

REQUEST FOR PROPOSALS FOR AMBULANCE BILLING SERVICES AND WEB-BASED ELECTRONIC PATIENT CARE REPORTING (EPCR) RFP-RH-12-034
PROPOSALS TABULATION

NAME	Advanced Data processing, Inc. dba Intermedix	Parastar, Inc.	Medical Management Systems of Michigan Inc	Paramedic Billing Services
ADDRESS	Fort Lauderdale, FL	Southfield, MI	Lansing, MI	Elmhurst, IL
Years in Business	34 years	25 years	28 years	22 years
Years providing ambulance/ems billing services	Over 30 years	EMS billing services for 25 years	Full service ambulance billing for 28 years	over 50 years of ambulance billing services
Full Time Employees	439 Full Time Employees	149 Full Time Employees	24 Full Time Employees	24 Full Time Employees
Part Time Employees	23 Part Time Employees	30 Part Time Employees	0 Part Time Employees	
Minimum Firm Qualifications:				
Certified/licensed for types of services specified	Yes	Yes	Yes	Yes
Copies of certifications/licenses w/ proposal	Yes	Yes-Copies attached	Yes-Copies attached	Yes
Capacity to coordinate w/ approving/monitoring agencies	Yes	Yes	Yes	Yes
Contact office in Michigan	Yes	Yes	Yes	Yes
Minimum 5 yrs similar services	Yes	Yes	Yes	Yes
Ongoing or past litigation	No	No	No	No
NEMESIS Gold Certification	Yes	Yes	Yes	Yes
Demonstration of understanding of local, state and federal billing laws & requirements	Complies w/ all including confidentiality for all medical and patient information per HIPPA; code of conduct & conflict of interest policy, US OIG Compliance Program Guidances; EMS Compliance Officer is a Certified Health Care Billing & Mgmt Executive	Essential part of maintaining reputation; assisted in development of national guidelines for corp compliance plans by Office of Inspector General of US Health & Human Services. Objective is to eliminate compliance risk. Compliance Plan: Officer, Plan & Code of Conduct, Compl Reporting, Training, Compl Committee, Monitoring, Auditing, Follow Through & Enforcement	All billing staff are Professional Medical Coders certification demonstrates knowledge of Fed and State laws; close relationship w/ numerous assns that provides continuous direction in billing procedures. MMS provides trainings to multiple organizations regarding laws & requirements & have highest understanding of requirements regarding laws in healthcare industry.	Level of understanding of local, state & federal billing laws & requirements is shown through their certification of compliance of these regulations. Letter from legal firm for American Ambulance Assn tht conducts yearly audits to insure they follow proper procedures and local, state and federal billing laws and requirements.
Mandatory Services Specifications & Requirements:				
Certificate of Insurances	Yes	Yes	Y-copies attached	Yes
Software that is ambulance billing compliant	Yes	Yes	Yes - using 5010 format	Yes
Document Imaging product	Yes	Yes	Yes	Yes
Imaging system w/ electronic retrieval	Yes	Yes	Yes	Yes
Explanation of Benefits management capacity	Yes	Yes	Yes	Yes
EOB's & checks scanned & indexed to individual accts	Yes	Yes	No-Scans all EOB's & batch indexes by date allowing for automatic retrieval	No
Software capable of immediate updates/changes from State & National agencies, industry orgs	Yes	Yes	Yes	Yes
Method of Secure Storage for Imaging/Historic	Disaster recovery-multi servers; redundancy; security awareness, change control, data ctr facilities-hosting, remote access, performance, network security, data retention. Disaster Recovery & Back-up-databases and files on servers are replicated in real-time to a geographically distant data ctr., virtualization, call center, primary data ctr failover procedures	Scans & electronic data submitted through a secure FTP scan to server based solution; encoded by run number; records stored on SAN & backed up bi-hourly; hist data kept 11 yrs; billing info in repository where can be submitted electronically to third parties, patients or collections. All info available to City 24/7	Outsourced hosting; SAS 70 compliant facility, cloud computing, redundant UPS, 365/24/7 staffing; high availability network, managed backup servers, SSAE-16 audited; updated technology & infrastructure, electronic security, Data Center w/ UPS protection, full plus differential repository(backup), disaster recovery plan	HIPAA compliant & Red Flag Rules Policy implemented; secure room for servers, UPS & dual generator backup, disaster recovery policies, virus protection.

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Guaranteed daily claim filing w/ electronic billing capacity, utilizing Medicare, BCBS, Medicaid & commercial clearing house networks	Yes	Yes	Yes	Yes
Receive & edit report immediately for clean claim transmissions	Yes	Yes	Yes-overview attached	Yes
Audit System designed for Fire EMS accts; all information available to RH to monitor billing	Yes	Yes	Yes	Yes
On-site training on software & as needed	Yes	Yes	Yes	Yes
Software	Propriety billing system-IMX Billing System is offered in the Software as a Services (SaaS) model. Currently services 400 clients; 2 mill annual patient accounts. TRIPTIX EPCR MOBILE Solutions fully integrated w/ IMX Billing Systems & runs on Panasonic Toughbooks, web-based solution, patient care reports	Zoll Data System & utilizes Zoll's RescueNet Billing Suite for all claims processing. Can seamlessly collect billing data electronically & submit to ins carriers. Meets 5010 compliance and adheres to all medicare & medicaid guidelines.	Quadax one of largest providers of billing software & claims processing in industry; 20 yr relationship. Quadax is privately-held corp founded in 1973, over 600 employees; services nationwide clients, over 40 million electronic transactions processed each year.	TriTech Sweet Software for billing. Software is maintained on regular basis, maintenance agreements, software upgrades & 24/7 support. Custom charge & credit codes for individual client, customization of billing, task scheduling customizing, automatic notification of tasks, remote access for RH into billing system to monitor accounts
Proposer will provide software/hardware necessary to interface bet Fire Dept's reporting systems & proposer's central processing unit	Yes-not responsible for charges by current fire reporting software vendor to provide their portion of interface	Yes	Yes	Yes
Company's policy on City dismissing charges	Wrtie-offs/reductions of charges will be handled by City Fire Chief at City's discretion-to be submitted in writing by authorized city representative	Requires hard copy, fax or email from Fire Chief dismissing charges & Parastar's contact will confirm & provide documentation of reversal of charge.	Will dismiss charges at client request within carrier guidelines. Patient requests received at their office will be forwarded to RH for determination.	Follow direction of City. PSB sends listing in inactive accounts to City for review & follows City's direction to handle these accounts.
Pre-Collection Activities	Submit collection letters every 30 days, telephone contact after 10 days, once all other electronic sweeps and front-end research efforts are exhausted	Develop program to meet client needs. Standard Program: private pay or denial of claim, processed through Dantom Systems-print & mailing co in Ann Arbor for invoicing & skip-tracing, 4 invoices, 3 phone attemps, and payment options	Very flexible. 3 statements; if returned mail contact patient/emerg contact; one telephone contact or 3 attempts; all activity documented. Pre-collection call; several methods for easy patient payment; does not charge for accounts sent to collection; review by RH prior to sending	RH completes transport & Q&A, a PCR transmitted to PBS's billing software; merge hosp data, verify doc, phone call ins info, invoice 30,60,90 day cycle, follow up calls incremental, Free lockbox acct for RH for payments/paperwk, Every 30-day review.
Outside collection agency	Credit Collections, Inc., Oklahoma City, OK After exhausting all efforts to resolve acct balances; skip-tracing, first notice, collection process, verbal followed by written communication; after 60 days w/o payment reported to 3 national credit agencies; automated dialing system	DRM, Ann Arbor, Mi. Attempt to collect on claim aged over 120 days with no patient contact; committed financial counselor type approach; fully licensed & bonded.	Will work with any collection agency. Recommend: Mid Michigan Collection Bureau charges 25% of fees collected.	Merchants Credit Guide Co, Chicago, IL. Phone calls & follow up w/ attys or ins providers-no direct contact w/ patients. PBS charge reproduction & ct appearance fee; Merchants charge 23% of what is collected (less than \$800) & 18% of what is collect (more than \$800). PBS collects their commission & RH receives balance

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Responsibility for all Fire Dept billing inquiries and retrieval of medical records bus day 8 am - 6 pm	Yes-Toll free number answered by live patient acct representative 8 am - 8 pm EST. Columbus-based Call Center w/ 35 patient acct reps & 2 supervisors	Yes	Yes	Yes Bilingual personnel, toll free number, M-Th 8am-7pm, Fri 8am-5pm, Sat 8am-12 pm (CT); multiple means of payment: online web service, phone credit card, payment plans
Responsibility for all EMS consumer complaints and compliments by provide information to Fire Dept by following work day or electronically	Yes-follow chain of command established by company; applicable concerns reported to City during status calls, periodic perf reviews or immediatley if urgent.	Yes	Yes	Yes
Responsibility for maintaining all software	Yes-Because own software, same people who developed will maintain. Will provide City with software and toughbooks for overall solution, as well as support & maintenance; no licensure fees or maintenance agreements	Yes	Yes	Yes
Guarantees ability to define Fire Dept-EMS specific general ledger accts for cash, accts receivable, gen adjustments, bad-debt write-off, etc.	Yes-reports detailing aging accounts; identify claims filing issues; after exhausting all efforts to resolve acct balances, accts sent to City for write-off or further collection activity; Intermedix is not a collections company and does not use hard collection techniques in its approach	Yes	Yes	Yes
Financial reports on a daily basis	Yes	Yes	Yes-attached	Yes
Available standard reports attached	Yes-will set up scheduled reports & provide training for ad-hoc reportings; provide specialized reports upon request	Yes - sample reports attached	Yes - attached	Yes - Appendix D
Custom Reports	Can provide a variety of custom reports at no additional charge, depending on City's reporting needs	Hundreds of billing reports currently available; will provide custom reporting at no additional charge, included in percentage of collection fees.	All reports available on line at no additional cost. Web-based reporting; RH can customize. Headings of reports provided with many variations & options	Variety of standard monthly reports and cuztomized reporting capabilities. Custom reports are available upon request at no additional cost to City.
Guarantees Fire Dept will receive docs on procedure changes relating to Medicare B, Medicaid of MI & other commercial/individual ins carrier changes	Yes	Yes	Yes	Yes

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Monthly percentage of collection fee schedule is inclusive of all business costs including, personnel, stmts, envelope & return mail envelopes, HCFA 1500 claim forms, electronic clearinghouse service fee and postage.	Yes - Proposal fee is all inclusive	Yes	Yes - attached - everything is included	Yes
Recovery from a default by proposer during contractual period using medical accounts receivable software	Intermedix has never defaulted on a contract. If City terminates will relinquish all accounts to City w/ reasonable notice; provide optical media disk of any images & report on all accts. Do not use third party software vendor.	Would arrange for an electronic copy of EMS billing information for RH to be delivered to City, including any hard copies; format can be modified to meet City's needs. All information would be available to RH immediately.	Has never defaulted on a contract. RH is protected as all systems are backed up off site. Should anything happen to us or our facility, processing claims could continue anywhere there is access to the internet	in unlikely event PBS defaults during contractual period, are insured to cover any physical or financial losses incurred by City. If termination, PBS wk w/ City to determine means to return all paper & electronic docs
PRICING:				
Monthly percentage of amount collected	5.25%	6.50%	5.75%	7%
	Base Fee: Billing & collection of non-Medicaid transport acct: 5.25% of net collections. Net collections is total cash collections less refunds. Excludes cost of Certified mail. Price bid includes all expenses of billing & collection including stationery, forms, envelopes, postage & phone facilities. Credit card fees (generally 2.5% of amt charged) for processing patient payment via credit card acct are netted w/ payment amount. Includes TriTix Web software which allows entering of PCR data into their proprietary web-based ePCR Field Data Capture & Reporting Solution software.	Per Contract: added to Base Fee	Postage over \$.45; Per hr claims processing charge where RH submits incomplete data; after initial enrollmt, provider enrollmet services at hrly rate per application for new, renewal or update; third party carriers bankruptcies or processing issues causing additional time & materials	For ePCR solution - \$1500 per year for NEMESIS reporting and maintenance services (to be paid monthly at \$125/mo) Court appearance fee - \$200/ea
Costs for additional services	Optional Advanced Collections Services including credit bureau filing - 20% of net collections. No hourly or daily additional fees Can provide following services and pricing upon request: TripTIX Mobile- fully functioned field-based reporting including Toughbook hardware & wireless cellular capability; Fire Services Billings; FleetEyes Fleet Mgmt & Tracking GPS Software		Software: First Year \$19,000 Fees after Year 1 \$ 9,500	
Equipment/Programs & Costs for more efficient EMS services	Can provide cost for all-inclusive optional package wherein they provide all hardware w/ 3-year protection & technology repmt & wireless cellular services and services previously listed.		Training, budgeting, meeting attendance, credit card processing, colleciton agency selection, subscription services and press releases. Additional Services pricing.	N/A

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Charges for start-up, installation & conversion of existing accounts receivable & all new business commencing with this contract	No additional fees for start-up, installation or conversion of existing accounts receivable.	Start-up, installation and conversion of existing accounts receivable and all new business commencing with this contract will cost: \$7,500.00 in licensing expense and \$900.00 in billing company licensing fees on the server side	No additional charge for start-up and installation.	No start up costs. If PBS is required to take over existing A/R accounts, those accounts charged a 10% commission on what is collected. Will require a compatible data file of accounts & current aging report of these accounts
Any other fees/charges/not stated above	Can provide cost for all-inclusive optional package wherein they provide all hardware w/ 3-year protection & technology replmt & wireless cellular services and services previously listed.		Additional Services Pricing: RH changes on computer system \$100 per change MISC Costs - charged at cost Consulting - quoted Computer Services \$75/hr Clerical Services \$45/hr	N/A
Administrative overhead fee for subcontracted services	Will not be utilizing any subcontracted firms; typically do not charge an administrative overhead fee for subcontracted services.	No	No	No
Time required for completion of proposed services/timeline	Implementation process begins as soon as notified of award; billing implementation 30-45 days & TripTix deployment up to 60 days. 6-step process for orderly transition to Intermedix technology solution	4-6 weeks depending on client needs. Assessment Strategy - 7 days System Design - 20 days System Development - 20 days Testing/Training (concurrent) - 25 days	3 weeks start-up process: new client registration form-2 days; database build-3 wks; credentialing-3 wks; review of ePCR documentation - 1 wk	6 weeks. Many processes completed simultaneously. Fed & St Provider Application Process 3-6 wks; eFusion Integration-6 wks; Internal System Configurations-2 wks, RH Personnel Training-1 day
TECHNICAL INFORMATION:				
PROJECT Manager/Primary Contact(s)	Primary Client Service Contact: Cindy Bandy, Director of Client Services, Columbus, Ohio	Jan Parker, VP of Business Development	Trinea Crafton-project mgr/primary consultant Angie Harguth-manager for ePCR Dawn Homer-accounts receivable	Michelle Padula, PBS Director Kimberly Fuller, Director of A/R Operations Robert Perez, Systems Analyst
Credentials	20 yrs healthcare billing experience; with Intermedix since 2008; Associate's degree in Accounting	Steven Kleinlein-Corp Dir of Communications 25 yrs setup & mgmt training; communications technology, call center mgmt/distribution	See response below	Padula-expertise govt/technology Fuller - 21 years EMS billing Perez-12 yrs exp, BS-IT, certifications
Ambulance billing, accts receivable & web-based electronic patient care reporting experience of project manager for EMS billing services	Intermedix is organize using Client-Team approach, client managed by Regional Processing Team that provides operations, customer service, acct mgmt services; all transports processed out of Columbus, OH alongside their Wisconsin based clients; dedicated Client Service Representative coordinates all efforts. Nikki Wallace-dedicated client services manager-primary operations contact; Cindy Bandy-Secondary operations contact; Rapid Response Team-Team listed	Steven Kleinlein-Corp Dir of Communications 25 yrs setup & mgmt training; communications technology, call center mgmt/distribution Ken Slinker-communication, customer service, problem solving, 26 yrs	T Crafton-lead amb billing, coding, acct rec. D Homer, CPC, VP, 29 yrs exp oversight & billing in amb & med specialties; primary liason to insurance carriers A Harguth-implementation mgr, 16 yrs cust services & sales, proj mgmt knowledge	Superior Air-Ground Ambulance Service-200 ambulances across 3 states-largest roll out of hardware & software. Central DuPage & Loyola Hosps, Billingbrook FD, Naperville FD

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Certified Coders; Number of employees focused on EMS billing	Kelley Kirkland-Director of Coding. Coding staff uses Medicare level service coding guidelines; all coders must achieve 95% coding accuracy. Has over 1400 employees throughout US, more than 70% are focused exclusively on EMS billing & collections	Only uses certified coders, either CAC or CPC; each coder certified by CAC by 9/1/12. List of certified coders provided; no bills are coded by an individual that does not have a coding certification.	List of eight certified coders; MMS has 24 employees focused on EMS billing	List of five certified coders - all CAC
Uniquely qualified to provide Fire Dept EMS medical billing services	Proprietary Electronic Patient Care Reporting; EMS Billing and Collection Services-solely focused on emergency healthcare industry; Significant experience w/ local hospitals, Regional operations team, Technological Capabilities, Hospital liaison and interfaces, optimized revenue results, accountability through reporting, competitive fee, excellent patient service, culture of compliance, financial stability, business continuity and disaster recovery	Edge of leading technologies, quality staff and continuing education; certified coders, compliance plans unique to each client, specializes in & only processed EMS claims; chosen vendor for Mich Fire Dept Billing Consortium (FH); can register RH as provider Medicare, Medicaid, BC, etc for a discount, multi-lingual services, credit & debit card payments	Billing & collection for ambulance, physicians, clinics, hosps & other medical specialists over 28 yrs-provides unique perspective & benefits clients; involvement with many ambulance services; trained experts; skilled & professional staff; many different options; Image Trend for ePCR & Quadax for electronic transactions	Uniquely qualified to provide Fire Dept EMS medical billing service, accts receivable activities & web-based electronic patient care reporting through its affiliation w/ Superior Air-Ground Ambulance Service, Inc. Superior's success in collecting EMS revenue on ambulance transports has allowed it to grow to largest private ambulance provider in midwest. All technology, accts receivable exp & resources
Clients	Metro West, MO-EMS Billing & Collections Mehville, MO-EMS Billing & Collections Newport, KY-EMS Billing & Collections Wauwatosa, WI-EMS Billing & Collections Glenview, IL - EMS Billing & Collections Athens, OH-EMS Billing & Collections Covington, KY - EMS Billing & Collections Milwaukee, WI - EMS Billing & Collections Colerain, OH - EMS Billing & Collections Adams County, IL - EMS Billing & Collections	Farmington Hills Fire Department Northville Township Fire Department Wayne County Airport Fire Services Authority Independence Township Fire Department Livonia Fire Department	Delta Township Meridian Township East Lansing Lansing Township Windsor Township	Barlett Fire Protection District, Barlett, IL West Chicago Fire Protection District, IL Glenside Fire Protection District, IL Elmhurst Fire Department, IL Woodstock Fire Rescue District, IL
Customers who terminated services	No clients have terminated their services within past two years.	Has not had any contract terminations within last two years	No clients have terminated in last two years	Braceville Fire Protection District, IL Summit Fire Department, IL Naperville Fire Department, IL
Current Client List:		Attached Current Client List	Client list is confidential	Appendix E attached

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Description of firm, its organization, size and nature of general services, location of office facilities available	Leading provider of revenue cycle mgmt & technology services to emerg healthcare industry w/ 30 yrs in EMS marketplace; 2011 process more than 2.6 million EMS patient accounts; services to nearly 400 agencies across US. In 2006 Emerg Physicians Billing Services & Advanced Data Processing Inc. joined forces; key acquisition of Intermed in 2006, leader in billing & electronic patient care technology; rebranded as Intermedix; in 2010 acquired EMSsystems; acquired Revenue Rescue & FleetEyes. 18 offices in US. RH transports processed out of Columbus, OH with other Mich based clients.	Providing EMS Billing Services since 1987; submits Fire and EMS invoices w/ combined revenues in excess of \$100 million annually. Clients range from small communities (1000 transports) to large EMS systems (60,000 transports) annually. Billing office is located in Southfield, MI	Headquarter in Lansing, MI, 28 yrs, 20 employees, billing & collections for ambulance, physicians, clinics, hosps & other medical specialists; experience w/ municipalities & their functions; process between 10,000 to 115,000 patients encounters per month; 4 billing systems; Had \$68 million client charges that produced \$35 million in receipts. Gross collection ratios of 98% and net collection ratios of 51% for the year. Nationwide company	Founded in 1990; parent company is Superior Air-Ground Ambulance Service, Inc.; over 50 yrs ambulance billing experience. Superior began providing emerg medical services to accident victims in DuPage County, IL in 1959. Today Superior is largest privately owned private ambulance co in midwest. All ambulance billing is in house, processing 340,000 claim per yr/ \$51 million in claims per yr/process approx 400,000 amb transport claims per year; Four states: IL, MI, IN, WI. Located in Elmhurst, IL - office & operation inn Warren, MI
Special equipment	No special equipment is needed to assist in fulfilling the services solicited herein	Special equipment is not necessary, other than Zoll RescueNet Billing Suite software & server for web-based ePCR.	Billing product, HP-UX11i & Eloquence business application to integrate services, upgraded patient statement program, check processing	City should have current mobile computer units w/ wireless internet access to run ePCR software
Software supplier for web-based electronic patient care reporting system used & its version; Percentage of resources associated with EMS Billing clients	Proprietary IMX Billing System, not locked into specific version of billing software program, allowing ability to make customizations for individual clients. IMX Billing System is offered in Software as a Service (SaaS) model - no additional hardware or licensure is required; real-time through any web-enabled computer	Zoll RescueNet Version 5.2 Parastar specializes in EMS billing; does not provide any other type of billing services. 90% of resources dedicated to EMS Billing for clients, researching new innovations for EMS Billing for clients, on-going education for employees. EMS Billing Compliance and EMS billing business growth.	Quadax for billing software w/ full accreditation; using most current version 2.43c; 40% of resources associated w/ EMS billing clients; fully integrated w/ Image Trend's ePCR & Fire RMS software provides comprehensive solution field to statewide reporting using NEMSIS gold & NFIRS 5.0 standards; 100% resources w/ EMS billing.	TriTech Fusion ePCR Version 6.1 would run on one of each 5 laptops in each ambulance.
Recommended hardware; safeguard & protections and backup process	Web-based distributed architecture that provides scalability, high availability, manageability & vendor neutrality. To support the secure environment required to do business, established standards that govern system, facilities & employees. Safeguards & back-up processes described.	Hardware is not necessary w/ web-based solution; only requirements would be the City have IE7 or above. All data would be stored on Parastar servers so hardware is at discretion of the City.	Protection is critical - unique data center design, secure data repository, mgmt of data repository, mgmt of repository process, verification and monitoring of backup plan; all processes are documented & verified in Medical Mgmt Systems of MI, Inc Corp Compliance Plan	Panasonic Toughbook mobile unit or comparable. Should also be equipped with wireless air cards & docking stations
Patient statements	Statements generated automatically by billing system. Authorized users can access & print statements. Statements, ltrs & billing correspondence prepared by Intermedix w/ final approval of City; messaging tailored to goals of City; fee structure by City; IMX billing systems patient acct screen allows City to view all acct activity/history at a glance. Account Stmt provided.	Dantom system produced patient statements for Parastar - offer affordable, high quality statements; no separate charges for Dantom services - included in percentage of collection fee that City would be billed monthly. Stmts would be custom designed based on City's needs.	Patient mailed min 2 detailed stmts itemized w/ date of service & description of carrier pymt. If call made is nonresponsive, collection reminder sent; pymt plan set up w/ follow-up. 30-day cycle; phone call to undeliverables; Easy to read stmts, 800 number provided. 5000 stmts per week w/ 150 patient calls per week. Stmts are effective in getting patients to pay. Most courteous & effective way to ask for payment.	Invoicing 30/60/90 days basis. If patient has ins, invoice will instruct patient on how to provide ins info to PBS so claim can be submitted to ins carrier. Outsources generation of invoices to: PSC Info Group, Oaks, PA

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Recovery from default	Prior response	RH would immediately receive an electronic file containing all City's data in desired format; hard copies mailed within 24 hrs of notice of default to RH; specific reports used by City can be requested and would be promptly supplied.	Never defaulted on a contract. All systems are backed up off site. If anything happens processing claims could continue anywhere there is internet access.	RH availability to access accts receivable software anywhere, anytime. Unlikely for PBS to go into default, will wk w/ RH to establish necessary means to maintain continuity of receivables, export of database w/ all medical accounts.
Recovery if software vendor stopped doing business	Provide City with an optical media disk of any images as well as report on all accounts for City's reconciliation and data verification	Give City notice, time-line, project plan & deconversion process; data & history returned to appropriate party; Agmt w/ Zoll to protect from loss of software functionality or inability to carry out business.	EMS data is stored offsite & immediately accessible via the internet. Bills on four separate platforms & could convert to another platform; transition to another solution.	Advance notification/transition. Option to migrate data to a different hosted software. RH agreed upon transition process.
Document imaging	Incident information captured directly into IMX Billing System regardless of paper PCR or an electronic data import. Electronic PCRs will be transmitted directly to secure website through a working interface with City's ePCR system and paper PCRs are scanned into system. Information imported into proprietary front-end coding software via monitoring program that looks on the secured website for new transports. Once information is input into IMX Billing System, City will have real-time access to it through online hosted solution.	Software Finesse is imaging software, Michigan based company, 1994; offers competitive pricing, high quality, timeliness, technological support, and customer services. Software allows Parastar to fax, mail, store, index, email or print to specified locations. Allows clients to receive images through any media they prefer.	All billing information is available on line. MMS scans all documents for billing purposes. RH given timely notice of any changes in third party software vendor or system. All explanation of benefits MMS receives in connection w/ service will be forwarded to RH for proper record retention. All related data will be purged from MMS files during & at end of this contract unless negotiated with MMS. Stored data utilized for MMS billing services only.	PSB makes available all EOB's of patients transported by RH through provided lockbox acct at Suburban Bank & Trust. All paper checks, docs (incl EOB's), electronic cks & deposits are available through provided secure login info to City's own lockbox acct. The lockbox acct functions same as an online bank acct. All acct info is available online 24/7.
On-site training	On site training/on demand training through Intermedix Institute online WebEx/webinar training tool; also train the trainer approach; flexible.	Advanced Documentation Class is first line of attack to improve collection rates; on-site training for RH for Zoll software & web-based ePCR solution; training generally 3 days-1 wk.	Provide onsite training for RH paramedics to gather required info; train online capabilities & reporting; ID areas for more training, one-on-one w/ paramedic if needed.	Provides customized on-site training. Training agenda developed interactively bet PBS and client; mix of demonstration and hands-on.
Audit system	Active compliance program since 1999. Certify that the Intermedix Compliance Program is compliant w/ the intent and activities included in the US OIG Compliance Program Guidance for Third Party Medical Billing companies established on 12/18/98. Plan is enforced from President to Coders, every individual within company. Also code of conduct & conflict of interest policy for HIPAA adherence; Quality Assurance Department. External compliance audit in 2010 w/ 100% accuracy; Process Quality Assurance & Control Point Auditing Program; forecasting tools	Highest caliber standards regarding industry regulations & corp compliance initiatives-external audits; monthly updates on regulatory & industry standards/changes; random audits on clients for correct claims processing; monthly internal audits. One of leading Corporate Compliance Programs in industry.	Audit policy & procedure one of foundations of Compliance Plan. Audit various functions including high risk for fraud, billing error & abuse. Each operational employe is audited at least quarterly; accuracy and production goals for each employee; end of the month benchmarking	For ePCR clients: PBS provides Charge Report of all accts sent to PBS electronically shortly after data has been imported into billing system. Report can be compared against what client intended to have billed. Any discrepancies worked out immediately. For all clients: PSB sends out monthly reports of all transports charged & all payments made & to which transports. Reports can also be used as auditing tools by City. Can offer RH secure remote access into their designated area in billing system to monitor each account.

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ADDRESS	Fort Lauderdale, FL	Southfield, MI	Lansing, MI	Elmhurst, IL
Composition of firm's commitments, including volume and size, number of transactions. Percentage of total volume.	More municipal EMS agencies than any other vendor across the country, ranging in size from less than 1,000 to more than 200,000 annual transports. Process than 2.6 million EMS patient accounts in 2011; anticipate 2.9 million in 2012; approx 18% of EMS business is w/ municipal agencies similar in size and scope to what is being proposed to RH	Beaumont 8.73%; Northville .63%; Charlevoix .32%; Community EMS 26.01%; DMCCare Express 7.39%; Edward Amb .75% FH 2.14%; Fayette County Hosp 2.10%; Healthlink Med Trans 17.93%; Independence Twp .63%; Kings Daughters Transport 5.41%; Livonia .17%; MedCare 9.56%; Redford 1.41%; Regional EMS 6.29%; Mercy Health Med Trans 10.28%; Wayne County Airport Authority .24%	Business strategy: annually grow business in size & profitability; ensure viability by maintaining lg client base w/ no single client greater than 20% of total revenue; ensure viability w/ presence in 3 billing specialties or vertical industries. Ambulance billing represents 40% of business. \$68 million in charges that produced receipts of \$35 million. Systems, facility & staff designed to handle growth	Total number of calls 68,568/65 clients listed with percentages ranging from .06% to 8.03%
Normal billing procedures from receipt of run report to final collection	Days 1-7: Data Gathering Process; Days 2-14: Billing; Weeks 2-8: Payer Response; Weeks 3-16: Account Resolution; Month's End: Reporting Comprehensive description provided	Verification/validation-6 days; Coding-5 days; Data entry-same as coding; Stmt-same day; payment posting within 2 bus days; acct follow-up; appeal process-7 days; co-ins/priv pay/suppl ins; payment plans; aged over 90 days; refunds-3 days or less; bad address-Dantom; collection of bad debt-turned over to collections at 120 days.	Retrieve ePCR from State-daily, verify accuracy-Day 2, verify & code amb run-Day 3-5, send out initial claim-same as Day 3-5, Process primary pymt-4-14 days, Process secondary claim-coordinated; Process Patient Stmt-same day last ins pymt, Process 2nd patient stmt- 30 day cycle, pre-collection ltr-30 days fr last stmt, patient phone calls-3 attempts last 60 days; final report	Receipt of Patient Care Report, PBS begins coding & pre-collection process, claims submitted to ins co 24-72 hrs after receipt, Medicare pymts in 14 days, other ins carriers and State funded public aid pay at varying rates. Typically claims paid within month. Non-ins claims take longer.
Capabilities to receive data from City electronically	Encourage an integrated solution. TripTix solution & proven ability to integrate w/ nearly 20 other ePCR applications; IT staff of 40.	Ability to exchange data through NEMESIS Gold. Via secured FTP site that Parastar maintains. NEMESIS stand in itself guarantees validity of data received based on mandatory attributes and acceptable responses	Receives patient demographics, charges, receipts, adjustments in electronic files & loads into billing system; electronic interfaces mapped from State of MI data repository. No wk for RH	Secure File Transfer Protocol (FTP) unique login); E-mail; Fax
Capabilities to send data to insurance companies for payment electronically	Approx 83% of all claims billed electronically; most commercial payers are electronic. Paper claims are printed and mailed if electronic delivery is not available	Hundreds of ACH agreements w/ ins companies; if do not have agmt will draft & submit to ins. co; will sign RH as provider for Medicaid, Medicare, CareLink producing higher returns on claims	86% claims sent electronically, 70% pymts are electronic; will add ins companies as they become available; processes all claims through a clearing house; 98% on first submission	Transmitting claims to ins companies electronically is a practice that PBS has been completing for some time now. PBS sends all claims electronically whenever possible as dictated by carrier.
Billing/claim follow-up process	Typically takes 3 wks to 2 mos after initial payer response to resolve an acct by receiving payment from a secondary payer, receiving resolution on the appeals process or resolving a denial. New credit balances are typically resolved within one month after they are initiated as part of the month-end close process.	Electronic billing; self-pay - search for eligibility through numerous databases, phone contact w/ patient. Self Pay process includes max of 3 contract attempts by phone, 3 stmts over 120 days; goal payment plan; multi-lingual services	Nonpayments posted to billing system; follow up within 10 days; End of Month Benchmarking; Plan of Action each month based on reports of accounts numbers and ratios that fall outside of benchmarks.	Every 30 days review; call ins carriers to confirm claims status, ck claims status online; ck remittance on line, ck eligibility before claim is sent; Telephone system Cisco Voice Over IP is a powerful tool for providing quality assurance and great customer services for clients.
Samples of Reports	Sample report provided. Business Objects reporting available at City's discretion. Will work w/ City to set up scheduled reports & provide training for ad hoc reporting; specialized reports upon request.	Attached sample reports. Ad hoc reporting is through utilization of Crystal Reports with an ADDBC connection to a SQL Database.	Reports available on line; can export to spreadsheet, change or modify; also access to online billing system to create reports on demand. Over 400 reports w/ sort possibilities.	Billing software runs on SQL database while reporting features are Crystal Report based. Sample reports provided.

REQUEST FOR PROPOSALS FOR AMBULANCE BILLING SERVICES AND WEB-BASED ELECTRONIC PATIENT CARE REPORTING (EPCR) RFP-RH-12-034
PROPOSALS TABULATION

NAME	Advanced Data processing, Inc. dba Intermedix	Parastar, Inc.	Medical Management Systems of Michigan Inc	Paramedic Billing Services
ADDRESS	Fort Lauderdale, FL	Southfield, MI	Lansing, MI	Elmhurst, IL
Gross percentage of collections	Medicare & Medicaid: 90-95% of the allowable fees Commercial insurance fees: 80-85% Self-pay: 10% or below due to the fact that the majority of their clients do not tend to pursue this category very aggressively.	Parastar calculated collection rate as Cash to Net ratio Gross chrgs less contract adjustmts. Cash to Gross 55%; Net to Gross 53%	74% net collection ratio 85.2% gross collection ratio (factors bad debt) 95.2 gross collection ratio	
Overall Average Collection Rate		Overall Average Collection Rate 97%	Overall Average Collection Rate 95.2%	Overall Average Collection Rate 60%
Overall Percentage Sent to Collection Agency		Overall % Sent to Collection Agency 11%	Overall % Sent to Collection Agency 4%	Overall % Sent to Collection Agency 12%
Overall Percentage Collected by Collection Agency		Overall % Collected by Collection Ag 87%	Overall % Collected by Collection Ag 15-20%	Overall % Collected by Collection Ag 1%
Percentage Uncollectable		Percentage Uncollectable 13%	Percentage Uncollected 2-3%	Percentage Uncollectable 22%
Credit Card Payments	Yes. Credit card payments, EFTs, ERAs and checks. Credit card fees (generally 2.5% of amount charged or less) for processing patient payment via credit card account are netted with payment amount	Credit/Debit Payments offered; patient will receive invoice showing payment & new balance within 5 bus days. Fee for service is included; no individual charges	Online credit card payments processed directly to RH bank acct & posted to system. Costs are: Monthly Fee \$39.95/Monthly Gateway Fee 0.60% of transactions/Annual PCI \$79.95	Offers a variety of payment options including checks & credit card by phone and online credit card processing, which provides for immediate revenue recovery. There is no additional cost to City for this service.
Staff Profiles	Cindy Bandy-Primary Client Service Contact-20 yrs healthcare billing experience, Dir Client Services Nikki Wallace-Client Services Mgr-client/cust service Joe Cooney-Call Center Director-20 yrs exp call ctr Kelley Kirkland-Director of Coding-exp med/ins Angela Plumley-Data Gathering Mgr-5 yrs direct clinical & healthcare mgmt experience Eric Braun-Payments Mgr, since 2009 Maria Losey, Accts Receiveable & Auditing Mgr- 18 yrs healthcare experience Joe McCloskey-EMS Compliance Officer-30 yrs exp in medical billing	Ken Slinker-Dir Accts Rec-3 mos; prior Community EMS - 26 yrs A Thompson-Acct Rec Coord 3 yrs K German-Acct Rec Coord-3 yrs	Crafton-Project Mgr Rutledge-CEO, founded company in 1984 Homer-VP-founded company in 1984 Frankfort, VP - 1993, financial data & reports Shaw-Billing Supervisor, 2001 Coffee-Project & Lead Billing Staff, 2000	Michelle Padula, PBS Director expertise govt/technology Kimberly Fuller, Director of A/R Operations 21 yrs EMS billing Robert Perez, Systems Analyst 12 yrs exp, BS-IT, certifications
Methods of Communication	Phone, email or in person consultations			In person, phone, webinar, remote login email, fax, cell or land line phone
Work Program	Implementation process begins as soon as notified of award; billing implementation 30-45 days & TripTix deployment up to 60 days. 6-steps process for orderly transition to Intermedix technology solution	Standard Implementation Project Plan: Define, System Dev, Testing, Training, System Deployment. ePCR Deployment.	Directly through billing software; phone several times a week; 800 number; monthly or quarterly meetings to review billing and finances	1% turnover in personnel, written procedures, trained and cross-trained staff, excellent customer service; benchmarking and monitoring
Standard Contract	Contract provided	Contract provided	Contract provided	Contract provided
Billing Procedures		Proprietary	Process Overview/Overview of Services	30/60/90 day invoice cycle, follow up call, Free lockbox acct/mo stmts sent to dept
Litigation during past 5 years	Information provided	Information Provided	Information Provided	Information provided
Insurance Requirements	Yes	Yes	Yes	Yes

REQUEST FOR PROPOSALS FOR AMBULANCE BILLING SERVICES AND WEB-BASED ELECTRONIC PATIENT CARE REPORTING (EPCR) RFP-RH-12-034
PROPOSALS TABULATION

NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Years in Business	14 years	18 years	23 years
Years providing ambulance/ems billing services	14 years	18 years	23 years
Full Time Employees	8 Full Time Employees	1 Full Time Employee	67 Full Time Employees
Part Time Employees	0 Part Time Employees	2 Part Time Employees	2 Part Time Employees
Minimum Firm Qualifications			
Certified/licensed for types of services specified	Yes	Yes	Yes
Copies of certifications/licenses w/ proposal	Yes	No	Yes-copies attached
Capacity to coordinate w/ approving/monitoring agencies	Yes	Yes	Yes
Contact office in Michigan	Yes	Yes	Yes
Minimum 5 yrs similar services	Yes	Yes	Yes
Ongoing or past litigation	No	No	Yes - no current or ongoing
NEMIS Gold Certification	Yes	Yes	Yes
Demonstration of understanding of local, state and federal billing laws & requirements	MHR has been successfully providing ambulance billing services to clients from 20 to 7000 calls per month for 14 yrs. MHR never received any violations from insurers or lost any clients (other than those who stopped providing EMS services) during that time. None of that can be done without a thorough understanding & knowledge of billing laws and requirements.	DMC Billing Services Inc. follows all protection of privacy of Personal Health information (PHI) and compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA)	Record of zero billing violations since 1989 incorporation; full understanding of local, state & federal billing laws; employees full time Corp Compl Officer, HIPAA Privacy Officer & Corp Compl Plan as recommended by Office of Inspector General; compliance is strict condition of employment; national EMS law firm to audit training, education & compliance efforts & test aptitude of billing & admin staff. Results confirm compliance, training & education.
Mandatory Services Specifications & Requirements:			
Certificate of Insurances	Yes-Attached	Yes	Yes - attached
Software that is ambulance billing compliant	Yes	Yes	Yes
Document imaging product	Yes	Yes	Yes
Imaging system w/ electronic retrieval	Yes	Yes	Yes
Explanation of Benefits management capacity	Yes	Yes	Yes
EOB's & checks scanned & indexed to individual accts	Yes	Yes	No
Software capable of immediate updates/changes from State & National agencies, industry orgs	Yes	Yes	Yes
Method of Secure Storage for Imaging/Historic	All data is backed up daily & stored off site so easily re-created. Reports can re-create all information. All staff can perform all aspects of billing process so any staff member could step in & perform billing for any agency. EPCR patient charting data can be re-created. MHR carries appropriate liability insurance.	DMC Billing Service Inc. will provide physical security to protect negotiable instruments and the confidentiality of data at company's location & w/ all interfaces; all computers are password protected for proper security. All online services utilized encrypted secure web site. DMC Billing Service Inc uses Carbonite on line back system as off site database	Imaging system housed in SAN on EqualLogic PS4100X array. Blend of performance, scalability, & fault tolerance. Backed by Dell's mission critical support plan, extra layer of protection. Maintain entire image archive online at all times, supplemented w/ wkly full and daily incremental backups housed on external media and taken off site.

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Guaranteed daily claim filing w/ electronic billing capacity, utilizing Medicare, BCBS, Medicaid & commercial clearing house networks	Yes	Yes	Yes
Receive & edit report immediately for clean claim transmissions	Yes	Yes	Yes
Audit System designed for Fire EMS accts; all information available to RH to monitor billing	Yes	Yes	Yes
On-site training on software & as needed	Yes	Yes	
Software	TriTech version 5.6 (formerly Ortivus) and patient charting software MHR offers is gold compliant Sansio Health EMS software version v3.96 which would be offered to city at no charge. Both versions used are most recent updated version.	DMC Billing Services Inc uses Genius Solutions Software & integrates w/ Image Trend or any gold compliant or XML format billing software, intends to use Image Trend EMS State Bridge, an internet based data collection, analysis & reporting.	Two systems: eMedicReports (EPCR) 24/7/365 realtime access patient care related data & reports & off the shelf billing system by Zoll. City currently leveraging benefits of both; State reporting mandate; Medtronic monitor integration, automated fax module & web services enabling direct MCA access.
Proposer will provide software/hardware necessary to interface bet Fire Dept's reporting systems & proposer's central processing unit	Yes	Yes	Yes
Company's policy on City dismissing charges	Decision to dismiss charges is at the discretion of City & MHR will do whatever the City requests.	RH Fire Chief required to submit to DMC Billing Service Inc in writing with any notifications of dismissing any charges.	Will comply w/ City's write-off policy & follow Chief's directives, but advise if compromises compliance w/ billing regulations.
Pre-Collection Activities	Importance to follow-up; diligently pursues unpaid claims through all available resources; works w/ private pay patients on payment arrangements; use of collection agency is up to client; MHR explores all other options & attempts to collect all payments due.	All accts audited; 24-hr bus day billing, followup 30, 60, 90 day intervals; rebilling, appeals & claims handled in positive collection technique. Reporting monthly all activity	Follow up w/ private pay & Ins billing in compl w/ State & Fed mandated billing procedures; private-pay find a solution for patients-filters & categorizes; follow-up; Global Connect Tech; estates & bankruptcies.
Outside collection agency	Can offer suggestions on various agencies used by other clients, but MHR does not decide which agency City should use.	Russell Collection Agency, Flint, MI 30% of monies collected; if legal action, bankruptcy or estate filings - 50% of monies collected.	Ann Arbor Credit Bureau, Ann Arbor MI

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Responsibility for all Fire Dept billing inquiries and retrieval of medical records bus day 8 am - 6 pm	Yes	Yes	Yes
Responsibility for all EMS consumer complaints and compliments by provide information to Fire Dept by following work day or electronically	Yes	Yes	Yes
Responsibility for maintaining all software	Yes	Yes	Yes
Guarantees ability to define Fire Dept-EMS specific general ledger accts for cash, accts receivable, gen adjustments, bad-debt write-off, etc.	Yes	Yes	Yes
Financial reports on a daily basis	Yes	Yes	Yes
Available standard reports attached	Yes	Yes	Yes
Custom Reports	MHR's software system & Sansio Health EMS can generate a host of custom reports. Generally there are no additional charges for providing these types of reports.	Charge Detail Report, Charge Type Summary Report, Credit As Type Summary Report, Daily Activities Report, Aging Detail Report, Aging Summary by Current Payor, Pymt Credits by User, Payor Summary	3 reporting solutions: Zoll Data System Rescue-Net Billing; eMedic Reports & Ad Hoc Reporting. Zoll - 115 reports & Ad Hoc; eMedic 58 standard reports & Ad Hoc-customized. Web Portal availability
Guarantees Fire Dept will receive docs on procedure changes relating to Medicare B, Medicaid of MI & other commercial/individual ins carrier changes	Yes	Yes	Yes

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Monthly percentage of collection fee schedule is inclusive of all business costs including, personnel, stmts, envelope & return mail envelopes, HCFA 1500 claim forms, electronic clearinghouse service fee and postage.	Yes	Yes	Yes
Recovery from a default by proposer during contractual period using medical accounts receivable software	All data stored off-site so easily re-created. Reports can re-create all information; All staff can perform all aspect of billing process so any staff member can step in. Sansio Health EMS patient charting data can be re-created. MHR carries appropriate liability insurance.	Disaster recovery plan, including staff reductions utilizes Carbonite back up system to provide off site back up of billing data and demonstrate their data security process, in house daily backup. Operation Disaster Recovery Plan is DMC Billing Service Inc overall responsibility	Never defaulted or terminated for cause in 23 yrs. City will have detailed historical reports & data sufficient to manually restore records to continue operations. Zoll & RescueNet software available on open market for purchase. EPCR-delivery of DVD/pdf file for each incident delivered to RH
PRICING:			
Monthly percentage of amount collected	5.70%	4.75%	6%
		Electronic submission/paper run forms	
		Field data capture submission (software/hardware + web based)	
		Image Trend Seat License 6 units @ \$1000	
		\$6,000	
		Image Trend License Support 6 units @ \$400=\$2,000/annually	
		Training 1 unit \$ 440.00	
		\$400 Pre-Registration Fee to DMC Billing Serv	
Costs for additional services	No additional costs	Russell Collection Agency Image Trend Software and interface and training for EMT Personnel	From time to time eMedic Reports introduces optional "add on" tools, which at the sole option of the City may be purchased, outside of the scope of this contract.
Equipment/Programs & Costs for more efficient EMS services	Sansio Health EMS patient charting software provided to City at no additional costs to City.	Image Trend Proposal: Field Data Collection License Field Bridge (\$1,000) and Field Data Collection License Annual Support (\$400.00) 1st Year \$1,400.00; After 1st Year \$400/year	

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ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Charges for start-up, installation & conversion of existing accounts receivable & all new business commencing with this contract	No start up costs. Hardware costs would be responsibility of City. Conversion of existing accts would be treated individually as charges would depend on effort involved for actual billing & follow up. New business would be billed to City monthly based on agreed rate.	Image Trend License \$1000/per unit each Image Trend Support \$400/per unit annually Training Sessions-webinar 1 unit \$440.00 Mobile Concepts Technology - toughbooks	None
Any other fees/charges/not stated above	No other charges unless City requests something not in contract.	Image Trend software proposal	None
Administrative overhead fee for subcontracted services	No	No	No
Time required for completion of proposed services/ timeline	60 days. Gather demographic info. Medicaid 1-2 wks; BCBS 1-2 wks; Medicare-60 days; Commercial ins-immediately; Private Pay-Immediately	6-8 weeks Medicare 6-8 weeks Blue Cross/Blue Shield 2-4 weeks Medicaid 2-4 weeks	All services required under this contract are in full production and producing high level results.
TECHNICAL INFORMATION:			
PROJECT Manager/Primary Contact(s)	Connie Clearly	Primary Contract: Darlene Collings Accts Receivable: Deborah Barnes Image Trend Julie Kaufman-Boom	Primary Project Mgmt Contact: Ned Suddendorf Primary Billing Contacts: Johnson & Coleman EPCR Contract: Zakrzewski & Masters
Credentials	Masters in Public Admin, CPE hrs in billing seminars, MHR since 2007	Project Manager: Darlene Collings 18 years ambulance billing experience	Ned Suddendorf, VP, COO 29 yrs-champion of public sector EMS/Fire Operations & consults w/ EMS/Fire providers
Ambulance billing, accts receivable & web-based electronic patient care reporting experience of project manager for EMS billing services	30 years medical billing and accounts receivable experience; 15 years experience using web based electronic patient care reporting.		Ned Suddendorf, VP, COO-29 yrs health care billing & collection industry; 15 yrs w/ AccuMed. Oversees operations & client service initiatives. Coleman-Dir of Operations-24 yrs exp Masters-Chief Information Officer-technology initiatives; Accumed since 2007 Johnson-Dir of Client Services, Compl Officer since 1991 Zakrzewski, Tech Supprot Supervisor, 12 yrs

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Certified Coders; Number of employees focused on EMS billing	MHR only provides EMS billing so 100% of MHR resources are focused on EMS billing. MHR employees (2) would be assigned to acct & both are certified coders through Nat Academy of Ambulance Coders.	No certified coders at DMC Billing Service Inc. Three ambulance billers. State of Michigan does not require a certified coder.	18 certified coders- list provided
Uniquely qualified to provide Fire Dept EMS medical billing services	Amb billing services for 14 yrs mostly to municipalities; do best to increase revenues for cities; working w/ EPCR software for 5 yrs; never lost a client unless client stopped providing EMS services; every client who switched to us from another billing service has always commented on the fact their revenues have increased since MHR took over their billing	In business for 18 years; provides prompt, efficient claims submission; process claims within 24 hours. Uses a check and balance system to ensure all claims are properly processed.	Extensive relative experience managing full services pre-dispatch through final billing needs of RH. Every requirement in RFP in production & producing desired results; partnership w/ AccuMed Web; positive exp-extension of City; 9 yrs of database for RH; all coders are certified, consultation services, compliance; industry leading result to EMS community; active in fire & govt assns; endorsed by MI Fire Chief Assn
Clients	Huron Valley Ambulance Alpena Fire Department Oceana County EMS Personal Care Ambulance Transport Alcona County EMS	Otsego County Ambulance, Gaylord MI East Jordan Ambulance, East Jordan MI Mayville Ambulance Faithorn Rescue Squad, Vulcan MI Sims Chiropractic Wellness Center, Cadillac MI	Rochester Hills Fire Department since 2003 W Bloomfield Twp Fire Dept since 2003 Southfield Fire Dept since 2005 Roseville Fire Dept since 2004 Harrison Twp Fire Dept - since 1992
Customers who terminated services	Sister Lakes Fire Dept, Dowagiac, MI	ACW Ambulance, Unionville MI	Valparaiso Fire Dept (Indiana) 2007-2011 Garden City Fire Dept (2001-2011)
Current Client List:	Not Provided	List of Three clients	Not provide due to FOIA

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Description of firm, its organization, size and nature of general services, location of office facilities available	14 yrs in business in Lansing-manage costs, improve service quality & establish comprehensive information systems, reduced costs & increased revenues; highly trained staff; wks to provide up to date changes in industry, confidentiality of utmost importance, specializes in ambulance billing only; Sweet Amazon Ambulance Billing Software Programs; average days in accounts receivable- 75 days; all those impacted must be trained for overall compliance program; toll free number.	Client List	Michigan based nationally represented EMS billing, consultation & software solutions leaders w/ 23 yrs exp, effective proprietary billing processes & cust service excellence to EMS/Fire industry; incorporated 1989; perfect record of full compliance; Locations in Brownstown, Det, Ann Arbor; 350,000 patient care reports on behalf of 165 clients in 6 states w/ 124 in Michigan (15 Oakland Cty, 11 Mac Cty, 20 Wayne Cty muni EMS/Fire Depts); 67 highly trained EMS billing professionals committed & focused exclusively supporting EMS/Fire systems.
Special equipment	MHR's utilizes 3 computer servers; primary server is used for billing, secondary is back-up & third is CITRIX network server	Image Trend Software	Hardware inclusion is available through AccuMed Group.
Software supplier for web-based electronic patient care reporting system used & its version; Percentage of resources associated with EMS Billing clients	Amb billing software is TriTech ver 5.6 & patient charting software is gold compliant Sansio Health EMS software ver v3.96 offered to City at no charge. Both versions are most recent updated version. 100% of MHR resources are devoted to EMS billing	Image Trend Software 75%	Continued use of eMedicReports Version 4.0 through affiliate company AccuMedWeb to manage City's electronic data capture initiative. NEMESIS 2.2.1 Gold certified; 100% of all AccuMed resources are associated w/ EMS billing clients.
Recommended hardware; safeguard & protections and backup process	Raid 5 servers used w/ multi hot swappable drives w/ nightly backup. All data backed up daily & moved to offsite storage wkly. All data requires multi levels of passwords, changed every 30 days. All employees sign Confidentiality Agmt & Bus Associates Agmt	Utilizes Carbonite back up systems to provide off-site backup of billing data and demonstrate their data security process. Plus in house daily backup.	Panasonic Tough Books loaded w/ EPCR solution; mobile printers; web-based solution. 3 bus locations and 2 separate data ctrs; all interfaces & electronic data is fully encrypted & secured through transaction codes & privacy & security measures; network security-managed firewall services from Paetec .
Patient statements	Patients receive private billing generated from MHR billing system. Bills contain a complete stmt of services rendered; paymts received & amount due w/ an addressed envelope for sending in payments. Patients receive 5 stmts as well as telephone contact.	Statements are generated at a 30, 60, 90 day cycle. Statement attached.	Private Pay statements cycles every 30 days until 3-4 statements are delivered. Include ins questionnaire; email/fax, return envelope 800 number, credit card payment options.

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Recovery from default	All data stored off-site so easily re-created. Reports can re-create all information; All staff can perform all aspect of billing process so any staff member can step in. Sansio Health EMS patient charting data can be re-created.	RH would have access of all claims processed by DMC Billing Service Inc., by password protected VPN. This would allow them to view any claim. DMC Billing Service would provide any necessary reports needed.	Full contract compliance-have never defaulted. Billing-City will have detailed hist reports & data to manually restore records to continue operations & software is available on open mkt. EPCR: PDF file/DVD
Recovery if software vendor stopped doing business	City given all info & history of what was done. A new software vendor would be found immediately. Should MHR stop doing business RH given 30 days notice to allow time to find a new billing company.	Uses Genius Solutions Software in business over 25 yrs & located in Michigan. They are recommended by BCBS of Michigan. RH would have access to DMC Billing Service Inc password protected server where all docs are saved.	3 bus locations and 2 separate data ctrs; all interfaces & electronic data is fully encrypted & secured through transaction codes & privacy & security measures; network security-managed firewall services from Paetec .
Document imaging	Health EMS utilizes a scanner program so patient documents, PCS forms, etc can be attached to the EPCR along with run sheets.	DMC Billing Service Inc is paperless, all faxes go directly to computer on server, which is password protected and also saved offline at Carbonie. RH can have access through VPN (Virtual Private network).	Primary access to data through eMedicReports Data Ctr secure (Tier Level III) & stores all data collected through eMedic Reports, including all scanned images the City attaches to incident records. AccuMed converts most manual records & EOC's to status electronic images, which are used internally in support of billing operations. These same images could be made available to the City.
On-site training	Will provide onsite training for Sansio Health EMS patient charting software and ongoing feedback on documentation requirements as well as HIPPA changes and regulations.	Will train staff to make sure they are up to date with rules and regulations of HIPPA & correct documentation being done.	On-Site report run training and consultation including onsite mtgs, compliance reviews, analysis, recommendations, budget support, technology, reporting & monitoring tools
Audit system	City access to aging reports. Aging is worked every month and any call not paid within 30 days is thoroughly reviewed to determine why not been paid. MHR can create any type of report that city desires to assist city in monitoring services. Each month, a random colleciton of calls are followed through from entrance into MHR billing system to final payment for each client.	Audit will be available through access w/ VPN, password protected server and through DMC Billing reporting system.	eMedicReport (EPCR) City maintains 365/7/24 Reports to monitor billing effectiveness. Provide City w/ real time access to dedicated Patient Acct Serv Rep & Client Service staff. Accountability, Admin Cost Reduction, Revenue Optimization, Full Compliance, Patient Care Focus, Manageability, Customer Service=results for RH

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NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Composition of firm's commitments, including volume and size, number of transactions. Percentage of total volume.	MHR send out 150,000 claims per year. Clients range in size from 7000 calls per month to 10 calls a month. Due to client confidentiality cannot release client individual call volume or percentages.	Otsego County Ambulance, 3200 runs per year population 24,164 Harris Eye Care 846 patients per year North Lapeer Counseling Center 1578 patients per year	In 2011 AccuMed Group process in excess of 350,000 patient care reports on behalf of 165 clients in 6 states, including 124 in MI (15 Oakland Cty; 11 Mac Cty; 20 Wayne Cty muni EMS/Fire Depts)
Normal billing procedures from receipt of run report to final collection	Runs are billed within 72 hrs of entry into MHR billing software. Electronic billing sent daily; payment posted upon arrival at MHR; Secondary and/or Tertiary ins billed upon receipt of primary payer payment. Patients are billed when appropriate the same day ins payment are posted.	Claims entered within 24 hrs; Hosps contacted for patients w/o insurance, validate coverage w/ Medicaid, if none contact patients; process claims, 20th of month stmts processed, wk prior patients called for pymt plans; 3 stmts at 30, 60, 90 days w/ final notice; at 120 days re-checked through MI Medicaid System, then sent to Russell Collection Agency	Claim submission; Claim submission processed then either payment received & posted; Denial or Appeal - correction made & re-submitted or no coverage; Patient responsible Statement: 30 day; 60 days; 90 days; 120 days collections, all supplemented by telephone contact. All accts monitored at ea cycle change until paid, incl pymt arrangements
Capabilities to receive data from City electronically	Gold compliant Sansio Health EMS offered to all clients at no charge; will allow city to complete all patient runs electronically, send records to State & allow MHR to download all patient info; Can wk w/ ImageTrend or other EPCR software.	If RH uses Image Trend, DMC Billing Service Inc has an interface already written to their software, Genius Solutions. If not using Image Trend, Genius Solutions will write an interface.	Leveraged full benefits for integration to support all facets of billing process, including ability to send (submit) & receive (remittance) claims forms, vouchers & payment information electronically.
Capabilities to send data to insurance companies for payment electronically	Majority of claims are billed electronically. Use paper claims only when there is no option to send a claim electronically	Uses Blue Cross/Blue Shield EDI Clearinghouse	Electronic submission & remittance of claims & payment vouchers w/ all major ins carriers; electronic ins eligibility/verification
Billing/claim follow-up process	Monthly aging reports; anything not paid within 30 days followed up w/ phone call or checked on payer's website. Next steps based on what was found.	On 1st of month, does a delinquent claims report and calls all insurance companies over 30 days old.	Continually monitor aged A/R & engage ins carriers to render final pymt, including conversion of private pay accts to payable ins claims or resolution of account through pymt by patient. Monitor at 30 day intervals; contact carriers by phone, status requests at 45 days; contact hosps, ins carriers to info, transfer bal to private pay is no ins response
Samples of Reports	Charge and credit report are attached. Can create any type of report the City needs. Billing system creates reports & software uses SQL	Receive Image Trend through SQL and Genius Solutions written in Microsoft Access	Examples of reports from Zoll & eMedicReports provided. Ad hoc reporting is accessed through SQL database. Reports can be exported to XML file w/ report data, CSV, TIFF file,

REQUEST FOR PROPOSALS FOR AMBULANCE BILLING SERVICES AND WEB-BASED ELECTRONIC PATIENT CARE REPORTING (EPCR) RFP-RH-12-034
PROPOSALS TABULATION

NAME	Mobile Health Resources	DMC Billing Service Inc.	The AccuMed Group
ADDRESS	Lansing, MI	Columbiaville MI 48421	Brownstown MI
Gross percentage of collections			RH:
Overall Average Collection Rate	Overall Average Collection Rate 68%	Overall Average Collection Rate 93.4%	Overall Average Collection Rate 90.43%
Overall Percentage Sent to Collection Agency	Overall % Sent to Collection Agency:	Overall % Sent to Collection Agency: 6.6%	Overall % Sent to Collection Agency 8.88%
Overall Percentage Collected by Collection Agency	Overall % Collected by Collection Ag:	Overall % Collected by Collection Ag: 5%	Overall % Collected by Colleciton Ag: 10.94%
Percentage Uncollectable	Percent Uncollectable:	Percent Uncollectable:	Percentage Uncollectable: 2%
			Client Wide Overall Aver Collection 81.39%
			Client Wide Percentage Uncollectable: 9.61%
Credit Card Payments	Has credit card payment option. Credit card charges are responsibility of City.	Yes, use Square credit card program. Patient will directly contact DMC Billing Service Inc & there will not be any additional cost to RH	yes, preferred supplier is 5/3 Processing Solutions
Staff Profiles	C Clearly, Director of Billing Operations, MHR since 2007, Masters in Public Admin. D Cox, four clients, billing responsibilities C DeVoll, Medicare Specialist/Medical Biller, MHR since 2006. All work performed is electronic. Examples of employees work will be made available to City if MHR is a final candidate	D Barnes: 13 yrs ambulance billing D Collings: 18 yrs ambulance billing D Beckaman: 14 yrs ambulance billing	M Leonard, Pres, 23 yrs medical billing N Suddendorf, VI,COO, 29 yrs billing/collection K Coleman, Dir Operations, 24 yrs health care J Masters, Chief Info Officer, IT AccuMed 2007 T Johnson, Dir Client Serv/Compl Officer,1991 K Harvel, Client Services, Accumed since 2007 L Osorio, Nat Accts Supervisor, Accumed 1998 A Sheets, Statusing/Rejections, Accumed 2002 B Hill, Coding Supervisor, Accumed 1994 L Walsh, Patient Acct Collections, Accumed 1999 T Zakrzewski, Tech Support, Accumed 2000
Methods of Communication	Email, phone contact or fax		Meetings, phone, email, fax, mail, newsltrs, Accumed hosted seminars, as directed by City
Work Program	Software uploads runs directly to St of MI & records to MHR for billing purposes; directly interfaces w/ numerous fire record mgmt systems; billing, coding, followup ins/patient, appeals, deposit collections to City bank acct, generate reports, average days in A/R-75 days, training for compliance program		Full Service Medical Claims Mgmt Model: Pre-dispatch consultation; incident data delivery; ins verification; claim generation & submittal; private pay billing, payment application; claim review & follow up; Patient acct services; Pre-colleciton A/R; Reconciliation Services
Standard Contract	Contract Provided	Contract provided	Contract Provided
Billing Procedures	Clients are billed monthly		Invoice City on monthly basis using a PO number or any other data required by the City
Litigation during past 5 years	Information Provided	Information Provided	Information Provided
Insurance Requirements	Yes	Yes	Yes