

**Request for Proposal**  
**Town of Goffstown, New Hampshire**



**Fire Department Ambulance Service**  
**Accounts Receivable Management Services**

**PROPOSALS DUE DATE/TIME: MARCH 22, 2012 - NOT LATER THAN 2:00 PM**

**February 2012**

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## **Ambulance Service Accounts Receivable Management Services**

### **1.0 PURPOSE**

The Town of Goffstown Fire Department, hereinafter referred to as “GFD” or “Town”, will contract with a selected firm for Ambulance Service Accounts Receivable Management Services “ASARMS”. The successful proposer will be expected to begin performance of the tasks mandated by the contract 90 days after the date the agreement is signed.

Interested proposers are invited to submit a proposal and credentials outlining their qualifications to provide these services to the fire department EMS of a growing New Hampshire municipality. The Town of Goffstown wishes to entertain proposals from firms with proven experience implementing electronic patient care record collecting and billing systems within the last three (3) years with EMS transport agencies that transport in excess of 10,000 patients.

Proposers with proven experience in like and similar EMS systems to the Town of Goffstown will have a higher probability of success with the implementation, efficiency, productivity and reimbursement percentages.

The proposal should clearly define how the firm plans to satisfy the requirements of the Town. This written Request for Proposal (RFP) states the scope of those requirements and specifies the general rules for preparing the proposal that is submitted. The terms “vendor” and “bidder” are used interchangeably to refer to the proposing party.

The Ambulance Service Accounts Receivable Management Services shall conform to the most current standards and requirements set forth by the Centers for Medicare and Medicaid Services (CMS), and the Health Information Portability and Accountability Act.

The proposer shall point out any discrepancies in the document that violate any Federal or State government requirements or discrepancies that they feel will be detrimental to the Town of Goffstown.

**Proposers are advised that the General Conditions section of the specifications will be evaluated before the Technical specifications. Proposals that do not comply with our General Conditions, insurance, delivery, proposers qualifications, service requirements will be immediately deemed non-responsive and shall be immediately rejected without further review of the technical specifications.**

## 2.0 COMPETITION INTENDED

It is the Town's intent that this RFP shall permit competition. It shall be the proposer's responsibility to advise the Town in writing if any language, requirement, specification, etc., or any combination thereof, inadvertently restricts or limits the requirements stated in this RFP to a single source. Such notification must be received by the Originator not later than ten (10) days prior to the date set for proposals to close.

## 3.0 GENERAL CONDITIONS

1. The Town reserves the right to accept or reject any, and/or all proposals, wholly or in part, and/or to waive formalities if it is considered in the best interest of the purchaser to do so.
2. The selected proposers must demonstrate an active compliance program that meets or exceeds CMS and HIPAA by providing a copy of their CMS and HIPAA compliance programs including the results of tests results and staff member initial and continuing education in HIPAA and CMS compliance.
3. Descriptive Material: Descriptive material inclusive of plans, policies, procedures, standard operating guidelines, vendor contract relationship, sample reports, communications documents, bills, late notice statements, warranties, that will enable the purchaser to determine the exact quality, design, and understanding of the proposers proposal shall accompany the proposal.
4. Each proposer is required to provide a complete and accurate description of their own services along with any required software and hardware specifications. These specifications shall be in the same sequence as the **SPECIFICATIONS** for ease of comparison. Any proposal not in this sequence will be disregarded and rejected. Each proposers shall provide a detailed description of the services provided, the software and internet connectivity which they propose to use/furnish to establish a safe compliant conduit for the electronic exchange of protected information.
5. Vendor Liabilities: The proposers receiving the award shall defend any and all suits and assume all liability for any and all claims made against the purchaser or any of its officials for the use of any patented processes, devices, or articles utilized in fulfilling the proposal requirements.

6. The Town is exempt from the payment of Federal Excise Taxes and State Sales Taxes and such taxes must not be included in the quoted price. The Town will submit a Tax Exempt Form upon request.
7. All prices and delivery times quoted must be firm as described in the proposal response. All proposals must be delivered to the Purchasers business address no later than 2:00PM (EST) March 22, 2012.
8. No contract will be awarded except to responsible proposers capable of providing the services outlined and achieving the identified expected results. Before the award of the contract, the proposers may be required to show they have the requisite facilities, experience, ability, security and backup relationships in place to successfully manage this engagement.
9. The proposers shall have a record of performing Ambulance Service Accounts Receivable Management Services in the medical transportation/health care arena for no less than 3 years, managing a gross volume of \$10 Million of Claims annually.
10. The proposers shall submit copies of all back up policies, relationships, subcontractor agreements for equipment, materials, software and hardware utilized in fulfilling this contract.
11. The specifications as detailed under the section **SPECIFICATIONS**, as well as the **GENERAL CONDITIONS**, shall constitute a valid part of the signed contract.
12. It shall be noted that the Town is seeking a service that closely matches the attached specifications. Extensive time has been put into preparing the attached specifications as they relate to the needs of the Town.
13. Specifications contained herein are considered minimum.
14. The following specifications describe an Ambulance Service Accounts Receivable Management Services suitable to support the Purchasers goal of fiscal stability. The specifications are intended to provide a common standard to which all parties may propose. For this reason the proposers must respond to each individual item by indicating: **“YES”=COMPLY or “NO” = DO NOT COMPLY.**

15. The YES/NO space below must be fully and accurately completed in order to be considered responsive. The proposers must indicate compliance by marking a (X) in the parenthesis provided.
16. Any exceptions, variations, deviations and clarifications to these specifications must be set forth on an attached sheet entitled “**EXCEPTIONS TO THE SPECIFICATIONS**”. They should include the page number and description as they are referred to in the proposal specifications. The Town will evaluate each exception taken. The Town reserves the right to accept or reject each exception taken as it applies to specified item(s). If no exceptions are indicated and the department accepts the proposal, the service must be provided exactly as specified.
17. A sample of the vendor’s service contract shall be included with the proposal.
18. The proposer shall provide a certificate of insurance that provides errors, omissions, fraud, and corporate liability insurance at an amount equal to or greater than \$3 Million per occurrence with an aggregate of no less than \$10 Million.
19. Proposers must submit a copy of a current “Certificate of Good Standing” from the Secretary of State in which the proposers is based.
20. Certificate of Non-Collusion: Each proposal shall include a Certificate of Non-Collusion, signed by the same officer of the proposers who will sign the Service Contract.
21. References: Proposals will only be accepted from vendors located in the continental United States who have an established reputation of permanency and reliability in the field of Healthcare/ Ambulance Service Accounts Receivable Management Services. Each proposers shall furnish satisfactory evidence of their ability to provide the services as specified. Proposers must list 4 healthcare organizations of similar or greater size using a similar service as proposed including the names, addresses and phone numbers of a contact person at each.
22. By submitting the proposal, the Proposers certify that they fully understand all the requirements included in the proposal terms and specifications and that they are fully informed as to the nature, scope, and time frame of the type of service to be provided.

23. AWARD CRITERIA:

**General Criteria:**

Required Document Review establishing credible evidence of compliance with State and Federal Regulations.  
Certificate of Good Standing  
Certificate of Non-Collusion  
Certificate of Insurance  
Cost

**Technical Criteria:**

Meets all specified requirements  
Meets all desirable capabilities  
Meets all performance criteria  
Meets all required standards

24. Implementation: All proposers shall be able to assume Ambulance Service Accounts Receivable Management Services for the Town within 90 days after notification of the award of the proposal.

25. The Term of the service agreement shall be initiated no later than August 1, 2012 and extend through December 31, 2015 pursuant to the achievement of satisfactory annual performance evaluations as described in a later section.

**4.0 SPECIFICATIONS**

1. The ASARMS shall receive the patient data, which will be in an electronic format, generated from the Fire Department's patient care reporting system (Rescue Bridge a product of Imagetrend). The FD will generate an electronic file for each Patient Care Report to be billed and will make every attempt to generate these files daily. The successful Service should be prepared to receive these files electronically and should have a secured site to accept these files using 128 bit encryption or greater.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

2. It is the responsibility of the successful contractor to modify their billing system to capture the necessary data generated from the Rescue Bridge system. The FD will not under any circumstances modify their current system nor will they authorize the successful

vendor to contract directly with Imagetrend to make any modifications to the FD's current system in order to satisfy the vendor's requirements in response to this RFP.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

3. The successful contractor should be prepared to accept these billing files electronically (within 90 days) following the Town's award of the RFP.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

4. Invoice patient, or third party responsible for payment of services rendered in accordance with time frames as stated herein.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

5. Responsibility for the initial collection, generation of any and all insurance forms, filings and record maintenance.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

6. Provision of all monthly finance, billing and receivable reports as stated herein.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

7. Provision of sufficient Customer Service Representative(s) to assist patients and/or other third party payees in all billing inquiries in a timely fashion as specified herein.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

8. Conducting any follow-up required to obtain necessary insurance or payer information for payment.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

9. Have all payments directed to the successful contractor (in the name of the Goffstown FD Ambulance) and deposited into a Town designated bank branch located near the contractor and reports reflecting all deposits and transactions be as specified herein.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

10. The Town will authorize the successful contractor to accept credit cards (Visa, MasterCard, American Express, etc.) and only remit these payments to the Town on a regular basis.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

11. The ASARMS will be responsible for reviewing each billable PCR for content to accomplish the following: (a) To check for discrepancies to insure the number of PCRs received match the number of patients transported as documented on the PCRs. This is particularly important on multiple patients at one incident; (b) Insure that the appropriate fee has been selected and the documentation to support the charge is present; (c) assign the appropriate billing code based on the documentation, treatment and chief complaint of the patient; (d) review reports that require an "On Scene Charge" to be assigned per documentation of the PCR.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

12. The ASARMS shall forward an invoice and a Goffstown Fire Department Ambulance Service Privacy statement to each patient within two (2) business days of receiving a billable claim. The invoice shall indicate that Goffstown Fire Department Ambulance Service will bill the patient's insurance, if applicable, on the patient's behalf, but that the patient is responsible for any unpaid balance. The invoice shall also include language where if an eligible patient (Town resident) and/or responsible parties cannot afford to pay the outstanding balance can request an Ambulance Hardship Request form. The Ambulance Service Accounts Receivable Management Services shall be capable of sending an approved hardship request form to the patient.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

13. The ASARMS shall forward statements to insured patients on a thirty, (30), sixty, (60), and ninety (90) day follow up basis with progressive pre-collection language after the initial invoice within two (2) business days of receiving notification of a billable run. Accounts with no activity (no response to invoices, phone calls, or payment and communication from the identified insurance company) will be automatically sent to the Goffstown Fire Department Ambulance Service designated collection agency when the account reaches an age of 120 days.

The ASARMS will continue to work with the designated collection agency to assist with the following:

- Information gathering;

- filing insurance claims for accounts in collection;
- review account status with collections firm and/or HCFRD as required;
- receive and handle phone calls for patients with accounts placed in collections;
- receive, post and forward payments received on accounts placed in collections.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

14. The ASARMS will validate all patients' insurance status prior to classifying the patient and creating a claim. The ASARMS shall describe in detail its claim validation processes and how it resolves deficits.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

15. The ASARMS will process all patients determined to **not** have a primary insurance carrier in the following manner:

- Contact the patient and receiving hospital by telephone to validate the presence or absence of health insurance.
- Send the first invoice statement within in 2 business days of receiving notification of a billable service.
- Send the second statement 10 business days (15<sup>th</sup> day) later.
- Send third statement with progressive language 10 business days later (29<sup>th</sup> day).
- Send a final statement 5 business days later (36<sup>th</sup> day) with progressive language informing patient failure to respond will result in collections activity.
- Self-pay patient accounts without any activity will be automatically turned over to the Goffstown Fire Department Ambulance Service designated collection agency on the 45<sup>th</sup> day.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

16. The ASARMS will provide a toll free number for patients to utilize to discuss their bill.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

17. All invoices and written statements/documentation forwarded to patients shall be formatted so the relationship between the ASARMS and Goffstown Fire Department Ambulance Service is invisible. All letterhead and invoice statements shall be approved in

advance by Goffstown Fire Department Ambulance Service. No changes will be made to the images without the written authorization of Goffstown Fire Department Ambulance Service.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

18. The ASARMS shall maintain a website that will permit patients to provide updated insurance information electronically to the ASARMS in support of efficiently managing the Goffstown Fire Department Ambulance Service account.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

19. The ASARMS customer service representatives are capable of immediately recognizing and fostering supportive communications with the hearing impaired via TTY/TTD connectivity or equivalent. The ASARMS will identify the system available and how the patient is notified.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

20. The ASARMS's toll free phone number and website address need to have hearing impaired and multi-lingual capabilities which are posted on all communications sent to patients.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

21. The ASARMS shall identify those carriers in servicing the New Hampshire market it is able to process claims via electronic file transfer inclusive of CMS, Medicaid, HMOs and private insurers.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

22. The ASARMS will state its normal business hours they are available to clients and patients.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

23. The ASARMS will list any and all days the business is closed during the calendar year.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

24. The ASARMS will provide its established plan or policy to assure no interruption in Goffstown Fire Department Ambulance Service

ASARMS as the result of unusual staff illness/injury/  
FMLA/turnover/vacation or earned time utilization.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

25. The ASARMS shall describe in detail and provide policies/procedures that outline how the Goffstown Fire Department Ambulance Service account is monitored to assure maximum productivity of the staff assigned to manage the account and maximization of revenue return.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

26. The ASARMS shall make a statement indicating that it has never lost an account due to concerns of improper billing practices, accusations or clients concerns of fraud as defined by CMS and other applicable Federal or State Authorities; no member of its staff has been accused, disciplined, charged, convicted of fraud, theft, deception unethical business practice, illegal billing practices.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

27. The ASARMS shall provide a copy of its Customer Service Plan including the associated training program indicating the initial and refresher training periods for all staff members.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

28. The ASARMS shall provide a copy of its Medicare Compliance Program. It will also include data on the frequency of individual account testing; frequency of deficits found during tests for the past three years; notification/communications of the deficits to affected clients; remediation and resolution options utilized to correct the deficits.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

29. The ASARMS shall provide a copy of its HIPAA Compliance Program. It will include copies of its Business Associate Agreement and a definition of those individuals who are covered by a Business Associate Agreement. It will further discuss how it will track and maintain records regarding the request, approval, denial, and distribution of medical records in collaboration with the client. It will also provide evidence that their internet system and electronic data file transfers and associated billing systems are HIPAA compliant.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

30. The ASARMS shall provide a copy of its current staff CMS compliance orientation program, policies and procedures to Goffstown Fire Department Ambulance Service.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

31. The ASARMS shall provide evidence that all staff members involved in the management of the Goffstown Fire Department Ambulance Service account have successfully completed the CMS compliance training program. This is an annual requirement to assure that all staff receives refresher training which will be sent to Goffstown Fire Department Ambulance Service no later than the start of the new contract year.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

32. The ASARMS shall provide a copy of its current staff HIPAA compliance orientation program, policies and procedures to Goffstown Fire Department Ambulance Service.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

33. The ASARMS shall provide a detailed description of its current complaint resolution process.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

34. The ASARMS shall notify the assigned Goffstown Fire Department Ambulance Service designated representative of any account overpayment within five business days of discovering the occurrence. Notification shall be delivered electronically or via fax. The notification shall include the following information:

- a. The patients name
- b. Patient's address
- c. Date of service

- d. Rescue Bridge Run Number
- e. Insurance Provider
- f. Amount to be refunded
- g. Name and address of individual/corporation receiving refund
- h. Reason overpayment occurred

**Does your proposal comply with this requirement: Yes ( ) No ( )**

35. The ASARMS shall provide the assigned Goffstown Fire Department Ambulance Service manager with monthly reports as outlined below:
- a. New Receivables billed
  - b. Receivables collected
  - c. Accounts receivable aging status by payor
  - d. Accounts to be forwarded for collections
  - e. Status of outstanding payment plan accounts
  - f. Monthly A/R analysis
  - g. Other reports as requested by the Town on as needed basis

**Does your proposal comply with this requirement: Yes ( ) No ( )**

36. The ASARMS shall permit identified Goffstown Fire Department Ambulance Service administrators with on line view/print field access to their account information. This will be used for the purpose of individual account validation, compliant resolution, and to fulfill special reporting criteria without having to unnecessarily burden ASARMS staff with the creation of special reports.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

37. The ASARMS agrees to develop policies specific to Goffstown Fire Department Ambulance Service regarding the following A/R functions:
- a. Medical diagnosis documentation
  - b. Rate approval processes
  - c. Payor contracting policies
  - d. Assignment of benefits
  - e. Special situation adjustments and authority
  - f. Write-offs
  - g. Financial hardship documentation processes.
  - h. Discounts
  - i. Payment Plans
  - j. Acceptance of credit card payments
  - k. Compliance activities
  - l. Medical records management.

The ASARMS shall include sample policies for Goffstown Fire Department Ambulance Service review with the proposal submission.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

38. The ASARMS shall have a proven track record of developing, enhancing and maintaining effective and functional relationships with area hospitals to facilitate the transfer of billing related information. The ASARMS shall provide a detailed description of how it intends to develop that relationship with the Goffstown Fire Department Ambulance Service area hospitals.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

39. The ASARMS agrees to re-age and re-categorize accounts after receiving funds from a primary payor.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

40. The ASARMS will indicate how telephones will be answered in support of the Goffstown Fire Department Ambulance Service account.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

41. The ASARMS will indicate if it utilizes a data clearinghouse to support the uniform coding and electronic transmission of patient invoices to insurance companies of identifying the specific company, a statement describing their relationship and a copy of the contract.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

42. The ASARMS will indicate its strategy for developing and enhancing a relationship with the Medicare Carrier for the State and other NH payers, inclusive of testing procedures to assure the appropriate electronic claims network conduit is functional. Additionally the ASARMS will provide detail on any existing account relationships it possesses with carriers servicing New Hampshire.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

43. The ASARMS will provide detailed description of how it manages and communicates claims management cycle time deficits and cash flow reductions as a result of carrier related issues.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

44. The ASARMS will provide a detailed description of how it recognizes, manages and communicates claims management cycle time deficits and cash flow reductions as a result of failed internal processes identified as part of their internal QI process.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

45. The ASARMS will provide a detailed description of how it recognizes, manages and communicates claims management cycle time deficits and cash flow reductions as a result of failed Goffstown Fire Department Ambulance Service processes identified as part of their internal QI process.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

46. The ASARMS, in accordance with the previously defined schedule agrees to turn over identified delinquent accounts to the identified Goffstown Fire Department Ambulance Service's designated collection agency. Files turned over to the collection agency will be formatted to include the following information:

- a. All patient demographic data.
- b. Patient insurance/payment information
- c. Date of service
- d. Point of pick up and destination
- e. Diagnosis
- f. Rescue Bridge / TEMSIS Run Number

The information shall be electronically transmitted to the designated Goffstown Fire Department Ambulance Service collection agency at the point the account is deemed transferable as previously defined.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

47. The term of this agreement shall be for an initial period of three years subject to the ASARMS receiving a positive annual review from Goffstown Fire Department Ambulance Service based upon their consistent ability to achieve the following benchmarks:

- Achieve and sustain a minimum 85% collection rate inclusive of contractual allowances.
- Have zero deficits or unresolved allegations of deficits related to HIPAA, CMS, Ambulance Service Accounts Receivable Management Services Contractual Compliance Issues.
- Maintain a 91% or better patient satisfaction ratio as determined by the Goffstown Fire Department Ambulance Service Patient Satisfaction Survey Tool(s).

**Does your proposal comply with this requirement: Yes ( ) No ( )**

48. The ASARMS agrees to provide Goffstown Fire Department Ambulance Service and/or its designated agents with access to review, copy, and evaluate all documents, reports, policies and procedures utilized in the fulfillment of this service contract. Access shall be defined as including on-site and/or electronic.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

49. The ASARMS agrees to provide additional assistance through the provision of education programs to Goffstown Fire Department Ambulance Service personnel in order to appropriately provide accurate and appropriate medical documentation and include processes to enhance the ASARMS's ability to collect on accounts from various payers; Provide feasibility studies for revenue projections for any new medical transportation/healthcare endeavor; assist and coordinate the negotiation of managed care contracting as may be required during the term of this agreement.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

50. The ASARMS shall work cooperatively and collaboratively with Goffstown Fire Department Ambulance Service in the development, enhancement, and maintenance of an integrated data communications system to facilitate the timely recording and transmission of patient health related data between the ASARMS and Goffstown Fire Department Ambulance Service and other locations as deemed appropriate by Goffstown Fire Department Ambulance Service.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

51. The ASARMS shall identify any and all billing software that will be utilized in managing this account. The ASARMS shall include a listing of all reports the billing software is capable of producing with samples of each report for Goffstown Fire Department Ambulance Service to evaluate. The ASARMS shall indicate the expected life cycle of the current software program. The ASARMS shall indicate the process it utilizes to bring new software programs on line, its communication strategy to its clients, and the process utilized to eliminate or significantly reduce the impact on client claims management cycle time during new software implementation.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

52. The ASARMS shall provide a detailed description/discussion with associated policies and procedures outlining the steps it takes to protect and recover the client's data from cyber attack; loss secondary to a network LAN/WAN failure; long term power outage; fire. The ASARMS shall include a listing of all contractors and sub-contractors who are involved in this process.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

53. The ASARMS shall indicate the length of time it maintains all paper and/or electronic records created in support of the client's service agreement.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

54. The ASARMS shall indicate if its approach to A/R management is based upon an assembly line theory or if each client has specific individuals permanently assigned to manage specific aspects of the clients account. The ASARMS shall indicate how it transitions accounts when a staff member terminates employment with the ASARMS. The ASARMS shall also indicate how the client is notified of the transition, and the client is assured of no interruption in cash flow during the process.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

55. The ASARMS shall identify how it can assist Goffstown Fire Department Ambulance Service developing/refine statistical indicators to monitor on a regular basis so as to improve individual and organizational performance in its claims management and collections activities. Such processes should include internal and external goals and benchmarks where applicable.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

56. The ASARMS will commit to work with Goffstown Fire Department Ambulance Service in order to continually review and adapt strategies to respond to regional and national changes in order to enhance reimbursement.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

57. The Proposer shall provide up to 3 hours training of FD EMS personnel (annually), at the discretion of the Fire Chief, on changes in the billing process and new requirements for data gathering as they occur.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

58. The ASARMS agrees to function as an information source. Payor requirements, rules, coverage parameters, and reimbursement policies change on a continuous basis. The ASARMS will keep Goffstown Fire Department Ambulance Service informed of ongoing changes and notify Goffstown Fire Department Ambulance Service of these events as they occur. Notification shall be by phone, electronic means and periodic dissemination of information from literature and other sources. The ASARMS will provide example of such communication in their proposal response.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

59. At the end of the contract term, the ASARMS agrees to facilitate the transfer of all accounts in process/not yet processed to Goffstown Fire Department Ambulance Service or its designated agent. The ASARMS will provide the necessary data and account documentation, both hard copy and electronic files in order to facilitate a smooth transition. The ASARMS will provide training to Goffstown Fire Department Ambulance Service designated personnel assuming the ASARMS responsibility for the direct cost of instructors, travel and expenses.

**Does your proposal comply with this requirement: Yes ( ) No ( )**

## **5.0 ACCOUNTING REQUIRMENTS**

Monthly reports will be submitted to the Fire Department. Prior to implementation, these reports in draft form will be reviewed by the Town Finance Department and the Fire Department for adherence to generally accepted accounting principles and the needs of the Town of Goffstown.

### **5.1. TRANSACTION SUMMARY**

On or before the seventh business day of each month the ASARMS will provide a report to the Town and the Fire Department indicating the billing status of each account listed alpha, by name and numeric by account as of the end of the previous month.

### **5.2. AUDIT CLAUSE.**

The Town reserves the right to audit the records of ASARMS. The ASARMS shall make and keep full and complete records and books of accounts of revenue and income, costs and expenses that specifically relate to performance under this contract. Records and books of account, together with any or all other memoranda pertaining thereto that may be kept, maintained or possessed by ASARMS, shall be open to examination during regular business hours by the Town or its representatives for the purpose of inspection, auditing, verifying, or copying the same or making extracts there from. The ASARMS shall make and keep said records and books of account in accordance with generally accepted accounting practices.

### **5.3. POLICY MANUALS.**

The ASARMS shall provide to the Town manuals outlining the policies and procedures established to facilitate the processing of the contract between the parties.

### **5.4. PAYMENT TERM.**

The ASARMS must remit all funds collected to the Town as specified herein. Payments made to the ASARMS will be based upon "net billings received" or as agreed upon as proposed, payments less amounts refunded or credited as a result of overpayments, erroneous payments or bad checks, with a scheduled disbursement of net 30 days.

### **5.5. REFUNDS.**

Any refunds to be issued will be initiated by the ASARMS or the Town with the appropriate documentation provided by the ASARMS. Checks will be written and mailed from the Town's Finance Office.

## **6.0 CONTRACT TERMS AND CONDITIONS**

### **6.1 Procedures**

The extent and character of the services to be performed by the selected vendor shall be subject to the general control and approval of the Goffstown Fire Chief or his authorized representative(s). The vendor shall not comply with requests and/or orders issued by other than the Fire Chief or his authorized representative(s) acting within their authority for the Town of Goffstown, New Hampshire. Any changes to the contract must be approved in writing by the original signatories and the Vendor.

### **6.2 Contract Period**

The Term of the service contract agreement shall be initiated no later than August 1, 2012 and extend through December 31, 2015 pursuant to the achievement of satisfactory annual performance evaluations as described in section #3.

### **6.3 Default in Services**

Default in services promised (without accepted reasons) or failure to meet specifications, authorizes the Goffstown Fire Department to default the contract and to purchase equipment, or services elsewhere and charge full increase in cost and handling to defaulting contractor.

### **6.4 License Requirement**

There are no special businesses licensing requirements for doing business with the Town under Town ordinances. Proposers are expected to possess the appropriate licenses and agreements for the business that they represent.

### **6.5 Payment of Taxes**

All contractors located or owning property in the Town of Goffstown shall assure that all real and personal property taxes are paid. The Town will verify payment of all real and personal property taxes by the successful proposers prior to the award of any contract or renewal.

### **6.6 Hold Harmless Clause**

The Vendor shall, during the term of the contract including any service period, indemnify, defend, and hold harmless the Town, its' officials, employees, agents, and representatives thereof from all suits, actions, or claims of any kind, including attorney's fees, brought on account of any personal injuries, damages, or violations of rights, sustained by any person

or property in consequence of any neglect in safeguarding contract work or on account of any act or omission by the contractor or his employees, or from any claims or amounts arising from violation of any law, bylaw, ordinance, regulation or decree.

#### 6.7 Notice of Required Disability Legislation Compliance

The Town of Goffstown government is required to comply with state and federal disability legislation: The Rehabilitation Act of 1993 Section 504, The Americans with Disabilities Act (ADA) for 1990 Title II.

Specifically, the Town of Goffstown, may not, through its contractual and/or financial arrangements, directly or indirectly avoid compliance with Title II of the Americans with Disabilities Act, Public Law 101-336, which prohibits discrimination by public entities based on disability. Subtitle A protects qualified individuals with disability from discrimination based on disability in the services, programs, or activities of all State and local governments. It extends the prohibition of discrimination in federally assisted programs established by the Rehabilitation Act of 1973 Section 504 to all activities of State and local governments, including those that do not receive Federal financial assistance, and incorporates specific prohibitions of discrimination on the basis of disability in Titles I, III, and V of the Americans with Disabilities Act.

Equipment or services furnished in response to this RFB shall conform to all ADA requirements, or be adaptable for persons with disabilities.

#### 6.8 Employment Discrimination by Vendors Prohibited

Vendors shall agree to comply with all federal and state regulations regarding equal opportunity in the workplace. Failure to comply with such regulations may result in termination of the lease agreement under this RFP.

#### 6.9 Exemption from Taxes

The Town of Goffstown is exempt from and Federal Excise Tax. Tax Exemption Certificates indicating the Town's tax exempt status will be furnished by Town of Goffstown on request.

#### 6.10 Drug-free Workplace

The Town of Goffstown is a drug-free workplace. "Drug-free workplace" means a site for the performance of work done in connection with a specific contract awarded to a vendor in accordance with this RFP, the employees of whom are prohibited from engaging in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

6.11 Condition of Items

All equipment (if any) shall be new, in first class condition, including containers suitable for shipment and storage, unless otherwise indicated herein. Verbal agreements to the contrary will not be recognized.

6.12 Method of Payment

Upon completion and acceptance of the services based on the Town issued Purchase Order(s), the Contractor shall submit an invoice, in triplicate, detailing the appropriate charges.

Upon receipt of invoice and upon final inspection and acceptance of the services provided, the Town will render payment within thirty (30) days. Invoices shall be submitted to:

Attn: Richard S. O'Brien, Fire Chief  
Goffstown Fire Department  
18 Church Street  
Goffstown, NH 03045

6.13 Assignment of Contract

This agreement may not be assigned in whole or part without the written consent of the authorized representative(s) of the Town of Goffstown and the Goffstown Fire Department Ambulance Service.

6.14 Termination

Subject to the provisions below, the contract may be terminated by the Town upon thirty (120) days advanced written notice to the other party.

a. Termination for Convenience

In the event that this contract is terminated or canceled upon request and for the convenience of the Town, without the required thirty- (120) days advance written notice, then the Town shall negotiate reasonable termination costs, if applicable.

b. Termination for Cause

Termination by the Town for cause, default or negligence on the part of the contractor shall be excluded from the foregoing provision; termination costs, if any, shall not apply. The thirty- (30) days advance notice requirement is waived in the event of Termination for Cause.

### c. Termination Due to Unavailability of Funds in Succeeding Fiscal Years

When funds are not appropriated or otherwise made available to support continuation of performance in a subsequent fiscal year, the contract shall be canceled and the vendor shall be reimbursed for the reasonable value of any non-recurring costs incurred but not amortized in the price of the supplies or services delivered under the contract.

### 6.15 Contractual Disputes

A Contractor shall give written notice to the Town Administrator of the intent to file a claim for money or other relief at the time of the occurrence or the beginning of the work upon which the claim is to be based.

The written claim shall be submitted to the Town Administrator no later than sixty (60) days after final payment. If the claim is not disposed of by agreement, the Town Administrator shall reduce his decision to writing and mail or otherwise forward a copy thereof to the Contractor within thirty (30) days of receipt of the claim.

The Town Administrator's decision shall be final unless the Contractor appeals within thirty (30) days by submitting a written letter of appeal to the Town Administrator, or her designee. The Town Administrator shall render a decision within sixty (60) days of receipt of the appeal.

### 6.16 Severability

In the event that any provision shall be adjudged or decreed to be invalid, such ruling shall not invalidate the entire Agreement but shall pertain only to the provision in question and the remaining provisions shall continue to be valid, binding and in full force and effect.

## **7.0 INSTRUCTIONS TO PROPOSERS**

### 7.1 Submission of Proposals

Pricing must be inclusive, clear, and concise. Include other information as requested or required. Be sure proposal container is completely and properly identified. The face of the container shall indicate the item contained in the proposal, time and date of opening, and the title of the RFB.

Proposals must be received by the Goffstown Fire Department Ambulance Service / Town of Goffstown before the hour specified on the opening date. Proposals may be either mailed to 16 Main Street, Goffstown, NH 03045 or hand delivered to 16 Main Street, 2<sup>rd</sup> Floor (Board of Selectmen's Office), Goffstown, NH 03045. Two (2) copies of proposals must be received by **2:00 p.m., March 22, 2012**. The outside of the

envelope should be clearly marked “**Ambulance Service Accounts Receivable Management Services**”.

All proposals must include the following elements:

1. A completed copy of the **General Conditions** and **Specifications** sections of the RFB.
2. A completed copy of the **Proposal Statement** (see Addendum A).
3. Identification of any facilities or equipment that will be required to be provided by the Town.
4. The Town Administrator and/or the Fire Chief, or designee, shall review and evaluate all proposals in accordance with the criteria contained herein and the provisions of applicable state and federal laws.
5. An original and one copy is required. Electronic submittals must be provided in MS Word/Excel format.

#### 7.2 Acceptances and Opening of Proposals:

At the time of the posted deadline for submission of proposals, all proposals shall be opened, time/date stamped for acceptance purposes. At that time, the proposals shall be turned over to the Fire Chief, and/or his designee for review. Award of the proposal shall be made at a later date. The Town of Goffstown Board of Selectmen, after receiving recommendation from the Fire Chief and/or his designee, shall award the proposal to the successful proposers.

#### 7.3 Inquiries & Questions

All questions and/or inquiries shall be in writing and addressed to:

**Richard O’Brien, Fire Chief  
Goffstown Fire Department  
18 Church Street  
Goffstown, New Hampshire 03045**

#### 7.4 Firm Pricing for Town Acceptance

Proposal price must be firm for Town acceptance for 90 days from proposal opening date. "Discount from list," proposals not acceptable unless requested.

#### 7.5 Proprietary Information

Trade secrets or proprietary information submitted by proposers in connection with this solicitation shall not be subject to disclosure under New Hampshire law under the provisions of NH RSA 91A. The proposers must invoke the protections of this section prior to or upon submission of the data or other materials, and must clearly identify the data or other materials to be protected and state the reasons why protection is necessary. Proposers shall not mark sections of their proposal as proprietary if they are to be part of the award of the contract and are of a "Material" nature.

#### 7.6 Authority to Bind Firm in Contract

Proposals must give full firm name and address of proposers. Failure to manually sign proposal may disqualify it. Person signing proposal should show TITLE or AUTHORITY TO BIND HIS FIRM IN A CONTRACT. Firm name and authorized signature must appear on proposal in the space provided in the lower right hand corner of the pricing page(s).

#### 7.8 Correction or Withdrawal of Proposals and Cancellation of Awards under Competitive Sealed Proposals

Correction or withdrawal of inadvertently erroneous proposals before or after award, or cancellation of awards or contracts based on such proposal mistakes, shall be permitted at the Town's discretion. After acceptance of proposals, no changes in proposed prices or other provisions of proposals prejudicial to the interest of the Town or fair competition shall be permitted. Except as otherwise provided by regulation, all decisions to permit the correction or withdrawal of proposals, or to cancel awards or contracts based on errors or omissions, shall be supported by a written determination made by the Board of Selectmen/Fire Chief, or his representative.

No proposal may be withdrawn when the result would be to award the contract on another proposal of the same proposers or of another proposer in which the ownership of the withdrawing proposers is more than five percent. If a proposal is withdrawn, the lowest remaining proposal shall be deemed the low proposal. If the Purchasing Agent, the Using Agency, or a designee of such, denies the withdrawal of a proposal, he shall notify the proposers in writing stating the reasons for his decision.

#### 7.9 References

Proposers must list 4 healthcare organizations of similar or greater size using a similar service as proposed including the names, addresses and phone numbers of a contact person at each. Failure to include

references may be ample cause for rejection of proposal as non-responsive. Preferred references include other local government agencies.

#### 7.11 Descriptive Literature

All proposals shall include any descriptive literature on service being offered. Failure to include this information with your proposal may result in the entire proposal being considered unresponsive

#### 7.13 Payment of Taxes

All proposers located or owning property in the Town of Goffstown shall assure that all real and personal property taxes are paid prior to submitting a proposal.

The Town will verify payment of all real and personal property taxes by the successful proposers prior to the award of any contract.

#### 7.14 Exemption from Taxes

The Town is exempt from Federal Excise Tax. Tax Exemption Certificates are not issued in the State of New Hampshire. A letter statement indicating the Town's tax-exempt status will be furnished by Town of Goffstown on request

#### 7.15 Late Proposals

Late proposals will be returned to proposers UNOPENED, if opening date and proposer's return address is shown on the package.

#### 7.16 Rights of Town

The Town reserves the right to reject all or any part of any proposal, waive informalities and award the contract to the lowest responsive and responsible proposers to best serve the sole interest of the Town and the Goffstown Fire Department Ambulance Service.

#### 7.17 Deviations from Specifications

If there is any deviation in the source, quality, etc. of any item in the proposal from that prescribed in the General Conditions and Specifications, the appropriate line in the specifications shall be ruled out and the substitution clearly indicated. The Town reserves the right to determine the responsiveness of any deviation.

#### 7.18 Vendor Preference in Tie Proposals

The Town Administrator and the Fire Department Ambulance Service making purchases of goods or services shall give preference to services sold by Town and State vendors, in that order, in all cases of tie proposals, quality and service being equal.

#### 7.19 Basis for Award

Contract award will be made to the most responsive and responsible proposers on a per line item or total cost basis with terms viewed as most favorable to the Town of Goffstown. The town reserves the right to accept a proposal deemed to be the most beneficial to the public and town of Goffstown Fire Department Ambulance Service.

#### 7.20 Negotiation with the Lowest Responsible Proposers

Unless all proposals are cancelled or rejected, the Town reserves the right to negotiate with the lowest responsive, responsible proposers to obtain a contract price within the funds available whenever such low proposal exceeds the available funds. Negotiations with the low proposers may include both modifications of the proposal price and the specifications/scope of work to be performed.

#### 7.21 Anti-Trust Violations

Consistent and continued tie proposals could cause rejection of proposals by the Town Administrator and/or investigation for Anti-Trust violations.

#### 7.22 Protest

Proposers may protest award to the Town Administrator who shall determine the appropriate response based on past practice, generally accepted purchasing standards, and the laws of the State of New Hampshire.



Town of Goffstown, New Hampshire Fire Department

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Goffstown Town Hall  
16 Main Street  
Goffstown, NH 03045

### **Ambulance Service Accounts Receivable Management Services**

The following shall be returned with your proposal. Failure to do so shall be ample cause for rejection of proposal as non-responsive. It is the responsibility of the proposers to ensure that he has received all addenda.

1. References, per Sections 3.24, 4.31 & 6.10
2. Completed Proposal Statements in Addenda A .
3. Descriptive Literature, per Sections 4 & 5
4. FEI number: \_\_\_\_\_

References for: \_\_\_\_\_

Proposers shall provide references on this form.

1. Firm Name \_\_\_\_\_  
Contact \_\_\_\_\_  
Title \_\_\_\_\_ E-mail \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

2. Firm Name \_\_\_\_\_  
Contact \_\_\_\_\_  
Title \_\_\_\_\_ E-mail \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

3. Firm Name \_\_\_\_\_  
Contact \_\_\_\_\_  
Title \_\_\_\_\_ E-mail \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

4. Firm Name \_\_\_\_\_  
Contact \_\_\_\_\_  
Title \_\_\_\_\_ E-mail \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

**EXCEPTIONS TO THE SPECIFICATIONS:**

Alternatives to these specifications shall be noted below. All alternatives taken shall be recorded per the guidelines defined above. Each alternative shall be noted by page number and item header. If additional space is required for alternatives, then the proposers shall use additional paper as necessary, however the same format shall be used.

Page #:\_\_\_\_\_

Header:\_\_\_\_\_

Exception:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Page #:\_\_\_\_\_

Header:\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## 8.0 PUBLIC / LEGAL NOTICE:



Town of Goffstown, New Hampshire Fire Department

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REQUEST FOR PROPOSAL

### **Ambulance Service Accounts Receivable Management Services**

The Town of Goffstown is currently seeking proposals for **Ambulance Service Accounts Receivable Management Services**. Proposal specifications can be obtained from Fire Chief Richard O'Brien, Goffstown Fire Department Ambulance Service, 18 Church Street, Goffstown, NH 03045, phone (603) 497-3619 or from the Town's web site <http://www.goffstown.com>. All submissions are due by March 22, 2012, 2p.m. local time at the Goffstown Town Hall, 16 Main Street – 2<sup>rd</sup> Floor (Selectmen's Office), Goffstown, NH 03045. The Town of Goffstown reserves the right to reject any or all proposals on any basis and without disclosure of reason.

## **Addendum “A”**



Town of Goffstown, New Hampshire Fire Department

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REQUEST FOR PROPOSAL

**Ambulance Service Accounts Receivable Management Services**

**Proposal Statement**

For the ease of reviewing prices, the following page must be filled out in its entirety and submitted at the front of the proposal package. If this page is not included, the proposal will be automatically rejected.

**Pricing**

1. Year 1 Projected Annual Net Revenue: \$ \_\_\_\_\_
  - a. Year 1 cost by % of dollar collected: % \_\_\_\_\_ or;
  - b. Year 1 cost per billable run: \$ \_\_\_\_\_
2. Year 2 Projected Annual Net Revenue: \$ \_\_\_\_\_
  - a. Year 2 cost by % of dollar collected: % \_\_\_\_\_ or;
  - b. Year 2 cost per billable run: \$ \_\_\_\_\_
3. Year 3 Projected Annual Net Revenue: \$ \_\_\_\_\_
  - a. Year 3 cost by % of dollar collected: % \_\_\_\_\_ or;
  - b. Year 3 cost per billable run: \$ \_\_\_\_\_

**Option:**

**Credit Card Transactions:**

What fee does the proposer pay for the processing of the following credit card transactions? This assumes that the Vendor will only pass along the vendor's cost of this service - additional vendor fees are not allowed. The Town recognizes that these fees are adjusted periodically by Credit Card service providers and expects these fees to be adjusted accordingly, however, the Town must receive a copy of the notification provided the Vendor by the Credit Card processor prior to the vendor adjusting these fees:



**Ambulance Service Accounts Receivable Management Services**

**Proposal Statement**

**Implementation**

Are you capable of implementing this service within the defined time parameters:

Yes ( )

No ( )

**Primary Office Location**

Corporate Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Inquiries**

Any inquiries regarding this proposal may be made to:

Name of Purchaser: Goffstown Fire Department Ambulance Service  
18 Church Street  
Goffstown, New Hampshire 03045

Contact Person: Richard O'Brien, Fire Chief  
Phone Number: (603) 497-3619  
Fax Number: (603) 497-5704  
Email: robrien@goffstownnh.gov

**Ambulance Service Accounts Receivable Management Services**

**Proposal Statement**

**Proposal Authorization**

\_\_\_\_\_  
Authorized signature of proposers

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Typed name

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

\_\_\_\_\_  
Title

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone (or toll free) Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Email Address

## **Addendum “B”**



Town of Goffstown, New Hampshire Fire Department

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## REQUEST FOR PROPOSAL

### **Ambulance Service Accounts Receivable Management Services**

### **Goffstown Fire Department Ambulance Service Information**

#### **Introduction**

The Goffstown Fire Department provides emergency medical services and emergency transportation to the Town with its 3 equipped ambulances. The Fire Department provides levels of care ranging from EMT-Basic to Paramedic-level care. EMS in Goffstown is provided by several staffing levels. Each Day 6am – 6 pm, the ambulances are staffed by our full-time personnel. Evenings/Nights (6 pm – 6 am) are staffed by a part-time EMS contingent. Our On-Call Firefighter / EMTs support the daytime and evening personnel as needed. It is our goal to make sure that our residents and visitors requiring emergency medical care receive the highest level of care possible in the shortest amount of time. The Department prides itself in making sure our ambulances are outfitted with some of the best life-saving equipment available.

Services are housed and initiated from three fire stations located throughout the community. Resources of the Goffstown Fire Department are supported by the professional and technical support of the Catholic Medical Center (CMC), located in Manchester, New Hampshire. CMC serves as our primary resource hospital with Dr. Matthew Greenston as the department's medical director. In addition to the Catholic Medical Center, the department has long standing relationships with the Elliot Hospital of Manchester, New Hampshire; and Concord Hospital, Concord, New Hampshire. Goffstown Fire Department ambulances have also transported to other facilities throughout New Hampshire and the metropolitan Boston area.

In brief, the Department has a proven record of nearly 40 years of service in the field of emergency medical services.

### **Call Information**

GFD Patients Transported:

- **2008: 804**
- **2009: 859**
- **2010: 909**
- **2011: 923**

*Although the number of patient transports in prior years is considered to be accurate, there is no warranty or guarantee that future service requirements will remain constant.*

### **Current Ambulance Rates (as of 01/01/2012)\*:**

<b>BLS Emergency</b>	\$432.96
<b>ALS 1</b>	\$514.13
<b>ALS 2</b>	\$744.14
<b>SCT</b>	\$879.44
<b>Mileage</b>	\$9.85/mile
Oxygen	\$56.47
IV Service	\$130.59
Defib	\$103.14
Intubation	\$103.14
Cardiac Monitoring	\$177.30
<b>Paramedic Intercept</b>	\$300.00

**\* - The Town of Goffstown currently has a policy of establishing its ambulance rates at Medicare +20%**

**Note: The Paramedic Intercept Charge is levied on the ambulance service that requests this service.**

Goffstown Fire Department Ambulance Service has maintained an accounts receivable management service contract with a single source vendor for over 10 years. Goffstown Fire Department Ambulance Service captures clinical and billing data on a web-based run report that is a proprietary system that manages clinical, operational and billing data (Rescue Bridge by Imagetrend). The system is capable of electronically sending a copy

of a billing review report and the patient care report to the Goffstown Fire Department Ambulance Service vendor electronically.

The Goffstown Fire Department Ambulance Service payer profile is typical of any suburban Southern New Hampshire area:

- **Medicare:** 42%
- **Medicaid :** 7%
- **Private Ins.** 29%
- **Self Pay:** 22%
  
- **BLS:** 20%
- **ALS 1:** 47%
- **ALS 2:** 4%
- **Non-Transports:** 29%

*Although the current percent of patient transport mix stated above is considered to be accurate, there is no warranty or guarantee that future service requirements will remain constant.*

### **Conclusion**

The Goffstown Fire Department Ambulance Service is funded through patient transport revenue; relying solely on cost recovery efforts of our contracted Ambulance Service Accounts Receivable Management Service. Goffstown Fire Department Ambulance Service seeks to create a functional relationship with a vendor in order to achieve a positive outcome of optimal ambulance revenue recovery.