



## PURCHASING DIVISION

Charlotte County Administration Center  
18500 Murdock Circle, Suite 344  
Port Charlotte, Florida 33948-1094

Phone 941.743.1378  
Fax 941.743.1384

**TO: PROSPECTIVE PROPOSERS**

**DATE: APRIL 10, 2026**

**RE: ADDENDUM #2, RFP NO. 20260190, EMERGENCY MEDICAL TRANSPORT BILLING SERVICES – ANNUAL CONTRACT**

**PROPOSAL DUE DATE: 3:00 p.m. (EST), APRIL 16, 2026**

Firms are hereby notified that this addendum shall be made a part of the above-named proposal and contract documents. The following are issued to revise/clarify the proposal and contract documents, and these items shall have the same force and effect as the original proposal and contract documents. Proposals to be submitted on the above-specified date at Purchasing shall conform to the revisions and clarifications as listed herein.

### **ITEM # 1 QUESTIONS/ANSWERS**

**Q1. Regarding the requirement to provide one reference utilizing Firehouse software, we would appreciate clarification on the County's intent. Since the billing process does not integrate directly with Firehouse, would it be acceptable—or preferred—for us to provide references from agencies that utilize ImageTrend as their ePCR platform, consistent with the system currently used by the County?**

A1. Yes, any Emergency Transport Software, or use of ImageTrend is acceptable. It is true that we do not integrate the fire side of the house.

This addendum is binding and is to be considered as if contained within the original proposal documents of RFP No. 20260190. Firms are required to acknowledge receipt of this addendum on their proposal forms.

*Rhiannon Mills* for

Kimberly Corbett, C.P.M., CPPB  
Senior Division Manager - Purchasing

KC/at

cc: Clerk  
File



## PURCHASING DIVISION

Charlotte County Administration Center  
18500 Murdock Circle, Suite 344  
Port Charlotte, Florida 33948-1094

Phone 941.743.1378  
Fax 941.743.1384

**TO: PROSPECTIVE PROPOSERS**

**DATE: APRIL 1, 2026**

**RE: ADDENDUM #1, RFP NO. 20260190, EMERGENCY MEDICAL TRANSPORT BILLING SERVICES – ANNUAL CONTRACT**

**PROPOSAL DUE DATE: 3:00 p.m. (EST), APRIL 16, 2026**

Firms are hereby notified that this addendum shall be made a part of the above-named proposal and contract documents. The following are issued to revise/clarify the proposal and contract documents, and these items shall have the same force and effect as the original proposal and contract documents. Proposals to be submitted on the above-specified date at Purchasing shall conform to the revisions and clarifications as listed herein.

### **ITEM # 1 QUESTIONS/ANSWERS**

**Q1. Who is currently responsible for credit card processing fees, the billing vendor, the patient, or the agency?**

A1. The patient is responsible for credit card processing fees. Zirmed is our credit card vendor.

**Q2. Which ePCR software are you currently using, and are there any anticipated changes to that system?**

A2. We use ImageTrend software for our ePCR. We are not anticipating replacing this software soon.

**Q3. There appears to be contradictory language around the format requirements for this RFP. Should the proposer follow the format described within section RP-22 Submittal Information or RP-26 Evaluation Method and Criteria (as described in RP-24 Proposal Format).**

A3. Revise Page 19, RP-24 Proposal Format, to read, 'Firms shall prepare their proposals using the format outlines in RP-22 Submittal Information.'

This addendum is binding and is to be considered as if contained within the original proposal documents of RFP No. 20260190. Firms are required to acknowledge receipt of this addendum on their proposal forms.

*Kimberly Corbett*

Kimberly Corbett, C.P.M., CPPB  
Senior Division Manager - Purchasing

KC/at

cc: Clerk  
File



Charlotte County Purchasing Division  
18500 Murdock Circle, Suite 344  
Port Charlotte, Florida 33948-1094

Phone 941.743.1378

## NOTICE OF AVAILABILITY

REQUEST FOR PROPOSALS  
CHARLOTTE COUNTY, FLORIDA

The County of Charlotte will be receiving sealed proposals at the Purchasing Division, Suite 344, Charlotte County Administration Center, 18500 Murdock Circle, Port Charlotte, FL 33948-1094, for:

**RFP NO. 20260190**  
**EMERGENCY MEDICAL TRANSPORT BILLING SERVICES – ANNUAL CONTRACT**

Charlotte County hereby solicits Request for Proposals for the purpose of engaging a qualified Contractor to provide Emergency Medical Services Patient Accounts Receivable Services. Services include, but are not limited to, data entry, data processing, billing services, insurance claims filing, collection services, mailing of notices, internal reporting, account follow-up, customer service, external reporting, compliance, and training of EMS personnel in the use of systems, procedures, and documentation.

**There will not be a Pre-Submittal Conference for this project. Please send all questions to the email address below.**

**PROPOSAL DUE DATE: 3:00 p.m. (EST), APRIL 16, 2026**

Proposal Documents may be obtained by accessing the Charlotte County Purchasing Division's website at <https://purchasingbids.charlottecountyfl.gov> under "Purchasing Bids Online", document number 261902. Any questions can be answered by contacting Alisa L. True, CPPB, Senior Contract Specialist at 941.743.1549, or email: [Alisa.True@CharlotteCountyFL.gov](mailto:Alisa.True@CharlotteCountyFL.gov)

**ELECTRONIC BID SUBMISSIONS:** All submittals for this project shall be submitted electronically. Please visit <http://bit.ly/3TYAyKa> and follow given instructions.

Notice of Availability  
Posted: March 18, 2026



Charlotte County Purchasing Division  
18500 Murdock Circle, Suite 344  
Port Charlotte, Florida 33948-1094

Phone 941.743.1378  
Fax 941.743.1384

### STATEMENT OF NO SUBMITTAL

If you **do not** intend to submit on this commodity/service, please return this form to the above address immediately. If this statement is not completed and returned, your company may be deleted from the Charlotte County Vendors' list for this commodity/service.

We, the undersigned, have declined to submit on requested commodity/service **RFP #20260190, EMERGENCY MEDICAL TRANSPORT BILLING SERVICES – ANNUAL CONTRACT**, for the following reason(s):

- \_\_\_\_\_ Specifications too "tight", i.e. geared toward one brand or manufacturer only (explain below).
- \_\_\_\_\_ Insufficient time to respond to the Request for Proposal.
- \_\_\_\_\_ We do not offer this product or service.
- \_\_\_\_\_ Our schedule would not permit us to perform.
- \_\_\_\_\_ Unable to meet bond/insurance requirements.
- \_\_\_\_\_ Unable to meet specifications.
- \_\_\_\_\_ Specifications are unclear (explain below).
- \_\_\_\_\_ Remove us from your vendors' list for this commodity/service.
- \_\_\_\_\_ Other (specify below).

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Contact Person (typed or printed): \_\_\_\_\_

Contact Person Signature: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Note:** Statement of No Submittal may be emailed to [Alisa.True@CharlotteCountyFL.gov](mailto:Alisa.True@CharlotteCountyFL.gov)

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**RFP NO. 20260190**

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**REQUEST FOR PROPOSAL  
EMERGENCY MEDICAL TRANSPORT BILLING SERVICES – ANNUAL CONTRACT  
RFP 20260190**

**PART I - INSTRUCTIONS**

**RP-01 INTENT:**

A. It is the intent of the County to select a firm who clearly demonstrates the highest level of ability and proven reliability to perform the professional services specified in the Scope of Services. Brief summaries applicable to the required work should be included with the proposal.

B. **Time and Date Due** - Charlotte County will accept proposals from individuals, corporations, partnerships, and other legal entities authorized to conduct business in the State of Florida until **3:00 p.m., APRIL 16, 2026.**

**RP-02 CONTRACT AWARDS/TERM OF CONTRACT:** The County anticipates entering into a contract with the one (1) firm who submits the proposal judged to be most advantageous to the County. The term of the contract will be effective from July 1, 2026 up to and including December 31, 2027 with option to renew for up to two additional on-year terms. The selected firm shall be required to sign a formal agreement in the standard form currently used by Charlotte County for professional services.

The Proposer understands that this RFP does not constitute an agreement or a contract with the Proposer. A proposal is not binding until proposals are reviewed and accepted by the Board of County Commissioners and a contract is executed by both parties.

**RP-03 DEVELOPMENT COSTS:** The County shall not be liable for any expense incurred in connection with preparation of a response to this Request for Proposal (RFP). Proposers should prepare a straightforward and concise description of the Proposers' ability to meet the requirements of the RFP.

**RP-04 INQUIRIES:** The County will not respond to oral inquiries. Proposers may submit written or emailed inquiries regarding this RFP to Purchasing, 18500 Murdock Circle, Suite 344, Port Charlotte, Florida 33948 or [Alisa.True@CharlotteCountyFl.gov](mailto:Alisa.True@CharlotteCountyFl.gov). The County will respond to written or emailed inquiries received at least five (5) calendar days prior to the RFP due date.

The County will record its responses to inquiries and any supplemental instructions in the form of written addenda. It shall be the responsibility of the Proposer, prior to submitting their proposals, to view the website <https://purchasingbids.charlottecountyfl.gov> to determine if addenda were issued, acknowledging and incorporating them into their proposal.

**RP-05 PROPOSAL SUBMISSION AND WITHDRAWAL:** The County will receive proposals electronically. Please visit <http://bit.ly/3TYAyKa> and follow given instructions.

Proposals received after the established deadline will not be opened. Proposers may withdraw their proposal by notifying the County in writing at any time prior to the due date. Proposals not so withdrawn shall, upon opening, constitute an irrevocable offer for a period of 120 days to provide Charlotte County the services set forth in these specifications until one of the proposals has been accepted by the Board of County Commissioners. Upon opening, proposals become "public records" and shall be subject to public disclosure in accordance with Chapter 119, Florida Statutes.

**RP-06 PROPOSAL RESTRICTIONS:** In accordance with Ordinance #96-002, the manufacture, use, display or other employment of any facsimile or reproduction of the Charlotte County Seal, without the express, prior, written approval of the Board of County Commissioners of Charlotte County, Florida, is hereby declared to be unlawful and punishable as a Second-Degree Misdemeanor as provided in Section 165.043, Florida Statutes.

**RP-07 DRUG FREE WORKPLACE:** Charlotte County is a Drug Free Workplace. It is strongly suggested that the attached Drug Free Workplace Form be signed and returned to this office with the proposal.

**RP-08 PUBLIC ENTITY CRIMES STATEMENT:** In accordance with Florida Statutes Sec. 287.133(2)(a), "A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods/services to a public entity, may not submit a bid on a contract with a public entity for construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a Contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, for Category Two, for a period of 36 months from the date of being placed on the convicted vendor list".

**RP-09 CANCELLATION/TERMINATION:** The County shall have the right to unilaterally cancel, terminate or suspend this Contract, in whole or in part, by providing the successful Proposer thirty (30) days written notice by certified mail.

It is expressly understood by the County and the Contractor that funding for any successive fiscal years is contingent upon appropriation of monies by the Board of County Commissioners. In the event funds are not available or not appropriated, the County reserves the right to terminate the Contract and/or individual leases. The County will be responsible for any outstanding invoices prior to the termination.

**RP-10 RESERVED RIGHTS:** The County reserves the right to accept or reject any and/or all proposals, to waive irregularities and technicalities, and to request resubmission. Any sole response received the first submission date may or may not be rejected by the County, depending on available competition and timely needs of the County. The County shall be the sole judge of the proposal and the resulting agreement that is in its best interest, and its decision shall be final.

The County reserves the right to accept or reject any or any part of the submissions, if it is deemed in the best interest of the County. The County, in its sole discretion, may expand the scope of work to include additional requirements. The County reserves the right to investigate as it deems necessary to determine the ability of any firm to perform the work or services requested. The firms, upon request shall provide information the County deems necessary in order to make a determination.

**RP-11 EQUAL EMPLOYMENT OPPORTUNITY CLAUSE:** Charlotte County, Florida, in accordance with the provisions of Title VII of The Civil Rights Act of 1964 (78 Stat. 252) and the Regulations of the Department of Commerce (15 CFR, Part 8) issued pursuant to such Act, hereby notifies all firms it will affirmatively ensure in any contract entered into pursuant to this advertisement, women-owned and minority business enterprises (collectively MBEs) will be afforded full opportunity to submit proposals in response to this advertisement and will not be discriminated against on the grounds of gender, race, color or national origin in consideration for an award. The County will consider the firm's status as an MBE or a certified MBE, and also the status of any sub-contractors or sub-consultants proposed to be utilized by the firm, within the evaluation process. Interested MBEs and certified MBEs are encouraged to respond.

All firms are hereby notified that the successful firms must and shall comply with the Civil Rights Act of 1964, the Age Discrimination in Employment Act, the Rehabilitation Act of 1973, the Americans with Disabilities Act and the Florida Civil Rights Act, all as amended. Specifically, firms agree that:

No person shall, on the grounds of race, color, sex, religion, age, disability, national origin or marital status, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program, activity or service funded through this Contract.

- Contractor will not discriminate against any employee or applicant for employment because of race, color, religion, sex, age, disability, national origin or marital status. Contractor agrees to post in a conspicuous place, available to employees and applicants for employment, notices setting forth the provisions of this non-discrimination clause.
- Contractor will, in all solicitations or advertisements regarding program activities, services provided or applications for employment, state that all qualified applicants will receive consideration for services or employment without regard to race, color, religion, sex, age, disability, national origin or marital status.
- County may require Contractor to submit reports as may be necessary to indicate non-discrimination. County officials will be permitted access to Contractor's books, records, accounts and other sources of information and its facilities as may be pertinent to ascertain compliance with non-discrimination laws.

It is expressly understood that County shall have the right to terminate this Contract upon receipt of evidence of discrimination.

**RP-12 PAYMENT:** Request for payment must be submitted to Charlotte County Purchasing on a form approved by the County in accordance with contract documents. Price shall be net and all invoices payable according to the Local Government Prompt Payment Act (F.S.218.74).

**RP-13 PERFORMANCE EVALUATION:** At the end of the Contract, the receiving department will evaluate the successful Proposers' performance. This evaluation will become public record.

**RP-14 INSURANCE REQUIREMENTS:** Contractor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.

The insurance requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The County in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this Contract by the Contractor, his agents, representatives, employees, or subcontractors. Contractor is free to purchase such additional insurance as may be determined necessary.

A. **MINIMUM SCOPE AND LIMITS OF INSURANCE** - Contractor shall provide coverage with limits of liability not less than those stated below. An excess liability policy or umbrella liability policy may be used to meet the minimum liability requirements provided that the coverage is written on a "following form" basis.

1. **Commercial General Liability – Occurrence Form (CG 00 01)**

Policy shall include bodily injury, property damage, broad form contractual liability and Explosion, Collapse and Underground (XCU) coverage.

- General Aggregate \$2,000,000
- Each Occurrence \$1,000,000

- a. The policy shall be endorsed to include the following additional insured language: "Charlotte County a political subdivision of the state of Florida and it officers, employees, agents and volunteers" shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor.
- b. Contractor's subcontractors shall be subject to the same minimum requirements identified above.
- c. Policy shall be endorsed for a waiver of subrogation against the Charlotte County.

2. **Automobile Liability**

Bodily injury and property damage for any owned, hired, and non-owned vehicles used in the performance of this Contract. Automobile liability must be written on a standard ISO form (CA 00 01) covering any auto (Code 1), or if Contractor has no owned autos, hired (Code 8) and non-owned (Code 9) autos.

Combined Single Limit (CSL) \$1,000,000

- a. The policy shall be endorsed to include the following additional insured language: "Charlotte County a political subdivision of the state of Florida and it officers, employees, agents and volunteers" shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of the Contractor, including automobiles owned, leased, hired or borrowed by the Contractor".
- b. Contractor's sub-contractors shall be subject to the same minimum requirements identified in this section.
- c. Policy shall contain a waiver of subrogation against the Charlotte County.

3. **Worker's Compensation and Employers' Liability**

Workers' Compensation	Statutory
Employers' Liability	
Each Accident, bodily injury or disease	\$1,000,000

- a. Policy shall contain a waiver of subrogation against the Charlotte County.
- b. Contractor's sub-contractors shall be subject to the same minimum requirements identified in this section.
- c. If the contractor has no employees the contractor must submit to the County the Workers Compensation Exemption from the State of Florida.

4. **Professional Liability (Errors and Omissions Liability) for Prime Contractors**

- a. Estimated Projection Construction Cost up to **\$9,999,999**

Each Claim	\$1,000,000
Annual Aggregate	\$2,000,000
- b. Estimated Projection Construction Cost from **\$10,000,000 to \$19,999,999**

Each Claim	\$2,000,000
Annual Aggregate	\$2,000,000
- c. Estimated Projection Construction Cost from **\$20,000,000 to \$40,000,000**

Each Claim	\$3,000,000
Annual Aggregate	\$3,000,000

d. In the event that any professional liability insurance required by this Contract is written on a claims-made basis, Contractor warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage will be

maintained or an extended discovery period will be exercised for a period of five (5) years beginning at the time work under this Contract is completed.

e. Policy shall contain a waiver of subrogation against Charlotte County.

#### 5. **Professional Liability (Errors and Omissions Liability) for Subcontractors**

In addition to the insurance requirements for the Contractor, the contractor's registered sub-contractors (including structural, civil, mechanical, plumbing, electrical engineering, landscape architecture, survey, geotechnical and materials testing) are required to carry Professional Liability insurance at the same levels and conditions as the Contractor.

**Additional Insured** – All policies, **except** for the Workers Compensation and Professional Liability shall contain endorsements naming the County its officers, employees, agents and volunteers as additional insured with respect to liabilities arising out of the performance of services contained herein. The additional insured endorsements shall not limit the scope of coverage for the County to vicarious liability but shall allow coverage for the County to full extent provided by the policy, even if those limits exceed those required by this contract. Such additional insured coverage shall be at least as broad as Additional Insured (Form B) endorsement form ISO, CG 20 10 11 85 or both CG 20 10 and CG 20 37 if later revisions used.

**Waiver of Subrogation Rights** – The Contractor shall require the carriers of required coverages to waive all rights of subrogation against the County, its officers, employees, agents and volunteers. Contractor agrees to obtain any endorsement that may be necessary to affect this waiver of subrogation. All general or auto liability insurance coverage provided shall not prohibit the Contractor and Contractor's employees or agents from waiving the right of subrogation prior to a loss or claim. The Contractor hereby waives all rights of subrogation against the County.

**Policies Primary and Non-Contributory** – For any claims related to this contract, the Contractor's insurance coverage shall be primary insurance as respects the County, its officers, employees, agents and volunteers. Any insurance or self-insurance maintained by the County, its officers, employees, agents or volunteers shall be excess of the Contractor's insurance and shall not contribute with it.

**Severability of Interests** – The Contractor agrees to ensure that coverage provided to meet these requirements is applicable separately to each insured and there will be no cross liability exclusions that preclude coverage for suits between the Contractor and the County or between the County and any other insured or additional insured under the policy.

**Proof of Coverage** - Prior to the commencement of performance of services the Contractor shall furnish to the County Purchasing Division Certificates of Insurance and amendatory endorsements or copies of the applicable policy language effecting coverage required. These certificates shall provide that such insurance shall not be terminated or expire without notice thereof in accordance with the policy provisions and Contractor shall maintain such insurance from the time the Contractor commences performance of services until completion of such services. Within seven (7) calendar days of notice of award, the Contractor shall furnish a copy of the Declaration page and required endorsements for all applicable policies and will provide complete certified copies of the policies and endorsements immediately upon request.

**Acceptability of insurance carrier** – Unless otherwise approved by Risk Management, Insurance shall be written by insurers authorized to do business in the State of Florida and with a minimum Best Insurance Guide rating of "A:VII".

**Deductibles and Self-Insured Retention** – Any and all deductibles or self-insured retentions in excess of \$10,000 shall be declared to and approved by Risk Management. The County may require the Contractor to purchase coverage with a lower deductible or retention or provide proof of ability to pay losses and related investigations, claim administration and defense expenses within the deductible or retention.

**Failure to Procure Coverage** – In the event that any policy of insurance required under this contract does not comply with the requirements, is not procured or is cancelled and not replaced, the County has the right but not the obligation or duty to terminate the contract or obtain insurance if it deems necessary and any premiums paid by the County will be promptly reimbursed by the Contractor or County payments to the Contractor will be reduced to pay for County purchased insurance.

**Insurance Review** – Insurance requirements are subject to periodic review by the County. The Risk Manager or designee is authorized, but not required, to reduce, waive, or suspend any insurance requirements whenever Risk Management determines that any of the required insurance is not available, is unreasonably priced or is not needed to protect the interests of the County. In addition, if Risk Management determines that heretofore, unreasonably or unavailable types of insurance coverage or coverage limits become reasonably priced or available, the Risk Manager or designee is authorized, but not required, to change the above insurance requirements to require additional types of insurance coverage or higher coverage limits, provided that any such change is reasonable in light of past claims against the County, inflation, or any other item reasonably related to the County's risk. Any change requiring additional types of insurance coverage or higher coverage limits must be made by amendment to this contract. Contractor agrees to execute any such amendment within thirty (30) days of receipt.

Any failure, actual, or alleged, on part of the County to monitor or enforce compliance with any of the insurance and indemnification requirements will not be deemed as a waiver of any rights on the part to the County.

**RP-15 UNAUTHORIZED ALIEN WORKERS:** Charlotte County will not intentionally award publicly funded contracts to any contractor who knowingly employs unauthorized alien workers, constituting a violation of the employment provisions contained in 8 U.S.C. Section 1324a [Section 274A of the Immigration and Nationality Act ("INA")]. The County shall consider employment by any Contractor of unauthorized aliens a violation of Section 274A of the INA. Such violation by the Contractor of the employment provisions contained in Section 274A of the INA shall be grounds for termination of this Agreement by the County. In addition, pursuant to Section 448.095 of the Florida Statutes, all persons or firms entering into contracts with Charlotte County are required to register with, and use, the E-Verify system of the U.S. Department of Homeland Security to electronically verify the employment eligibility of all newly hired employees. The County may terminate this Agreement for failure on the part of the Contractor to use E-Verify. Contract termination for failure to use E-Verify is not considered a breach of contract pursuant to s. 448.095(2)(c)3, *Fla. Stat.*

**RP-16 EMPLOYEE BACKGROUND CHECK:** If an owner, except a stockholder in a publicly traded corporation, or an employee of the Contractor has been convicted of any offenses requiring registration as a sexual offender or sexual predator, regardless of the location of conviction, the Contractor shall ensure that the offender's or predator's work on the project is consistent with the terms of his probation and registry requirements.

**RP-17 PUBLIC RECORDS CLAUSE TO CONTRACTORS "ACTING ON BEHALF OF THE COUNTY":** Pursuant to Section 119.0701 of the Florida Statutes, Contractors acting on behalf of the County must comply with the public records laws, specifically: a) keep and maintain public records required by the County to perform the contracted services; b) upon request from the County's custodian of public records, provide the County with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119 of the Florida Statutes or as otherwise provided by law; c) ensure that public records that are exempt or confidential from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract; and d) upon completion of the contract, keep and maintain all public records required by the County to perform the service, and meet all applicable requirements for retaining public records.

**IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR'S DUTY TO RETAIN AND PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE COUNTY'S CUSTODIAN OF PUBLIC RECORDS AT (941) 743-1441, E-MAIL TO RECORDS@CHARLOTTECOUNTYFL.GOV, 18500 MURDOCK CIRCLE, BLDG. B, Suite 109, PORT CHARLOTTE, FLORIDA 33948.**

**RP-18 SOCIAL, POLITICAL, OR IDEOLOGICAL INTERESTS:** Charlotte County will not request documentation of, or consider a vendor's social, political, or ideological interests when determining if the vendor is a responsible vendor. Charlotte County does not give preference to vendors based on social, political, or ideological interests.

**END OF PART I**

**PART II  
SCOPE OF SERVICES**

**RP-19 PROJECT DESCRIPTION:** Charlotte County is issuing this Request for Proposal (RFP) for the purpose of engaging a qualified Contractor to provide Emergency Medical Services (EMS) Patient Accounts Receivable Services (PARS) for Charlotte County, Florida. Services include, but are not limited to, data entry, data processing, billing services, insurance claims filing, collection services, mailing of notices, internal reporting, account follow-up, customer service, external reporting, compliance, and training of EMS personnel in the use of systems, procedures, and documentation.

**RP-20 BACKGROUND/HISTORIC INFORMATION:** The following information pertains to available historical information regarding the number of transports and payer mix. All information is the best available, but the Proposer should understand that it is solely responsible for determining the validity and accuracy of the service mix, payer mix, potential collection rates, and estimated net collections.

A. Transports – There are an average of 1,750 transports per month. The number of transports for Advanced Life Support (ALS) Emergency, ALS Non-Emergency, Basic Life Support (BLS) Emergency, BLS Non-Emergency, ALS 2, Specialty Care Transport (SCT) and Treatment Without Transport (TWT) for fiscal year 2025 was as follows:

Total Billable	BLS N/E	BLS-E	ALS N/E	ALS-E	ALS2	SCT	TWT	TOTAL
<b>FY2025</b>	0	5686	1	18921	822	0	1275	27087

B. Current Services – The current services are being provided by R1 RCM Inc.

C. Pricing/Fees –3.25% and \$9.00 for Medicaid.

D. Current Fee Schedule for each level of service:

ALS Emergency:	\$700
ALS Non-Emergency:	\$650
BLS Emergency:	\$650
BLS Non-Emergency:	\$650
ALS 2:	\$750
SCT:	\$800
Mileage:	\$ 12
Treatment No Transport:	\$175
Stand By:	\$150/hour

E. Statistical information:

FISCAL YEAR	FY2024	FY2025
Total Billable	\$26,183.00	\$27,087.00
Gross Charges	\$19,268,632.10	\$20,047,550.04
Adjustments	\$15,849,386.32	\$14,929,198.81
Net Charges	\$14,407,682.59	\$15,306,015.00
Receipts	\$11,256,765.20	\$11,719,043.80
Amount Forward to Collections	\$3,082,427.11	\$3,117,610.55
Average Revenue Collected per Transport	\$429.00	\$432.00

F. Below is a list of the primary transport hospitals and medical facilities along with the percentage for each.

DESTINATION	NUMBER OF RUNS	PERCENT OF TOTAL RUNS
Fawcett Memorial Hospital	9,664	35.9%
No Transports/Patient Refusal	1,476	5.5%
Advent Health Port Charlotte	7,643	28.4%
Englewood Community Hospital	3,641	13.5%
North Port Freestanding ER (SMH)	926	3.4%

Lee Memorial Hospital	50	0.2%
Venice Regional Bayfront Health	295	1.1%
Sarasota Memorial Hospital (Main Campus)	109	0.4%
Cape Coral Hospital	240	0.9%
Gulf Coast Medical Center	610	2.3%
Tampa General Hospital	4	0.0%
Doctors Hospital of Sarasota	3	0.0%
All Children's Hospital	6	0.0%
Blake Medical Center	10	0.0%
Riverside Behavioral Center	2	0.0%
DeSoto Memorial Hospital	48	0.2%

G. Percentages: In 2024 and 2025, the County's transport payer mix (percentage) for charges and the County's transport payer mix (percentage) for payments are as follows:

Charge Mix	Medicare	Medicaid	Commercial	Self Pay
<b>FY 2024</b>	62.6%	1.9%	17.9%	15.5%
<b>FY 2025</b>	62.4%	1.9%	19.6%	13.8

Payer Mix	Medicare	Medicaid	Commercial	Self Pay
<b>FY 2024</b>	74.8%	2.3%	18.9%	1.6%
<b>FY 2025</b>	75.1%	2.3%	19.2%	1.4%

H. The County considers an account as "delinquent" after six (6) months.

**RP-21 SCOPE OF SERVICES:**

A. **Billing Services** - The Contractor will be responsible for collecting all applicable and appropriate fees for EMS from federal and state healthcare programs; other third-party payers; and patients. The Contractor is to utilize generally accepted EMS collection methods as proposed by the Contractor and approved by the County.

The County intends that the Contractor will follow appropriate procedures to collect fees generated from EMS services. This will include the filing of insurance claims to third party payers and submitting invoices and statements to patients. The County will establish all fees and charges for services provided by the EMS Division.

At a minimum, the Contractor shall file insurance claims electronically to the Medicare Carrier and State Medicaid program for reimbursement. The Contractor will use best efforts to submit insurance claims electronically to other major insurers of the serviced patients. The Contractor shall implement processes to collect all applicable co-insurance and deductibles from the patient or their secondary insurers.

The County will establish and maintain a lockbox at a financial institution for deposit of fees collected by the Contractor. The lockbox will provide the Contractor with all documentation accompanying payments or received at the lockbox.

The Contractor is responsible for the billing, processing, and collection of EMS fees. The Contractor's services will include, but will not be limited to, data processing; management information reporting; electronic storage of records; electronic and paper billing, claims filing and invoicing; responding to all billing/insurance related inquiries; postage; printing; forms; stationary; envelopes; mailings; communications costs; and required computer hardware and software necessary to effectively provide services.

The Contractor shall:

- Provide billing services for County EMS services, as required using a billing system that conforms to Generally Accepted Accounting Principles (GAAP). This includes maintaining appropriate accounting procedures that provide for reconciling all payments; bank deposits; receivables; billings; patient accounts; adjustments; and refunds between the Contractor's billing system and County records.

- Maintain updated and current technology that will continuously provide the highest level of reimbursement and patient service possible. Contractor's system must have the ability to customize billing forms; follow-up letters; statements; invoices; and notices per County requirements.
- Ensure that all required documentation, provider registration and agreements with payers (e.g. Medicare, Florida Medicaid) are filed and maintained, and that the County is apprised of important changes to industry regulations and requirements.
- Have the ability to receive and translate electronic Patient Care Records (ePCR) and related documentation from the County's ePCR system into collectible accounts, using a Contractor supplied mechanism. The County currently utilizes Image Trend software for field data collection and ePCR creation. The Contractor must be capable of receiving and translating this information from any EMS data collection system used by the County in the future. Additionally, the Contractor shall have the ability to access payment and other necessary patient information from the County electronically.
- Agree to bear any costs associated with incompatibility due to future upgrades and changes in the County's ePCR vendor.
- Forward an invoice and County Notice of Privacy Policy (NPP) in the first mailing within seven (7) business days to each patient transported by the County upon receipt transport information from the County.
- Forward a patient satisfaction survey at a minimum of 10% of patient accounts. Shall have the ability to provide an online solution with a hyperlink to that survey provided on each invoice. Patient satisfaction survey results shall be provided to the County on a quarterly basis.
- Forward statements to insured patients (except Medicaid recipients) on a regular cycle not to exceed forty-five (45) days between mailings from the initial invoice until the account is appropriately closed in accordance with agreed upon procedures.
- The Contractor shall have the ability to be fully integrated with County facility hospitals to receive updated patient insurance and patient demographics for patients transported by the County.
- Establish a process to validate patient information provided by County; identify insurance eligibility; gather information in addition to that provided by County which is necessary for processing a claim; and handle returned mail/incorrect addresses. This includes establishing a working relationship with hospitals and insurance carriers in the area to obtain/verify patient insurance and contact information.
- Research accounts provided to Contractor by County with inadequate billing information by reviewing current databases; utilizing services such as skip-tracing; contacting the receiving hospital to obtain admitting/registration information; and telephoning patients or responsible parties to obtain needed information.
- Obtain patient or guardian signatures and authorizations when such signatures are required and not transmitted to the Contractor by the County with the ePCR.
- Promptly submit all Medicare, Medicaid and insurance company claims for reimbursement upon receipt of adequate insurance information necessary to file a claim and shall keep logs confirming all electronic submissions. Secondary insurance provider claims shall be submitted after the primary insurance provider has acted on the claim. Submit claims electronically to insurance companies that require electronic submission to expedite payment. Shall have the ability to submit secondary and tertiary claims electronically.
- Post payments received on account within three (3) business days.
- Post contractual adjustments on patient accounts within 10 business days after primary insurance provider has paid.
- The Contractor shall have the ability to process credit card payments through a toll-free exchange and a secure web site. The Contractor shall maintain a separate merchant number to collect credit card payments made by patients on behalf of the County.
- Payments processed and collected by credit card shall be remitted to the County within one (1) business day via direct deposit into account generated by the County.

- Provide appeal support to the County for Medicaid and Medicare audits. The Contractor shall document and keep the County notified during each phase of the audit process.
- Agree to maintain audit trail on all changes made on accounts, HIPAA requests and all communications.
- Forward statements to insured patients (except Medicaid recipients) on a regular cycle not to exceed 45 days between mailings from initial invoice until the account is appropriately closed in accordance with agreed upon procedures.
- Respond to requests and inquiries from patients and payers within two (2) business days when additional information, records or documentation is requested. All written, electronic and verbal patient communications shall be documented in patient accounts for tracking purposes and creation of an audit trail.
- Notify the County of billing errors and customer complaints within two (2) business days.
- Be responsible for filing all appeals for denied claims or partially denied claims when an internal review shows justification for reimbursement of the claim. This shall occur within 20 business days of notification of denial. The Contractor shall be responsible for all costs of appeals, fair hearings, or administrative law judge hearings unless County agrees in advance to pay a portion of the costs. Notify the County of appeal determination in a timely manner.
- File probate and monitor bankruptcy cases for County accounts and submit information to the County. The Contractor shall respond to County requests and post payments/adjustments related to probate and bankruptcy proceedings made by the County.
- Provide sufficient customer service representatives to assist patients and third-party payers with billing inquiries and requests. Communications between parties shall be documented.
- Contractor shall provide a designated liaison for patient/payer concerns.
- Provide a toll-free exchange for customer service and patient inquiries, answered as designated by the County. Multi-lingual (at minimum English and Spanish) customer service agents must be available to assist callers Monday through Friday between the hours of 8:00 am and 5:00 pm Eastern Standard Time.
- Provide patient access to billing information through a secure web site to allow patients to review their billing information, submit insurance information, make payments, and request corrections.
- Provide the County with access to all County accounts, data and information maintained in the automated system of the Contractor. This can be done through web or other comparable access to ad hoc reports, patient invoices, and related billing documents and information. Contractor shall be responsible for providing any necessary software to effectuate this access.
- Provide the County with secure access to all statements, insurance information, payment history and notes made on patient accounts.
- Negotiate and arrange modified payment schedules for individuals unable to pay full amount when billed. The Contractor will not lower any billed amount without the prior written approval of the County.
- If the patient/debtor makes monthly payments, the Contractor shall send out monthly statements, showing the balance outstanding on account.
- Provide the County or designated collection agency with all unpaid invoices along with the complete processing history once accounts are eligible under the County's delinquent account policy.
- Shall have the ability to forward collection accounts electronically to the County collection agency on a monthly basis.
- Immediately forward accounts with errors to the County's collections agency when the Contractor is unable to resolve errors to a credible address.
- Forward all correspondences received by Contractor on behalf of County to the County within 30 business days for appropriate handling.

- Process and forward refund requests electronically to the County within 30 business days in order for the County to issue a check to resolve overpayments, credit balances, or payments received in error. Contractor must provide County with copies of supporting documentation for refunds to be made.
- Facilitate monthly meetings between key Contractor staff and County staff to review performance; discuss problems; identify special needs; and assure an open dialog to support cooperation between the Contractor and County. Meetings can be conducted electronically or in person.
- Have a minimum standard of 68% collection of revenue on net billable ground transports. If unable to perform in revenue collections, barring any unforeseen circumstances (i.e. economy), the County will have the right to terminate contract.

**B. HIPAA Compliance** - Contractor shall have a designated HIPAA Compliance Officer appointed to oversee Contractor's compliance with HIPAA requirements.

Contractor shall execute a Business Associate Agreement providing satisfactory assurances under the provisions of the HIPAA privacy and security regulations agreeing that Contractor shall safeguard County's protected health information in accordance with the standards set forth in the privacy, security and other associated rules.

The Contractor will implement a system where all records (paper and/or electronic) will be maintained in an electronic format that is readily accessible to County personnel and that meets all federal and state requirements for maintaining and storing such patient medical information. The Contractor shall be responsible for proper security of confidential information and data in all forms and shall provide an appropriate shredding and data destruction method which meets the requirements of the regulations. Record retention policies of the Contractor must be in compliance with Florida record retention requirements.

Contractor shall have in place a comprehensive HIPAA compliance plan for adhering to federal and state privacy and security requirements. Contractor shall comply with other provisions of HIPAA including the transaction set requirements, security provisions and the Health Information Technology for Economic and Clinical Health Act of 2009.

Contractor shall forward County Notice of Privacy Policy (NPP) to each patient transported by the County with the first mailing to the patient.

**C. Compliance Plan** - Contractor shall have a designated Compliance Officer appointed to oversee Contractor's compliance with applicable federal, state and local requirements.

Contractor shall have in place a Compliance Plan consistent with the intent and activities included in the U.S. Office of Inspector General (OIG) Compliance Program Guidance for Third Party Medical Billing Companies and any successor publications.

Contractor shall have in place a compliance plan consistent with the intent and activities included in the Fair and Accurate Credit Transactions Act and related "Red Flag Rules" as enacted by the Federal Trade Commission.

Contractor shall use up-to-date knowledge and information regarding coding procedures, assigning diagnostic codes and proper preparation of electronic and paper insurance filings to ensure compliance. Contractor shall monitor all billing and regulatory changes impacting EMS reimbursement and adjust systems to ensure regulatory compliance; and update the County of any such changes with an explanation of how it will affect the County and/or patients of the County.

Contractor shall insure appropriate controls are in place including a segregation of duties, whereby the same individual must not be able to enter billing, adjust billing, post payments, nor deposit funds; and maintain the necessary levels of security in their automated billing system to protect the County from loss.

Contractor shall demonstrate that appropriate controls are in place and complied with through maintaining a current Type II Statement on Auditing Standards No. 70 (Type II, SAS 70 or SSAE16) certification from an independent auditor.

An annual billing compliance audit will be conducted by a reputable third-party vendor that is experienced in Emergency Medical Services billing, compliance and auditing. This compliance auditor will be selected and paid for by the Contractor and approved by the County prior to services being rendered.

D. **Continuity of Operations** - Contractor shall have in place a written Continuity of Operations Plan. This plan shall provide for how the Contractor plans to operate in the event of a disaster or similar event which results in an interruption of the normal operating conditions of the Contractor's primary place of business providing services to the County or any of the support or technical aspects of that office. Contractor shall provide a system that will ensure complete and uninterrupted flow of services via back-up systems and a data recovery related plan or system should a disaster occur.

A plan for the redundant storage and prevention of loss of County's data shall be developed which ensures that County's data and Contractor's data and systems are backed-up in such a manner that an event that causes disruption to the primary data and systems does not affect the back-up data and systems.

E. **Training and Implementation** - Contractor shall provide on-site training on agency set-up, data collection procedures and the use of any mechanisms or equipment provided by the Contractor. Contractor to provide training programs for County use in on-going and new employee training. Contractor shall provide annual continuing education module for use with field and office personnel on data collection and patient care documentation. Continuing education may be accomplished either on site or through a web enabled distance learning system or similar technology.

Contractor shall commence implementation of services in such a manner as to be prepared to begin processing County claims in January 2027 and shall also coordinate with the existing service provider a transition of services with minimal disruption of services.

F. **Report Requirements** - Provide the County with timely comprehensive reports facilitating all required aspects of monitoring, evaluating, auditing and managing the services provided at least monthly and upon request of the County. These reports include accounting, fiscal, financial, statistical, and quality control reports and may include any or all aspects of data collected by Contractor.

The Contractor shall submit monthly reports to the County in an electronic format containing the following information:

- Transports performed by the County. Contractor shall contact the County to report any discrepancies.
- Monthly accounts receivable reconciliation that includes:
  - beginning A/R balance,
  - total charges for the prior month,
  - total credits by patient and major payer categories including:
    - payments
    - discounts
    - write-offs
    - contractual allowances
    - amounts turned over to collections agencies
    - adjustments
    - accounts receivable aging status by payer category
  - ending A/R balance
  - a running average of daily charges
  - total days in accounts receivable
- Total charges for the month by patient and major payer categories:
  - Medicare
  - Medicaid
  - Insurance
  - Self-pay
- Non-billed accounts awaiting County actions.
- Statistical indicator reports
- Total refunds processed
- Accounts filed for probate
- Audit summary report with accounts that have changed (i.e. level of service)

- Monthly report in a graphic format (i.e. dashboard) of key performance indicators
- Customer satisfaction survey results
- Reports must be submitted by the second week of the month for the preceding month

**G. Audits, Records, And Records Retention** - The Contractor shall agree:

1. To establish and maintain books, records, and documents (including electronic storage media) in accordance with generally accepted accounting procedures and practices, which sufficiently and properly reflect all revenues and expenditures of funds provided by the County under this contract.
2. To retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this contract for a period of five (5) years after termination of the contract, or if an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings or any litigation which may be based on the terms of this contract.
3. Upon completion or termination of the contract and at the request of the County, the Contractor will cooperate with the County to facilitate the duplication and transfer of any said records or documents during the required retention period as specified in paragraph 1 above.
4. To assure that these records shall be subject at all reasonable times to inspection, review, or audit by Federal, state, or other personnel duly authorized by the County.
5. Persons duly authorized by the County and Federal auditors, pursuant to 45 CFR, Part 92.36(l)(10), shall have full access and rights to examine any of the provider's contract and/or related records and documents, regardless of the form in which kept, at all reasonable times for as long as the records are retained.
6. To include these aforementioned audit and record keeping requirements in all approved subcontracts and assignments.
7. Each Quarter, perform a sampling audit of at least three percent (3%) to verify, at a minimum: level of service, condition code, claim processing errors, and not medically necessary accounts to maintain compliance. An audit summary report with findings shall be provided to the County.

**H. Monitoring** - To permit persons duly authorized by the County to inspect any records, papers, documents, facilities, goods, and services of the provider which are relevant to this contract, and to interview any clients and/or employees of the provider to assure the County of satisfactory performance of the terms and conditions of this contract.

Following such evaluation, the County will deliver to the provider a written report of its findings which will include written recommendations regarding the provider's performance of the terms and conditions of this contract. The provider will correct all noted deficiencies identified by the County within the specified period set forth in the recommendations. The provider's failure to correct noted deficiencies may, at the sole and exclusive discretion of the County, result in any one or more of the following actions: 1) the provider being deemed in breach or default of this contract; 2) the withholding of payments to the provider by the County; and 3) the termination of this contract for cause.

**RP-22 SUBMITTAL INFORMATION:** Each proposal shall comprehensively describe the Contractor's current practices and proposed activities for the services delineated in this RFP and the final agreement. The proposals shall be concise, contain a table of contents and follow the format and as delineated below.

**A. Letters of Transmittal** - Each proposal shall include a letter of transmittal that bears the signature and title of an authorized representative of the Proposer. The letter should indicate that the firm's proposal is a firm offer for a period of at least 120 days and that the firm will comply with the terms of the RFP. The letter shall indicate the existence and nature of any contemplated sub-contracting relationships. Any exceptions to the RFP requirements should be identified in the letter. The letter must indicate the signatory's ability to bind the offeror's company.

**B. Part One: Organizational Description** - The proposal shall include a description of the Contractor's:

1. Legal form and ownership, firm name or Joint Venture, business address and office location, telephone numbers, Federal Identification Tax Number or Social Security Number.
2. Age of the firm including years of experience, brief history, and average number of employees over the past five (5) years. Present size of organization including the number of employees, nature of services offered and breakdown of staff by discipline.

3. Provide the total number of professionals in your organization and the estimated number of professionals to be assigned to this project. Include a brief resume of key persons to be assigned to the project including, but not limited to:
  - a. Name and title
  - b. Job assignment for this project
  - c. Number of years with this firm
  - d. Number of years with other firms providing similar services
  - e. Experience and education
  - f. Active registrations, memberships or certifications
  - g. Other experience and qualifications relevant to this project

4. If a joint venture, list participating firms and outline specific areas of responsibility, including administrative, technical, and financial of each firm. Has this joint venture previously worked together? If yes, what projects? A copy of the joint venture agreement shall be provided.

5. If the firm is not a joint venture, list outside consultants anticipated to be used on this project, if any. When listing consultants, give the respective specialty of the firm.

C. **Part Two: Billing Services** - The Proposer must describe how they will approach the execution of this project and outline the specific services that it intends to provide to the County.

1. Describe clearly and concisely the tasks and activities that will be performed. Include a time/task schedule and develop a chart illustrating the overall sequence of events and time frame for each aspect of this project. In this section demonstrate an understanding of and solutions to the description of services. Discuss the extent of knowledge of Medicare, Florida Medicaid, and private insurance policies and procedures as related to patient billing, reimbursement, assignment of claims, itemized claims processing, duplicate payment processing and account refunds.

2. Describe how the organizational structure will ensure orderly communications, distribution of information, effective coordination of activities and accountability.

3. Describe how the team will implement control systems for time, budget and quality for this project.

4. Disclose any relevant information that the organization believes demonstrates its qualifications for the project and/or distinguishes the organization's proposal from other proposals.

5. The respondent must describe how it will manage the EMS accounts receivable of the County. At a minimum, the Proposer should describe its policies, procedures and time frames between actions (if applicable) for the following activities:

- a. Receipt of ePCR and related information from County
- b. Verification of ePCR and related information
- c. Validation of patient's insurance status
- d. HCPCS and ICD-10 coding procedures
- e. Data entry
- f. Claims processing
- g. Invoice/statement generation
- h. Claims submission
- i. Payment posting
- j. Account follow-up including Medicare and Medicaid claims
- k. Appeal processing
- l. Co-insurance/supplemental insurance processing
- m. Private pay account processing and follow-up
- n. Establishment of payment plans

7. Provide sample bills, forms and the messages of communication that will be utilized on each statement mailed.

6. Process used to identify:

- a. Accounts for write-offs
- b. Financial hardship adjustments
- c. Accounts to be turned over to collections agency

7. Process for identifying and effectuating refunds and credit balances

8. Customer service:
  - a. Handling patient concerns/complaints
  - b. Communicating with non-English speaking patients
  - c. Customer service training for employees
  - d. Reactive approach for customer service - dealing with customer service issues as they arise
  - e. Proactive approach for customer service – anticipating customer service issues before they arise

9. Process for establishing third party payer relationships

10. Identify the member or members of management team in place that will serve the County's account. Identify the number of accounts this management team services and where these accounts are located.

D. **Part Three: Compliance** - The Proposer shall provide a summary of the compliance activities of the Proposer to include training, policies, and procedures. Discuss the Proposer's compliance program and how the program meets or exceeds the requirements of the Center for Medicare Services and HIPAA. Discuss the importance of compliance within the organization and adhering to Medicare, Medicaid, State and Federal regulations and requirements. Include a listing of past/present penalties/findings (if any) from Medicare or Medicaid and their resolution.

Please provide detailed information on the designated compliance officer and their qualifications, training, and education. The Proposer shall provide a copy of its HIPAA policy and regulatory compliance plan for adhering to Federal and State healthcare program rules and regulations, including the "Red Flag Rules."

The Proposer shall furnish evidence that the Contractor and each of its employees have not been excluded from participation in State or Federal healthcare programs.

The Proposer shall provide a copy of a current Type II Statement on Auditing Standards No. 70 (Type II, SAS 70 or SSAE16) certification from an independent auditor.

E. **Part Four: Continuity of Operations** - The proposal shall provide a summary of the methods that the Proposer intends to use for the storage of records and the related security and disaster recovery plans; and how it plans to ensure continuity of operations to operate in the event of a disaster or similar event which results in an interruption of the normal operating conditions of the Contractor's primary place of business providing services to the County or any of the support or technical aspects of that office. Include details about how the plan is exercised to assure the plan produces the intended results.

The Proposer shall furnish a copy of the organization's continuity of operations and disaster recovery plan.

F. **Part Five: Report and Communications** - The Proposer shall describe in detail the monthly reports to be provided to County and provide model monthly reports under this section of the proposal. Sample reports shall include, at a minimum, new billing account reports, and any applicable Financial Reports.

G. **Part Six: Training and Implementation** - The Proposer shall describe in detail the training it will provide to the County. The method of delivery, topic, outline, and length of the training shall be detailed.

The Proposer shall provide a detailed implementation and cut-over plan within this section. This plan shall include a timeline and details on how the Proposer will assure a smooth transition and start-up of billing services when the contract commences. The plan shall include the necessary activities to ensure that the Contractor will initiate billing services on the agreed start date of the Contract, anticipated to be January 2027.

H. **Part Seven: Experience - Demonstrated Performance:** The proposal shall include a description of the Contractor's business volume and clients focusing on previous governmental experience. A complete list and brief description of each EMS billing service contract currently in progress or completed within the last five (5) years in ambulance billing and collections with at least two (2) years in government accounts. Include a description of the services rendered, length of contract, and annual number of claims billed. The Proposer must be able to demonstrate that it currently has gross billings for clients in excess of \$10 million; has experience in billing for a Florida based municipal EMS service; and EMS systems of similar size and complexity as County. Must show proof of three (3) existing contracts with a minimum of \$30,000 emergency 911 transactions per year; including non-emergency inter facility.

The Proposer shall be based in the United States and have an established reputation of permanency and reliability in the field of EMS accounts receivable services. Each Proposer shall furnish satisfactory evidence of its ability to provide the services described in this RFP.

References: The Proposer shall provide the names and contact persons for at least three (3) EMS clients with a minimum of 30,000 emergency 911 transactions per year as references to verify its performance as a patient accounts receivable service. The references shall include a description of the organization, date of contract, point of contact, address, and phone number of the Contractor's primary contact at the organization. References should include Florida based municipal organizations of similar size and complexity as County and one (1) reference of a client that utilizes Firehouse software, FH Medic software.

I. **Part Eight: General and Supplemental Information Requirements - Complaint Resolution Process:** The Proposer shall describe its complaint resolution process and how complaints are investigated and resolved. Include how information regarding complaints will be communicated with County.

J. **Part Nine: Pricing -** The Proposer shall provide a cost proposal for the full three (3) years covered under the Agreement. The cost proposal requires that the Proposer estimate the net revenue for each of the three (3) years based on the information provided in this RFP and project the cost for services to the County. Provide a total proposed fee as a percent of revenues collected related to the performance of these services, exclusive of Medicaid accounts. In accordance with Florida Statutes, provide a flat fee for each account identified and processed to Medicaid.

All fees and costs shall be included in the total pricing. This will include the cost of any software, hardware, forms, printing, phone charges, postage, and such. During the evaluation, the total net collections used to quantify the Contractor's fees will be estimated by the County. This will be done to ensure that all Proposals are equitably compared.

**END OF PART II**

**PART III  
PROPOSAL FORMAT & EVALUATION METHOD**

**RP-23 RULES FOR PROPOSALS:**

A. The proposal must name all persons or entities interested in the proposals as principals. The proposal must declare that it is made without collusion with any other person or entity submitting a proposal pursuant to this RFP.

B. The following is an excerpt from Charlotte County Resolution #2011-221 and applies to this proposal: **"Any questions regarding a project or submittal shall be directed to the designated person in the Purchasing Division for a response. From the time the notice of request for proposals is published until the contract is awarded, there shall not be any contact between a Proposer, agent or other representative and any member of the selection committee, user department, Administration, or any member of the Board of County Commissioners regarding the project or proposal submitted by any Proposer. Should any member of the selection committee initiate contact or fail to report any contact, such committee member may be subject to disciplinary action up to and including dismissal. If any Proposer, agent or other representative contacts any committee member, user department, Administration or member of the Board of County Commissioners regarding a request for proposals or submitted proposal, the Proposer is subject to sanctions up to and including having the County disqualify the firm's submittal."**

C. For your information, the members of the Professional Services Committee for this project are as follows:

Sandra Furtado, EMS Billing Specialist  
Jennifer Clore-Pingleton, Sr. Program Coordinator, Utilities  
Bryanna Robinson, Accounting Specialist, Budget and Administrative Services

**RP-24 PROPOSAL FORMAT:** Firms shall prepare their proposals using the format outlined in RP-26, Evaluation Method and Criteria.

Proposals are to be typed on the firm's letterhead, specifically referring to the project and the scope of services, containing all required information. That information is to be submitted electronically. Please visit <http://bit.ly/3TYAyKa> and follow given instructions.

**RP-26 EVALUATION METHOD AND CRITERIA:**

A. Weights - An evaluation team will review accepted proposals using the following criteria and percentages, which has an overall total 100:

Experience and Qualifications	15 points
Billing Services Approach	20 points
Compliance	15 points
Continuity of Operations	15 points
Reports	10 points
References	10 points
Cost	15 points

B. General - The County shall be the sole judge as to the merits of the proposal, and the resulting agreement. The County's decision will be final. **Please note that proposals will be evaluated on content, *not bulk*.**

C. Selection - The Professional Services Committee shall evaluate the proposals submitted by the firms. A short list of firms from proposals will be ranked in order and may be selected for public presentation. Final approval will be by the Board of County Commissioners.

**RP-27 ANTICIPATED SCHEDULE:** The projected schedule of events for this proposal is as follows:

03-18-26	County advertises for proposals
04-16-26	Proposal due date
05-01-26	Professional Services Committee short lists firms

**END OF PART III**

**PART IV - SUBMITTAL FORMS  
PROPOSAL SUBMITTAL SIGNATURE FORM**

The undersigned attests to his/her authority to submit this proposal and to bind the firm herein named to perform as per contract, if the firm is awarded the Contract by the County. The undersigned further certifies that he/she has read the Request for Proposal, Terms and Conditions, Insurance Requirements and any other documentation relating to this request and this proposal is submitted with full knowledge and understanding of the requirements and time constraints noted herein.

By signing this form, the Proposer hereby declares that this proposal is made without collusion with any other person or entity submitting a proposal pursuant to this RFP.

In accordance with section 287.135, Florida Statutes, the undersigned certifies that the company is not on the Scrutinized Companies with Activities in Sudan List, the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, and does not have business operations in Cuba or Syria (if applicable) or the Scrutinized Companies that Boycott Israel List, or is not participating in a boycott of Israel.

As Addenda are considered binding as if contained in the original specifications, it is critical that the Consultant acknowledge receipt of same. The submittal may be considered void if receipt of an addendum is not acknowledged.

Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_      Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_      Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_  
Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_      Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_      Addendum No. \_\_\_\_\_ Dated \_\_\_\_\_

Type of Organization (please check one):      INDIVIDUAL      ( )      PARTNERSHIP      ( )  
CORPORATION      ( )      JOINT VENTURE      ( )

\_\_\_\_\_  
Firm Name      Telephone

\_\_\_\_\_  
Fictitious or d/b/a Name      Federal Employer Identification Number (FEIN)

\_\_\_\_\_  
Home Office Address

\_\_\_\_\_  
City, State, Zip      Number of Years in Business

\_\_\_\_\_  
Address: Office Servicing Charlotte County, other than above

\_\_\_\_\_  
Name/Title of your Charlotte County Rep.      Telephone

\_\_\_\_\_  
Name/Title of Individual Binding Firm (Please Print)

\_\_\_\_\_  
Signature of Individual Binding Firm      Date

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

**(This form must be completed & returned)**

**DRUG FREE WORKPLACE FORM**

The undersigned vendor in accordance with Florida Statute 287.087 hereby certifies that \_\_\_\_\_  
does: (name of business)

- 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
- 4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5. Impose a sanction on or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

\_\_\_\_\_  
Proposer's Signature

\_\_\_\_\_  
Date

**NAME OF FIRM** \_\_\_\_\_  
(This form must be completed and returned)

**HUMAN TRAFFICKING AFFIDAVIT  
for Nongovernmental Entities Pursuant To FS. §787.06**

**Charlotte County Contract #20260190**

The undersigned on behalf of the entity listed below, (the "Nongovernmental Entity"), hereby attests under penalty of perjury as follows:

1. I am over the age of 18 and I have personal knowledge of the matters set forth except as otherwise set forth herein.
2. I am an officer or representative of the Nongovernmental Entity and authorized to provide this affidavit on the Company's behalf.
3. Nongovernmental Entity does not use coercion for labor or services as defined in Section 787.06, Florida Statutes.
4. This declaration is made pursuant to Section 92.525, Florida Statutes. I understand that making a false statement in this declaration may subject me to criminal penalties.

Under penalties of perjury, I declare that I have read the foregoing Human Trafficking Affidavit and that the facts stated in it are true.

Further Affiant sayeth naught.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Nongovernmental Entity

\_\_\_\_\_  
Date

**END OF PART IV**

**NAME OF FIRM** \_\_\_\_\_  
(This form must be completed and returned)