

Request for Information: EMS Billing and Revenue Cycle Management

REQUEST FOR INFORMATION: THIS IS A REQUEST FOR INFORMATION (RFI) ONLY. This RFI is issued solely for information and planning purposes and should not be construed as a solicitation, nor should it be construed as an obligation on the part of the Kanawha County Emergency Ambulance Authority (KCEAA) to contract for any services. No award shall be made in terms of this RFI. Further, KCEAA is not seeking proposals through this RFI and will not accept unsolicited proposals.

Participation in this RFI is voluntary and KCEAA will not pay for the preparation of any information submitted by a Vendor for KCEAA's use of that information. All costs associated with responding to this RFI will be solely at the interested party's expense. Vendors should not include any information that might be considered proprietary or confidential. All submissions become KCEAA property and will not be returned.

Please be advised that this may be a two-step process. Should KCEAA determine to proceed with a solicitation based on the responses to this Request for Information (RFI), phase two will be either a formal Request for Proposal (RFP) or Invitation for Bid (IFB) to be handled in accordance with KCEAA's purchasing policies and procedures.

RFI OVERVIEW:

KCEAA is considering the development of a formal Request for Proposals (RFP) process to outsource billing and Revenue Cycle Management (RCM) services. Historically, KCEAA has done billing in-house, however, the complexity of ambulance billing, the desire to enhance revenue collected per transport, combined with a desire to enhance cybersecurity is driving the potential of outsourcing this service.

We are requesting information from potential partners regarding their billing and RCM management services.

Please note that this Request for Information (RFI) is for informational purposes only, and no contract will be awarded as a result. A firm or organization's response to the RFI—or lack thereof—will have no impact on the evaluation of responses to any subsequent Request for Proposals (RFP) released. Responses will be used solely for information and planning purposes. All responses will be public record, do not submit confidential information in your response.

Parties must disclose all potential conflicts of interests, including financial, business, or personal relationships with any individuals involved in the evaluation process, and must recuse themselves from any proposal where such a conflict exists, notifying the KCEAA immediately. All parties will be evaluated equally within the constraints of applicable rules and/or law.

We have designated the following individual to serve as the official point of contact for this RFI. This individual is the only authorized contact permitted to communicate on behalf of the Kanawha County Emergency Ambulance Authority about this RFI. Contact information for RFI point of contact:

Monica Mason, Executive Director
Kanawha County Emergency Ambulance Authority
E-Mail: MonicaMason@kceaa.org
Phone: 304-345-2312 Ext. 1113

SUBMISSION OF INFORMATION

Submittals must be received by February 25, 2025 at 11:00 am ET via email to Monica Mason, Executive Director, MonicaMason@kceaa.org. Any vendor who is going to submit please notify the agency with your intent within 10 days by email. If you would have questions about the RFI or KCEAA submit those questions within 15 days. All questions and answers will be shared with all vendors who have responded with an intent to respond. KCEAA may invite all or some of those who submitted responses to present via Zoom to KCEAA and answer questions. KCEAA may extend the response deadline at its own discretion if it takes longer than expected to respond to vendor questions.

BACKGROUND:

KCEAA is a non-profit organization created in 1977 by the Kanawha County Commission under the Emergency Services Act of 1975. KCEAA enjoys an exceptional reputation in the local community, as well as the EMS profession at the state level and nationally. This reputation is well-deserved and built on a foundation of solid essential service delivery, as well as service delivery innovation. KCEAA's 16-member Board of Directors is appointed by the Kanawha County Commission and comprised of stakeholders of the EMS system, including elected and appointed officials.

In addition to in-house ambulance billing, KCEAA also provides billing services for the City of Charleston Fire Department, as well as well as three other Emergency Medical Services (EMS) agencies. Ambulance billing for these services are likely to be included in the potential RFP, although any agreements as a result of the RFP will be between the billing agency and individual jurisdictions.

Data related to payer mix, service mix and current fee schedule are provided below.

KCEAA Patient Volume and Payer Mix (2023)

Payor Classification	Services	% of Services
Medicare HMO	9,540	28.2%
Medicare	8,033	23.8%
Medicaid HMO	4,409	13.0%
Commercial Insurance	4,220	12.5%
Facility	2,665	7.9%
Medicaid	1,825	5.4%
Bill Patient	1,480	4.4%
Third Party Liability	1,169	3.5%
Government	459	1.4%
Total	33,800	100.0%

KCEAA Service Mix (2023)

	Services	% of Services
ALS-E	10,386	30.7%
BLS-E	9,971	29.4%

ALS-NE	623	1.8%
BLS-NE	12,607	37.2%
ALS-2	176	0.5%
CCT	100	0.3%
Total	33,863	100.0%

KCEAA Fee Schedule (2025)

Service	Fee
ALS-E	\$1,550.22
BLS-E	\$1,305.43
ALS-NE	\$979.06
BLS-NE	\$815.88
ALS-2	\$2,243.70
CCT	\$2,651.68
Mileage	\$29.06

GOAL(s):

- Enhance revenue from ambulance services.
- Reduce costs associated with the revenue cycle management.
- Improve provider and patient experience with the billing process.
- Leverage best practices for system integration and cybersecurity.

Questions for Potential Partners:

Specific questions to help with the design of a potential future RCM Scope of Work:

1. Provide brief relevant background information about your organization and prior work experience related to EMS billing services.
2. What are the most innovative EMS Billing solutions your organization has been part of?
3. What potential risks are produced by transitioning to an outsourced EMS billing solution?
4. What should KCEAA expect a potential EMS billing partner to do to mitigate or avoid those risks?
5. What has been the typical outcome in terms of revenue per service billed after a transition to an outsourced billing partner?
6. What are the typical fees related to the performance of these services?

7. What are the steps involved in transitioning from billing internally to outsourcing? Are there costs associated with this transition?
8. What type of training does your firm offer our staff?
9. How often to you update your hardware and/or software?