



**RFQ #2212-121521**

**Third Party Administration of Workers' Compensation Benefits**

Addendum/Clarification No. 1

**January 14, 2022**

Questions:

- 1- Can you tell me the name of the Carrier for the workers compensation program? Is it PRISM or Safety National?
  - a. PRISM
  
- 2- Can you tell me if the incumbent TPA is still JT2? Or has that changed?
  - a. We are currently with AIMS.
  
- 3- Of the 275 open indem, what is the number of future medical claims?
  - a. 160
  
- 4- Our closest servicing office is in the Sacramento area, which is where we service the majority of our other Bay Area municipality programs. Please confirm this would be acceptable to the City.
  - a. A claim administration office needs to be within reasonable proximity to the San Francisco Bay Area. When the need for in-person meetings and/or trainings at the City premises arises, there is an expectation that the City's future TPA representatives will attend all required and requested meetings/trainings in-person.
  
- 5- Can the City please provide the number of OPEN claims (as of 12/31/2021) broken down by Medical Only, Indemnity and Future Medical Claims to be transferred to the new administrator?
  - a. Medical Only = 10  
Future Medical = 160  
Indemnity = 139
  
- 6- Can the City please provide the staffing model being provided by the current TPA? Please provide the title of the adjusters and how many open claims each one handles broken out by Indemnity, Future Medical and Medical Only.
  - a. 1 Senior Claims Examiner  
1 Future Medical Examiner  
1 Claims Assistant  
1 Manager
  
- 7- Are the current claims adjusters dedicated exclusively (working on no other accounts) to the City?
  - a. Senior Examiner is only working on Hayward's account
  - b. Future Medical Examiner is largely handling the City's account.



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- 8- In this RFP process, is the City requiring ALL staff to be dedicated exclusively (working on no other accounts)?
- a. Senior Claims Examiner should be exclusively dedicated to the City's account. The caseload of designated examiner should not exceed 125 open claims. Future Medical Examiner, Claims Manager/Supervisor, and Claims Assistant position may handle other claims, however, if claims frequency and customer request warrant, the account should be assigned on a fully dedicated basis. It is the City's expectation that if the Supervisor or Manager oversees adjusters who work on other programs, the City's account would be primary.
- 9- Does the City want the Supervisor position to be exclusively dedicated or can this position also oversee adjusters who work on other programs?
- a. In accordance with the RFP, the City's future TPA is expected to designate a full-time Claims Examiner to the City's account, who will act as the primary point of contact for the City. While the City's current TPA does not have a Supervisor position, the current Account Manager also oversees a second account; it is the City's expectation that if the Supervisor or Manager oversees adjusters who work on other programs, the City's account would be primary.
- 10- Can a proposer submit a staffing plan that weights the Future Medical and Medical Only claims on a 2:1 ratio or would the City prefer them to be weighted 1:1 to indemnity claims?
- a. City adheres to PRISM's counting method.
- 11- Please provide the average annual volume (2020 & 2021) of medical bills with associated charges, recommended allowance, Gross and net savings. How many pharmacy bills does the City average per year?
- a. Calendar Year 2020: 2961 Bills Processed - \$5,947,962 Gross Charges - \$4,807,409 Net Savings – 349 Pharmacy Bills  
  
Calendar Year 2021: 3076 Bills Processed - \$2,476,891 Gross Charges - \$1,722,462 Net Savings – 458 Pharmacy Bills
- 12- Could the City provide the annual volume (2020 & 2021) of Utilizations Review/Request for treatment authorizations completed at the adjuster, nurse, & medical director levels? Of those, how many went to peer review?
- a. Calendar Year 2021:  
204 Treatment Requests Approved by Examiner  
180 Treatment Requests Approved by Nurse  
193 Peer Reviews



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13- What is the average annual volume of telephonic case management and field case management cases?

- a. Calendar Year 2021:
  - 6 Telephonic Nurse Case Management Referrals
  - 1 Field Nurse Case Management Referrals

14- What is the volume of nurse triage calls?

- a. No Call Center Used

15- Do you have an MPN for your program? If so, who administers your MPN and is it a statewide or regional MPN?

- a. No

16- What is/are the name(s) of the City's current Managed Care Services provider(s) {i.e. – Bill Review, Utilization Review, Nurse Case Management, etc.}?

- a. Allied Managed Care

17- Does the City currently utilize a Medical Provider Network (MPN)?

- a. No

18- What is the total number of user I.D. / accesses to TPA RMIS System that the City will require?

- a. At least 10. Currently we have unlimited number.

19- For new loss projection purposes, based on the loss information provided under **Page 5 of the RFP – Background Information**, can the City confirm that the three (3) year averages for “annual NEW claims only” reported could be estimated/calculated appropriately as follows?:

- a. Medical Only = 42 claims
- b. Indemnity = 72 claims

If not, can the City please provide estimated new annual claim volume numbers that would serve as a baseline for all respondents to equally work off of when calculating program pricing for the City?

- a. Please see below:

CITY OF HAYWARD	FY 17-18	FY 18-19	FY 19-20	FY 20-21
Number of Medical-Only Cases Reported in FY	54	39	33	17
Number of Indemnity Cases Reported in FY	68	68	79	78



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CITY OF HAYWARD	FY 17-18	FY 18-19	FY 19-20	FY 20-21
Total Number of Indemnity Cases From All Years	315	280	311	275
Number of Cases in Which Notices of Legal	62	22	13	9

20- Of the current open inventory for FY 20-21, how many of the 275 claims are categorized as "Future Medical"?

a. 160

21- For claims administration and caseload volume purposes, understanding that an Indemnity claim will be calculated at a 1:1 ratio, what ratio does the City classify Future Medical claims to be calculated at, 1:1 or 2:1?

a. City adheres to PRISM's counting method.

22- In reference to page 5. Claims history: Is it possible to breakout the total number of future medical cases from the open indemnity cases stated by FY?

a. Medical Only = 10  
Future Medical = 160  
Indemnity = 139

23- Regarding the current claim team supporting the city, how many senior examiners, future medical examiners and claims assistants are currently on the program?

a. 1 Senior Claims Examiner  
1 Future Medical Examiner  
1 Claims Assistant  
1 Manager

24- What is the total open claim breakdown including Medical Only, Indemnity & Future Medical care?

a. Medical Only = 10  
Future Medical = 160  
Indemnity = 139

25- What is the Claims Management system being utilized by the Current TPA?

a. Ventiv Claims

26- Are all the open files paperless?

a. Yes



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27- Does the current TPA use "Master files" for multiple injuries?

a. No

28- What is the current staffing level? Is that a dedicated unit?

- a. 1 Senior Claims Examiner
- 1 Future Medical Examiner
- 1 Claims Assistant
- 1 Manager