



CITY OF PIQUA, OHIO

REQUEST FOR PROPOSAL (RFP) #2324

EMERGENCY MEDICAL SERVICE (EMS)  
BILLING SERVICES

July 18, 2023

Issue Date: July 18, 2023

Issued By: City of Piqua  
Purchasing Department  
201 W. Water St.  
Piqua, OH 45356

Inquiries: Deadline for questions is 8/4/23 at 4:00 p.m.  
Questions must be submitted in writing to [mclune@piquaoh.gov](mailto:mclune@piquaoh.gov)  
Ms. Melissa Clune, Administrative Assistant  
Piqua Fire Department  
229 W. Water St., Piqua, OH 45356  
Phone: 937-778-2013

Proposals Due: August 18, 2023 at 2:00 p.m.

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### **1. Introduction**

The City of Piqua Fire Department is a full-time career department providing fire and EMS services to the City of Piqua, Washington Township and Springcreek Township. The jurisdiction is approximately 56.9 square miles with a population of 24,137. We operate all emergency services out of one station located in the heart of the downtown and have four (4) Advanced Life Support (ALS) transport units. All personnel are dually trained as Firefighter Level II and Paramedic. In the first six months of 2023, the department transported 1240 patients; over half of these patients are transported to Upper Valley Medical Center (See Exhibit A).

### **2. Purpose**

The purpose of this Request for Proposal (RFP) is to inform the private sector of a potential business opportunity to provide the City with medical billing services to facilitate billing and accounts receivable activities for the City of Piqua Fire Department. Sealed proposals are requested by the City of Piqua for a Third Party Administrator (TPA) to provide Emergency Medical Service billing services for the City. The TPA will provide professional and technical

assistance in connection with the operation and maintenance of the program. The system shall be integrated with the current EMS Software System – ESO Solutions, Inc. The successful TPA will cover the annual maintenance fees for the EMS Software System – ESO Solutions, Inc. Work shall include, but not be limited to, comprehensive billing and collection services, database administration, record keeping, customer service, training and documentation, and preparation of financial and management reports.

### **3. Objective**

The City's objective is to solicit proposals for medical billing services from qualified service providers in accordance with this RFP. Following review and evaluation of all proposals, it is the City's intent to award a contract to the service provider that can provide the best medical billing services and support system for the City of Piqua Fire Department's current and future needs.

The following specifications outline the minimum requirements of the proposed service. They are provided to assist offerors in understanding the objectives of the City and preparing a thorough response. Proposals received should reflect in detail the inclusion of these minimum requirements and the degree provided. Offerors may propose methodologies which meet the "spirit" of the listed requirements, but shall clearly note any exceptions to the minimum requirements.

Offerors shall provide medical billing services which:

1. Provides an SAS 70 Certified audit system designed specifically for EMS accounts, so all information is made available to the City to monitor billing activities and accounts receivable at the discretion of the City of Piqua Fire Department.
2. Provides on-site training for City EMS providers and administrators.
3. Provides the necessary means to interface daily between EMS software systems and the vendor's billing system electronically. The system must be able to handle three separate billing jurisdictions inside of one entity and provide accumulative and separate individual reports for all jurisdictions. The system must be able to receive electronic EOB's from insurers.
4. Guarantees daily document retrieval through a lock-box arrangement with the City's banking institution to facilitate daily posting of revenue to patient accounts. This account must be balanced monthly.
5. Accepts responsibility for all EMS consumer complaints and compliments by providing this information to the City of Piqua Fire Department administration in an expeditious manner.
6. Accepts responsibility for all EMS consumer billing inquiries and retrieval of medical records on normal business days from 8:00 a.m. to 5:00 p.m. EST/EDT via phone and

email. Voicemail & email messages must be returned within 24 hours of receipt on normal business days and within 96 hours if over a weekend.

7. Provides an internet portal solution for the distribution of all client reports (standard reports as well as customized reports.) Monthly reports of both billed and unbilled amounts must be available by the tenth of the following month. Annual reports must be available for audit confirmations.

Accurate monthly reporting shall include the gross charges billed for the month minus contractual allowances, write-offs (abatements, dismissals, bankruptcies and settlements), refunds, payments and indigence costs of care rolling up to the net ending accounts receivable balance due. Include on this report the number of trips per month, number of patients per month, gross charges per trip, cash collected per trip and net collection percentage per trip.

8. Has proven experience with the acceptance of credit cards and debit cards for customer payments.
9. Payment shall be made on a monthly percentage of collection basis. The percentage of collection fee will be based on actual revenue received less refunds on overpayments. Payment will be made to vendor within thirty (30) days from receipt of invoice. All refunds will be made with City check issued by the City except on electronic take backs.

All business costs (personnel, forms, postage, fees, etc.) shall be included in the monthly percentage of collection fee. The successful offeror will also be responsible for all upfront costs associated with the ESO Solutions, Inc. software, maintenance and support services for the five-year term of this contract, plus any renewal terms. These costs shall be built into the monthly percentage charged.

10. The billing service must handle all the Medicare and Medicaid certifications and re-certifications as well as credentialing with insurance companies for the City with the City's help.
11. The billing service shall use billing software that accepts electronic uploads of patient demographic data from the ESO Solutions, Inc. software. This electronic upload, accomplished through an interface between the vendor's billing software and ESO Solutions, Inc. shall electronically upload the minimum necessity patient treatment information to process claims. Software and services provided by ESO Solutions, Inc., have been utilized by the City of Piqua Fire Dept. and meets the needs of the department.
12. The City's Finance Department administers the Program. The Finance Department is responsible for accounting procedure issues as well as monitoring revenues and receivables. The Finance Director will decide upon approving proposed changes to the accounting policies and procedures that may occur during the term of the contract. The City only bills EMS runs which result in transporting a patient. Patients are mailed a minimum of one (1) bill and three (3) reminder statements for each use of EMS services.

All payments must be sent directly to the City's lockbox. Lockbox batches (copies of checks and the original EOB's) are delivered to or picked up by the TPA daily. The City will be the sole deposit agent for EMS runs. The City will provide weekly deposit reconciliations and the TPA must balance to same.

13. TPA shall maintain accounting policies that provide for assurance of accurate and timely billing. TPA shall arrange to access patient insurance information for billing purposes with transport hospitals utilized by the City. TPA to determine which runs are not billable, and whether or not billable runs are designated ALS1, ALS2 or BLS. TPA responsible for setting up the billable runs in TPA's system. Accounts shall be coded using current methods required by insurance carriers for medical claims. TPA to prepare and mail invoices to patients and third-party payers. Patients are mailed a minimum of one (1) bill and three (3) reminder statements to each use of EMS services. Billings to patients shall reflect the rates provided and approved by the City. All postage (including returned postage) shall be paid by the TPA. The City shall pre-approve any verbiage used on messages to patients on any statement. TPA to provide evidence statements have been mailed and accept liability for any fraudulent claims processed. TPA must be expert in the knowledge of data and forms required by Medicare, Medicaid, Blue Cross/Blue Shield, United Health Care, Welfare, Workers Compensation, and other medical insurance carriers relative to making claims and obtaining payment for those claims. TPA must be capable of sending claims to, and receiving payments from, the major insurance carriers electronically.
14. Provide a detailed time-line describing changing from one TPA provider to another for this program. This part of your proposal should cover, but not be limited to, the following challenges: transition timing, records keeping, data transfers, write-offs, allocating payments between old vendor and new vendor, technical products to aid the changeover and such other features as are necessary to ensure a successful transfer of responsibilities. In addition, explain in detail how the TPA receives demographic and health insurance information to process claims and identify subcontractors or additional services that are needed to complete a billing process.
15. Submit a copy of your written Health Insurance Portability and Accountability Act (HIPAA) compliant policy. Provide samples of monthly reports you will provide to the City.
16. Discuss your firm's experience and capabilities related to this project. This should include, but not be limited to, the length of time the firm has been providing EMS billing services and the type and volume of billing transactions your firm has handled for other clients. Include a minimum of five (5) references with contact names, addresses, phone numbers, and email addresses of the Fire Chief and Finance Director of the government entity similar in size to the City of Piqua. Please include the reference's number of runs and average revenue per run for the past two years. Also disclose three (3) communities and their contact information of which you are no longer working as their TPA. Identify all EMS transport billing clients that have terminated services with your company since January 1,



2021, including contact names and phone numbers, briefly explain the reason (s) for termination.

#### **4. Current Environment**

The current 2023 Fire Department budget is approximately \$6,410,342, and includes \$3,569,371 for personnel, \$615,796 for supplies and services, and \$535,400 for capital items. The Fire Department currently uses ESO Solutions, Inc. Software for completion and submission of all EMS reports.

The City's current medical billing services provider is Change Healthcare/McKesson and has used them since 2008. Our current fee rate is 4.9%.

The City only bills for "Soft Billing" which is described as EMS runs which result in a patient being transported to the hospital. No effort will be made to turn over the balance of any unpaid bill to a collection agency. Instead, such a bill would be written-off as an uncollectible bad debt after a predetermined number of attempts have been made via reminder billing statements, to collect the unpaid balance.

#### **5. Contract Term/Option to Renew**

The initial term of the contract shall be for a five (5) year period. The contract shall be from December 1, 2023 through November 30, 2028.

The contract may be renewed for two (2) additional one (1) year periods provided all terms and conditions remain unchanged and in full force and effect. The option to renew, if exercised, will be executed in the form of a renewal letter to be issued not sooner than ninety (90) days prior to the expiration of the contract, nor later than the final day of the contract period.

The award of any contract for 2023 and beyond is subject to appropriation of funds approved by The City of Piqua Commission.

#### **6. Response Instructions**

Each response should be submitted in a sealed envelope by **2:00 p.m. (local time) on Thursday, August 18, 2023** via hand delivery or postal mail to the:

**City of Piqua Purchasing Department  
Attn: Beverly Yount, NIGP-CPP, CPPB, Contract & Purchasing Manager  
201 W. Water St.  
Piqua, OH 45356.**

The outside of the envelope should be marked, **RFP #2324 EMS Billing Services**. Unnecessarily lengthy documents are discouraged. It is the sole responsibility of the offeror to see that their proposal is received in the proper time. Proposals received after the specified time will not be considered.

Adherence to the rules set forth in this RFP is mandatory to ensure a fair and objective analysis of all proposals. Failure to comply with or complete any portion of this request may result in rejection of a submitted proposal. Receipt of a proposal by the City or submission of a proposal to the City confers no rights upon the offeror nor obligates the City in any manner.

## **7. Proposal Content**

Proposals should include concise, but complete information about your company, emphasizing your method of approach for the project and why you believe your company to be uniquely qualified to provide medical billing services for the City. **The proposal should include the following:**

### **I. Organizational Background and Overview**

Furnish a cover letter that provides a history and overview for your company and the key staff positions that will be used in delivering and supporting medical billing services for the City of Piqua, if awarded. Note the employee's official title and responsibilities as well as their length of time employed. Identify the principal customer service representative that will be assigned to the City of Piqua.

### **II. Response Form/Price Form (Attachment A)**

Complete the provided Response Form/Price Form (Attachment A), in order to provide the City with information related to your company's responsiveness, suitability, responsibility, experience, capability and pricing.

### **III. Exceptions**

Should your company take exception to **any** of the minimum requirements or **any** of the terms and conditions identified in this RFP, a letter must be submitted with your proposal identifying **all** exceptions. Any exceptions will be part of the evaluation process. The City will not entertain any exceptions not previously submitted with the offeror's response, at the time of contract negotiations.

## **8. Contact with City Employees/Written Questions**

To ensure a fair and objective evaluation of all proposals, all inquiries are required to be submitted in writing to Ms. Melissa Clune, Administrative Specialist. Written inquiries (email preferred) must be received no later than 4:00 p.m. on August 4, 2023 to [mclune@piquaoh.gov](mailto:mclune@piquaoh.gov). Questions will be documented and an addendum will be issued with the City's responses. Such addenda will be emailed to all known RFP recipients and a copy will be posted to the City's website at [www.piquaoh.gov](http://www.piquaoh.gov).

## **9. Presentation, Demonstration & Interviews**

Selected offerors may be invited to make presentations to City Personnel. Representatives attending/hosting these presentations must be qualified to respond to questions related to any



component of the proposal. The offeror should be prepared to fully demonstrate any equipment and services identified in the proposal.

## **10. Review and Evaluation**

The City will use an evaluation team comprised of project stakeholders and other City personnel to review all proposals received as part of a documented evaluation process. The lowest price proposal will not necessarily be selected.

The sole purpose of the proposal evaluation process is to determine which service provider can provide medical billing services that represent the best value to the City (highest level of service and desired deliverables in the most cost-effective manner that most closely meets the City's needs.) The evaluation process is not meant to imply that one offeror is superior to any other, but rather that the selected offeror can provide the best medical billing services and support system for the Piqua Fire Department's current and future needs, based on the information available and the City's best efforts of determination.

The proposal evaluation criteria should be viewed as standards that measure how well a proposer's approach meets the desired requirements and needs of the City. The criteria that will be used to evaluate proposals may include, but are not limited to the following:

- Responsiveness & Completeness – the degree to which the offeror has responded to the purpose and scope of the specifications (includes conformance in all material respects to this RFP.)
- Suitability – the suitability of the offeror to fulfill the City's requirements.
- Responsibility – Offeror's ability, in all respects, to perform fully the contract requirements and the moral and business integrity and reliability which will assure good faith performance as required by these specifications.
- Experience & Qualifications – Offeror's experience in providing these services as requested in this RFP.
- Capability – Offeror's capability, flexibility and skill to perform the services stated in these specifications including creative alternatives and value-added services or technologies.
- Proposed Fee Structure – Efficiency and economy are very important to the City. Cost may not be the deciding factor in the selection process as other criteria factors are also considered extremely important.
- History of Compliance – Documented performance with compliance of industry accepted billing and standardized accounting practices.

The review committee will select the proposals which appear most beneficial. These vendors may be asked to provide a presentation to the review committee during the evaluation period. All costs associated with the presentation will be solely the responsibility of the vendor. No negotiations, decisions, or actions shall be initiated by any firm as a result of any verbal discussion with any City employee prior to the opening of responses to this document. The City reserves the right to select, and subsequently recommend for award, the proposal which best meets its required needs, quality levels and budget constraints.

## 11. Right of Refusal

The City reserves the right to reject all proposals in their entirety or to select certain aspects of a proposal. The City reserves the right to award a contract in any manner deemed in the best interests of its citizens.

## 12. Project Schedule

RFP Release Date	July 18, 2023
Deadline for Submission of written questions	August 4, 2023
Date of City Responses to above mentioned questions	August 11, 2023
Proposals Due	August 18, 2023 at 2:00 p.m. EST
Date to Complete Evaluation of Proposals	August 31, 2023
Date to Complete Interviews/Presentations	September 14, 2023
Firm Selection, Commencement of Contract Negotiations	September 22, 2023
Commission Approval	October 3, 2023

These are target dates and may be adjusted as needed by the City of Piqua.

## 13. Public Records

In entering into a contract with the City (or responding to a City solicitation), all offerors are hereby notified that all bids, proposals, quotations, RFI responses, agreements, invoices, correspondence and any other documents submitted to the City become public property and are subject to public disclosure in accordance with Ohio Public Records Law. All public records will be made available upon request, at the earliest time permitted by law.

Ownership of all data, materials, and documentation originated and prepared for the City pursuant to the RFP shall belong exclusively to the City and be subject to public disclosure in accordance with Ohio Public Records Law.

## 14. Compliance

The successful offeror shall observe and comply with all applicable laws, ordinances, and the rules and regulations of all authorities having jurisdiction over the City's contract for EMS billing services. The successful offeror shall comply, when applicable, with the U.S. Department of Labor, Safety and Health Regulations identified as Chapter XVII of Title 29, Code of Federal Regulations (CFR) Parts 1910 & 1926 and subsequent amendments.

The successful offeror agrees that in the hiring of employees for the performance of work under the EMS Billing Services contract, or a subcontract, no contractor or subcontractor, or any person acting on his behalf shall, by reason or race, creed, sex, handicap, or color, discriminate against any citizen of the State in the employment of labor or workers who are qualified and available to perform the work to which the employment relates, nor shall any contractor, subcontractor, or any person acting on his behalf, in any manner, discriminate against or intimidate any employee hired for the performance of work under the EMS Billing Services contract on account of race, creed, sex, handicap, or color.

## **15. Non-Waiver of Rights**

No failure of either party to exercise any power given to it hereunder or to insist upon strict compliance by the other party with its obligations hereunder, and no custom or practice of the parties at variance with the terms hereof, nor any payment under this agreement shall constitute a waiver of either party's right to demand exact compliance with the terms hereof.

## **16. Indemnification/Insurance**

To the extent authorized by law, the successful offeror shall indemnify and hold harmless the City of Piqua, its officers, elected officials, agents and employees from and against all claims, damages, losses and expenses including attorney's fees arising out of or resulting from the successful offeror's performance, provided that any such claims, damage, loss or expense is attributable to bodily injury, sickness, disease or death, or to injury to destruction of tangible property, including loss of use resulting there from; and is caused in whole or in part by any negligent or willful act or omission of the successful offeror, subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable.

If the successful offeror is required to go on City property to perform work or services, the successful offeror shall assume full responsibility and expense to obtain all necessary insurance as required by the City.

## **17. Legal Responsibility**

By accepting a contract with the City, the successful offeror certifies that in performing the City's contract they will comply with all applicable provisions of the federal, state and local laws, ordinances, rules and regulations. Lack of knowledge by the successful offeror shall in no way be cause for relief from responsibility.

## **18. Relationship of the Parties**

The relationship between the parties to a contract resulting from this solicitation shall be that of independent contractors. Nothing contained herein shall be interpreted or construed as establishing an agency or employer/employee relationship between the parties or between either party and the employees or representatives of the other party. The successful offeror is responsible for all Social Security taxes and Bureau of Worker's Compensation contributions for itself and any of its employees.

## **19. Assignment**

Neither the successful offeror nor the City shall, sell, transfer, assign or otherwise dispose of the contract or any portion thereof, or of their right, title or interest therein, or the obligation there under, without written consent of the other party.

## **20. Tax Exemption**

The City is exempt from Federal and Ohio State sales tax. A tax exemption certificate will be made available at the successful offeror's request.

## **21. Income Tax**

When performing work within the City, the successful offeror will be required to withhold all City income taxes due or payable under the provisions of the Income Tax Ordinance, for wages, salaries, and commissions paid to employees and further agree that any subcontractors shall be required to agree to withhold any such City income taxes due under said chapter for services performed.

## **22. Remedies**

The City shall have all rights and remedies afforded under the Universal Commercial Code and Ohio law in contract and in tort, including but not limited to rejection of goods, refund, incidental, consequential and compensatory damages and reasonable attorney's fees.

## **23. Termination**

The City reserves the right to terminate any contract resulting from this solicitation in whole or in part for default (termination due to the successful offeror's failure to perform satisfactorily) or convenience (termination due to the best interests of the City). After ten (10) days from delivery of a written notice to the successful offeror, the City may, without cause and without prejudice to any other right or remedy, elect to terminate the contract. In such case, the successful offeror shall be paid for work executed, goods delivered and accepted, and any expense sustained plus reasonable profit, unless such termination was due to the act or conduct of the successful offeror.

## **24. Warranty**

The successful offeror warrants to the City that all goods and services furnished will conform in all respects to the terms of the City's RFP, including any drawings, specifications or standards incorporated into the City's RFP. Successful offeror further warrants that all goods and services are free from defects in materials, workmanship, and defects in design. In addition, successful offeror warrants the goods and services are suitable for and will perform in accordance with the purposes for which they are intended.

## **25. Expense of Preparing Responses to this RFP**

The City accepts no responsibility for any expenses incurred by the responders to this RFP; including cost associated with RFP responses and presentations. Such expenses are to be borne exclusively by the responders.

## **26. Items that Disqualify a Vendor Immediately**

- Incomplete or non-responsive proposal
- Inability to accept EMS run data from City electronically
- Inability to process insurance claims to carriers electronically
- Inability to implement billing system by 12/1/23

### **Bidders List:**

1. Ambulance Billing  
Jim Pristas [james.pristas@ambulance-billing.com](mailto:james.pristas@ambulance-billing.com)  
937-423-5565
2. Quick Med Claims  
Jeffrey Kelly [jkelly@quickmedclaims.com](mailto:jkelly@quickmedclaims.com)  
412-655-0344
3. Ohio Billing  
P.O. Box 515  
Bolivar, OH 44612
4. Life Force Management  
800 Enterprise Parkway  
Ravenna, OH 44266
5. MedBill Resources Corp.  
[medbill@medbillcorp.com](mailto:medbill@medbillcorp.com)
6. Change Healthcare  
Amy Eckhardt [amy.eckhardt@changehealthcare.com](mailto:amy.eckhardt@changehealthcare.com)  
937-260-5118
7. Medicount  
Glenn Goodpaster [ggoodpaster@medicount.com](mailto:ggoodpaster@medicount.com)  
513-225-6613
8. AccuMed EMS Billing  
Kate Melasi [kate@theaccumedgroup.com](mailto:kate@theaccumedgroup.com)  
810-625-8628

## Proposal Form – Attachment A

The undersigned proposes to furnish, The City of Piqua Fire Department, 229 W. Water St., Piqua, OH 45356, EMS Billing Services:

Fee for Specified Work: (specify below)

_____	\$ _____
_____	\$ _____
_____	\$ _____

Premiums: (specify below)

_____	\$ _____
_____	\$ _____
_____	\$ _____

Commission(s) for Specified Work: (specify below)

_____	\$ _____
_____	\$ _____
_____	\$ _____

Hourly Rate(s) for Specified Work: (specify below)

_____	\$ _____
_____	\$ _____
_____	\$ _____

Other Pricing: (specify below)

_____	\$ _____
_____	\$ _____
_____	\$ _____

Proposal Signature: \_\_\_\_\_

State of \_\_\_\_\_, County of \_\_\_\_\_

\_\_\_\_\_, being first duly sworn on oath deposes and says that the Contractor on the above Proposal is organized as indicated below and that all statements herein made on behalf of such Contractor and that their deponent is authorized to make them, and also deposes and says that deponent has examined and carefully prepared their proposal from the Contract Specifications and has checked the same in detail before submitting their Proposal; that the statements contained herein are true and correct.

Signature of Contractor authorizes the City of Piqua to verify references of business and credit at its option. Signature of Contractor shall also be acknowledged before a Notary Public or other person authorized by law to execute such acknowledgements.



\_\_\_\_\_  
Organization Name  
(Seal if Corporation)

By: \_\_\_\_\_ Dated: \_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Notary Public  
(Seal)

## **Proposal Form – Attachment B**

### **The City of Piqua EMS Billing Services RFP #2324 Due August 18, 2023 at 2:00 p.m.**

The undersigned hereby certifies that items furnished as a result of this proposal will be in full accordance with the City of Piqua specification applying thereto unless exceptions are stated above.

The Proposer's name and address exactly as it would appear in a contract:

Entity Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Proposer's phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Proposer's email address: \_\_\_\_\_

Federal identification number: \_\_\_\_\_ (include a copy of your IRS Form W-9)

If a corporation, state of incorporation: \_\_\_\_\_

By signing this page, you state that you are an authorized representative, and have reviewed and are presenting this proposal on behalf of your business entity.

Signature: \_\_\_\_\_

Printed name and title: \_\_\_\_\_

Date: \_\_\_\_\_

Company's Primary Business – State the proposer's primary business, the number of years in the industry, and the number of employees assigned to these related activities:		
Primary Business	Number of Years	Number of Employees Assigned
Any Previous Names Company has operated under:		

Current pending lawsuits: Please provide any and all suits including, but not limited to Federal, State, Local or other Municipalities and Governmental Agencies:

**Local office of Proposer: Office nearest to Piqua, Ohio :** \_\_\_\_\_

**Key Personnel:**

Name	Title	Contact Information: address, phone, email	List # of years with company	Designated as primary contact for City of Piqua? Yes/No

### References for Proposing Company:

List company names, addresses, telephone numbers, email addresses for at least three references presently served by your company for RFP #2324. Do not use the City of Piqua as a reference.

#### Reference #1

Company Name	Address	# of runs	Average revenue per run
Name of Finance Director	Email Address	Phone #	
Name of Fire Chief	Email Address	Phone #	

#### Reference #2

Company Name	Address	# of runs	Average revenue per run
Name of Finance Director	Email Address	Phone #	
Name of Fire Chief	Email Address	Phone #	

#### Reference #3

Company Name	Address	# of runs	Average revenue per run
Name of Finance Director	Email Address	Phone #	
Name of Fire Chief	Email Address	Phone #	

### Proposed Pricing Structure:

The City requires the TPA to begin receiving, processing and billing data as of December 1, 2023. Proposed fees are to be firm through November 30, 2028 with two (2) additional 12 month options to renew at the sole discretion of the City of Piqua.

The City of Piqua is open to considering various types of fee structures. If more than one option is offered, the options must be clearly defined. Currently, the City pays a flat fee based on percentage of Collected Revenue.

### Billing & Collection Fees:

The City will have firm pricing through 11/30/28 with two (2) additional 12-month options to renew.

- ❖ Contract 12/1/23 through 11/30/28    \$ \_\_\_\_\_ or \_\_\_\_\_ %
- ❖ 12/1/28 through 11/30/29                \$ \_\_\_\_\_ or \_\_\_\_\_ %
- ❖ 12/1/29 through 11/30/30                \$ \_\_\_\_\_ or \_\_\_\_\_ %

**Other Fees:** All other fees not included in the pricing above shall be listed in same format as above on a separate sheet referencing supplemental pricing.

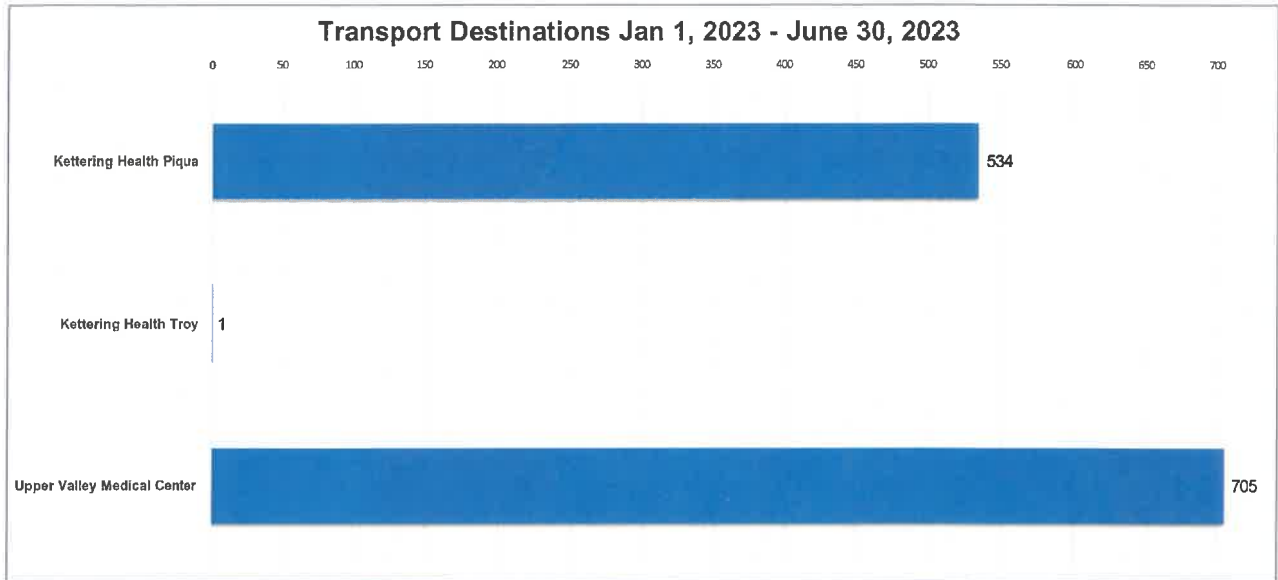
## Proposal Checklist

Each Proposer should make sure the following items are included in their submittal.

Documentation Required	✓ If Included
3.1 SAS Certified Audit System	
3.2 On-site Training	
3.3 Electronic Interface of EOB's, Handle 3 Jurisdictions	
3.4 Daily Posting of Revenue	
3.5 Accepts EMS complaints and compliments	
3.6 Customer Service inquiries	
3.7 Internet portal solution and sample reports	
3.8 Credit card experience	
3.9 Collection fee	
3.10 Certifications	
3.11 Software accepts ESO Solutions, Inc. software	
3.12 Weekly reconciliations	
3.13 Accurate and timely billing	
3.14 TPA transition process	
3.15 HIPAA compliant policy	
3.16 Firm experience and capabilities	
3.17 Audit, lawsuits, terminated clients	
3.18 Record retention	
3.19 Breach of information	
3.20 Cover letter and include Attachments A & B (all pages)	
3.21 IRS W-9 form	
3.22 One (1) original and Five (5) copies of your proposal	



# Exhibit A



	Jan '23	Feb '23	Mar '23	Apr '23	May '23	Jun '23	Total
Kettering Health Piqua	101	99	69	83	91	91	534
Kettering Health Troy		1					1
Upper Valley Medical Center	116	108	128	129	113	111	705
Total	217	208	197	212	204	202	1,240

