

Responses to Request for Proposal for Ambulance Billing Services Comparison

Requirement	Andre's		Paramedic Billing		MRS
Zoll	yes		yes		no
Rate %	4.50%		4.25%		4 to 5*
GEMT	0%		0%		4 to 5*
System Access	yes		yes		no
Disaster Plan	yes		yes		no
# of Clients	338		73		17
800 # Bilingual	yes		yes		no
Other Billing Options	yes		yes		no
Collection Services	no		yes		no
Certified Coders	yes		yes		n/a
Credit Card Payments	yes- no		yes- no		yes- 4.5% fee
	restrictions		restrictions		
*Rate would go to 5 on second year if certain revenue goal is met					