



*Ivins City Finance Report
for
EMS Billing & Collections*

Date: *October 6, 2016*

Purpose: *Ambulance Billing and Collection Agreement with Action Ambulance Billing*

Recommendation: *Approve the Agreement*

Background:

The Public Safety Director, City Manager and Finance Director have been reviewing EMS operations and looking for ways to improve those operations. As part of this process, Bob and Nick directed Kinzie Tobler (EMS Coordinator) to research billing and collection solutions and make a recommendation. The city has used an outside service in the past before bringing the billing and collections in house. Kinzie researched and talked to a number of companies and other ambulance services. He recommends the city contract with Action Ambulance Billing.

The City had a good meeting with Action Ambulance Billing, on September 19th, during which information was exchanged, questions asked and answered, and policies and procedures reviewed. They have many years of experience and excellent references. The fees charged for their services are reasonable and only paid on the amounts that are collected. There is a 6-month initial contract period in which the city may end the agreement with no notice.

Improving EMS operations is a priority for the city. This is one of the efforts being made in that area. The initial 6-month period will give the city the time and feedback to understand the direction of EMS and how well Action Ambulance Billing meets the city's needs. This move will also help Public Safety by allowing the administrative assistant to focus all of her time and attention there instead of spend a good portion of her time on the billing and collections.

Staff recommends the City Council authorize the City Manager to enter into this agreement.

Respectfully,

Wally Ritchie
Director of Finance

October 6, 2016



Action Ambulance Billing, LLC.



Stephanie McDonald
Jennifer Butler



Phone: (928) 567-0403

Fax: (928) 567-6403

September 12, 2016

Ivins City Ambulance Services
McKenzie Tobler, EMS Director
90 W Center Street
Ivins, Utah 84738

Hello,

In the business of emergency services, no two situations are ever the same.

At Action Ambulance Billing, we believe the same holds true when it comes to the invoices you send to your customers. We understand the importance of making our services fit *your* needs, not ours. As a result, we deliver comprehensive and economical billing services that are custom fit to your department's unique requirements.

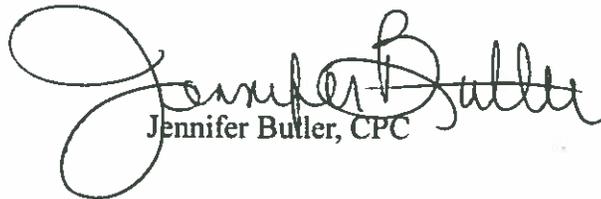
With twenty-five years combined experience in the field of medical billing, twenty of which have been focused solely on ambulance billing, we've developed a unique and thorough billing process that assures that each and every invoice submitted is accurate and contains all the elements necessary to ensure that it be paid promptly. Our many years of experience have taught us that the secret to a fast turnaround for your receivables is to be accurate with the first invoice—not the second or third corrected invoice.

We believe that you'll find our company to be the answer to *all* your billing needs. Our focus is not only on obtaining the highest reimbursement percentage possible from your receivables, but also to keep you informed about your account's status through regular reporting and periodic one-on-one meetings. We also offer, at no additional charge, assistance with your annual DHS reporting.

Our mission is simple...we'll work hard to get you the maximum reimbursement on your receivables by consistently delivering the highest standard of professional service. It is our hope that you will allow us to prove this firsthand by selecting Action Ambulance Billing for your billing needs.

Sincerely,


Stephanie McDonald


Jennifer Butler, CPC

Ambulance Medical Billing Agreement

This Agreement is made on _____ between *Ivins City Ambulance Services* (Client), and *Action Ambulance Billing, LLC* (Agent).

Term of Contract: This Agreement will become effective on _____, and will continue to be in effect for an initial 6 month contract period.

Services to be Provided by Agent: During the term of this Agreement: Agent will submit Client's medical ambulance claims for payment to insurance companies and government payors. Where available, agent will submit claims electronically. Where electronic submission is not yet available, agent will send paper filings. Agent will bill Client's patients for any balances they are responsible for after receiving medical services by Client. Agent will follow-up on Client's insurance claims and aggressively pursue late or denied claims.

Services to be Provided by Client: Client will provide Agent with all necessary practice information, such as provider numbers, insurance numbers, and charges for the services provided by Client. Client will provide the names and address of each patient and/or insurance company(ies) along with level of call, mileage, oxygen and supplies (if applicable) to Agent within a reasonable time after medical services were provided to patients. Client shall provide to Agent the Ambulance Trip Sheets & patient demographics (hospital face sheet) for all services provided by Client during the term of this Agreement, within a reasonable time following the date of service. Client will provide the Agent with copies of all EOBs and payments received by Client from other sources, such as co-pays and self-pays, within a reasonable time of Client's receipt. Client will provide any other information helpful for Agent to process, submit and follow up on Client's claims and accounts receivable.

Authorization: The Agent is hereby authorized by Client to contact the patients, insurance companies, and all other parties deemed necessary, and to obtain any information needed to perform medical billing services.

Delinquent Accounts and Collections: Client can choose a billing collection agency of its choice. Accounts will be assigned to the Clients selected billing collection agency upon approval of Client.

Medical Billing Fees: Client agrees to pay Agent (8.5 %) of the amount Client received from all patient and insurance revenue every month during the term of this Agreement. Agent agrees to waive the onetime \$500.00 set up fee, if client continues contract after initial 6 month contract agreement. If client terminates agreement at the end of initial 6 month agreement then client agrees to pay \$500.00 initial set up fee, due on termination of 6 month contract. Client shall be invoiced monthly and payment is expected within 10 days from invoice date.

HIPAA Compliance: Each patient's information will remain confidential through the Health Insurance Portability and Accountability Act (HIPAA) and all Privacy Regulations. No information shall be disclosed to anyone except where necessary for Agent to perform its normal duties of medical billing. Agent and its Business Partners, (such as our software vendor and clearing house), are fully HIPAA compliant.

Cancellation of Agreement: This Agreement will be reviewed at the end of the initial six (6) month contract period, at which time, *Ivins City Ambulance Services* will evaluate services provided by *Action Ambulance Billing, LLC* and a decision will be made to continue or terminate contract. If agreed to continue with contract this agreement is automatically renewable at the end of the five (5) year contract period unless Client gives prior written notice to Agent within sixty (60) days prior to the five (5) year expiration of the Agreement. It shall be mutually agreed to by the parties that all other terms and conditions in this Agreement will remain the same. At any time prior to the (60) day period before the expiration of this Agreement or renewal, either party may terminate this Agreement without cause with a (90) ninety day written notification to the other party. It shall be mutually agreed to by the parties that all other terms and conditions in this Agreement will remain the same.

Modification: Neither party may modify this Agreement without the written consent of the other party, except as otherwise required by Arizona law with regard to medical billing.

By _____
Date
Jennifer Butler, Owner
Action Ambulance Billing, LLC

By _____
Date
Stephanie McDonald, Owner
Action Ambulance Billing, LLC

By _____
Date
Dale Coulam, City Manager
Ivins City Ambulance Services