billing and collection for DCEMS for a period of three (3) years after contract terminates.

Z. The CONTRACTOR shall comply with any special report request in reference to transport locations and response modes to specific locations on a case by case basis.

DCEMS

DCEMS will provide the necessary patient demographic information to the CONTRACTOR on a daily basis for those patients that have been recently transported or treated at scene.

DCEMS will comply with all Federal, State and local laws, rules and regulations as applicable to the services being contracted for.

DCEMS will provide all information relevant to payments made at their office to the CONTRACTOR daily.

V. PROPOSAL FORMAT

The proposal must name all persons or entities interested in the proposal as principals. The proposal must declare that it is made without collusion with any other person or entity submitting or not submitting a proposal pursuant to this Request for Proposal.

Proposer shall prepare their proposals using the following format with each section clearly labeled and shall include the following:

A. Letter of Transmittal.

B. Statement acknowledging receipt of each addendum issued by the COUNTY.

C. Qualifications and experience of the firm(s)/individual(s) who will provide the services which shall include documentation of the firm’s experience in similar work.

D. Proposer shall provide a list of all employees, agents and/or contractors that will be assigned to provide service to Duplin County, including job title, degrees, training, detailed list of experience and proposer will indicate who will be assigned as the primary contact. A statement should also be included that all current employees, agents or contractors have been vetted through criminal record checks, credit reports, and background checks. In addition, a Confidentiality Agreement may be required by all employees, agents and/or contractors to ensure all sensitive information such as HIPAA protected information, social security numbers and so forth are kept confidential.
E. List at least three (3) current and pertinent professional and financial references (name, address, and phone number) that the COUNTY may contact in relation to the Proposer's qualifications, experience and stability.

F. Scope of Work - This section of the proposal should explain the Scope of Work as understood by the Proposer and detail the approach, activities and work products. The proposal shall also include:

1. A rationale for the approach taken schedule of deliverables. Explain the rational for the approach you are recommending to accomplish the tasks requested in the RFP.

2. Explain how you determined this approach would be the most cost effective for COUNTY.

3. A list and sample of the work product(s) which the Proposer will provide.

4. A list of any assistance DCEMS may be requested to provide the Proposer.

5. Provide completed cost proposal (Attachment "A").

6. Provide evidence of current levels of insurance in areas of General Liability, and Professional Liability or evidence of insurability of at least $1,000,000 and confirmation that the COUNTY can be added as an additional insured. In the event Proposer is selected, a copy of all insurances must be updated whenever renewed. The COUNTY must be notified within three (3) days of any cancellation or threatened cancellation of insurance.

7. Provide a statement of Proposer's financial stability; including information as to current or prior bankruptcy proceedings.

8. Provide a summary of any litigation filed against the Proposer in the past three years which is related to the services that Proposer provides in the regular course of business. The summary shall state the nature of the litigation, a brief description of the case, the outcome or projected outcome and the monetary amount involved.

9. Identify the Proposer’s type of business entity (e.g., sole proprietorship, partnership, corporation, etc.). Identify whether the business entity is incorporated in North Carolina, another state or a foreign country.
10. In the case of a sole proprietorship or partnership, provide a W-9 for all owners or partners. Provide EIN for business.

11. If Proposer is a corporation; provide certification from the North Carolina Secretary of State verifying Proposer's corporate status and good standing, provide a W-9, and in the case of out-of-state corporations, evidence of authority to do business in the State of North Carolina.

12. Any additional information that the Proposer considers pertinent for consideration should be included in a separate section of the proposal.
ATTACHMENT A (Format for Pricing)

Provide the contract fee or percentage fee for providing Billing & Collection services as outlined in the attached RFP.

Option 1: Fixed contract fee - 

Is the fee fixed for the initial term ending June 30, 2018? YES ______ ; NO _______

If no:

Fixed contract fee ending June 30, 2016 

Fixed contract fee ending June 30, 2017 

Fixed contract fee ending June 30, 2018 

Option 2: Percentage contract fee - 

Is the percentage contract fee fixed for the initial term ending June 30, 2018? Yes ___; No ___

If no:

Percentage fee ending June 30, 2016 X ________ = __________

Percentage fee ending June 30, 2017 X ________ = __________

Percentage fee ending June 30, 2018 X ________ = __________

Option 3: Alternate option different from the above that you propose. Please explain this option by providing a written description as well as a mathematical equation, providing examples of where the variables in the mathematical equation will be obtained.
REQUEST FOR PROPOSAL TO PROVIDE:

EMS BILLING and COLLECTION SERVICES FOR DUPLIN COUNTY EMS

NOTICE IS HEREBY GIVEN that the Duplin County Board of County Commissioners will accept proposals until **5:00 P.M., (EST), April 10, 2015**, at the Duplin County Health Department, P O Box 948, 340 Seminary Street, Kenansville, NC 28349 – **FAXED**

**PROPOSALS WILL NOT BE ACCEPTED**

Late Proposals will not be considered, regardless of the reason.

The Board of County Commissioners of Duplin County, North Carolina reserves the right to accept or reject any or all proposals and waive informalities and irregularities in offers received.

The complete RFP is available on the Duplin County Website
(www.duplincountync.com)