



SERVICE PROPOSAL

Medical Billing and Revenue Cycle Management

Prepared for: [Healthcare Provider / Clinic Name]

Prepared by: Medex Pro RCM Solutions

Date: [Proposal Date]

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Medical Billing and RCM Service Proposal

1. Executive Summary

Medex Pro RCM Solutions proposes to provide professional medical billing and revenue cycle management support for [Healthcare Provider / Clinic Name]. The goal is to help the practice improve claim accuracy, reduce denials, speed up collections, and maintain organized billing operations.

Our service model is designed for healthcare providers that need reliable billing support, transparent reporting, payer follow-up, and a structured workflow from patient eligibility through payment posting and accounts receivable follow-up.

2. Proposed Objectives

- Improve clean claim submission and reduce avoidable claim rejections.
- Support timely insurance verification, coding review, and claims processing.
- Follow up on unpaid claims, denied claims, and payer correspondence.
- Provide regular reporting so the provider can track billing performance.
- Protect patient information through appropriate administrative, technical, and physical safeguards.

3. Scope of Services

Service Area	Included Support
Patient Eligibility and Benefits	Verify insurance eligibility, benefits, copay, deductible, authorization requirements, and payer-specific notes where information is available.
Medical Billing and Claim Submission	Prepare and submit claims based on provider documentation, payer rules, and agreed workflow.
Medical Coding Support	Review coding information for billing support. Final clinical documentation responsibility remains with the provider.
Denial Management	Review denials, identify reason codes, prepare appeals or corrected claims where applicable, and track payer responses.
Accounts Receivable Follow-up	Follow up on unpaid claims, aging balances, payer delays, and claim status.
Payment Posting	Post insurance payments, adjustments, patient payments, and denial details according to available EOB/ERA information.
Provider Credentialing	Assist with payer enrollment, credentialing applications, revalidation support, and document tracking.

Reporting	Provide periodic reports covering claims submitted, collections, denials, aging, and key action items.
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4. RCM Workflow

Step	Workflow Activity
1	Receive provider schedule, patient demographics, insurance information, and encounter documentation.
2	Verify eligibility and collect billing requirements before claim submission where applicable.
3	Prepare claims and submit them through the approved clearinghouse or billing system.
4	Track claim acceptance, rejection, denial, payment, and pending status.
5	Work denied or unpaid claims based on payer responses and aging priority.
6	Post payments and adjustments, update accounts, and provide performance reporting.

5. Client Responsibilities

- Provide accurate patient demographics, insurance details, and required documents.
- Provide timely access to the billing software, clearinghouse, payer portals, and required systems.
- Maintain complete and accurate clinical documentation for all billed services.
- Respond to coding, credentialing, authorization, or documentation questions in a timely manner.
- Approve any required payer enrollment documents, appeals, or patient billing policies.

6. Implementation Plan

Phase	Timeline	Key Activities
Discovery and Access	Week 1	Confirm scope, systems, payer mix, contacts, user access, and document-sharing process.
Workflow Setup	Week 1-2	Set up billing workflow, reporting templates, claim submission rules, and communication channels.
Pilot Billing	Week 2-3	Process sample claims, validate claim flow, identify missing information, and refine workflow.
Full Operations	Week 3 onward	Begin regular billing cycle, denial follow-up, AR review, and reporting.

7. Pricing Options

Final pricing may be adjusted based on specialty, claim volume, payer mix, system access, credentialing requirements, and reporting needs.

Pricing Item	Proposed Terms
Setup Fee	[Insert setup fee or N/A]
Monthly Billing Fee	[Insert monthly fee or percentage of collections]
Credentialing Fee	[Insert per-provider / per-payer fee, if applicable]
Additional Services	[Insert rate for special projects, backlog cleanup, audit support, or custom reports]
Payment Terms	[Net 15 / Net 30 / Other]

8. Compliance and Confidentiality

Medex Pro RCM Solutions will handle patient and billing information with appropriate confidentiality and security practices. When Protected Health Information is involved, the parties should execute a Business Associate Agreement before PHI is shared.

- Access to PHI should be limited to authorized workforce members only.
- Systems should use role-based access, secure passwords, and appropriate access controls.
- PHI should be shared through secure systems or approved secure communication methods.
- Subcontractors or vendors that handle PHI should be required to follow appropriate privacy and security obligations.

9. Communication and Reporting

- Primary communication channel: [Email / Phone / Portal / Project Management Tool].
- Reporting frequency: [Weekly / Biweekly / Monthly].
- Standard reports may include claims submitted, payments posted, denials, AR aging, and action items.
- Urgent billing issues may be escalated to the designated provider contact.

10. Proposed Terms

Term	[Month-to-month / 12 months / Other]
Start Date	[Insert proposed start date]
Notice Period	[Insert cancellation notice period]

Systems Access	Provider will provide required access to billing platforms, payer portals, clearinghouse, and documentation systems.
BAA Requirement	A signed Business Associate Agreement should be completed before PHI is shared.
Final Agreement	This proposal may be incorporated into a final services agreement or statement of work.

Acceptance and Authorization

By signing below, the parties acknowledge that this proposal may be used as the basis for a final service agreement, statement of work, and Business Associate Agreement.

Healthcare Provider / Covered Entity	Medex Pro RCM Solutions
Name: _____	Name: _____
Title: _____	Title: _____
Signature: _____	Signature: _____
Date: _____	Date: _____

Template note: This proposal is a business template and should be customized for each client engagement.