THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FL
Request for Proposals for
Third Party Administration (TPA) Services
for the Self Funded Workers' Compensation
and
Liability Program
RFP NUMBER 065-PP10
Issued September 4, 2014
Addendum #1: Issued October 13, 2014

PURPOSE OF ADDENDUM

This Addendum has been prepared to provide updated timelines and additional information/answers to specific questions submitted by proposers.

ACKNOWLEDGMENT OF ADDENDUM TO RFP

As required in the RFP, proposers are reminded that they should either acknowledge receipt of this addendum on their proposal, or attach this addendum to their proposal. In order to acknowledge receipt of this addendum on their proposal, proposers should properly complete Proposal Forms.

STATUS OF ADDENDUM

To date, this is the first (1st) addendum that has been issued for RFP# 065-PP10, Third Party Administration (TPA) Services for the Self Funded Workers' Compensation and Liability Program RFP.

NOTE: PROPOSAL TIMELINES HAVE BEEN CHANGED. PLEASE SEE UPDATED TIMEFRAME BELOW: All references to the Proposal Return Date contained within the original RFP are now changed to these dates.

Task	*Timeframe*
M-DCPS releases RFP to vendors	**September 4, 2014**
Pre-proposal meeting	**September 18, 2014**
Written questions due to M-DCPS	**September 26, 2014**
Proposals due	**November 4, 2014**
Ad-Hoc Committee Meetings, including Interviews (if needed)	**November/December 2014**
Recommended Board Action	**January, 2015**

ADDITIONAL INFORMATION REQUESTED

The following is provided in response to proposers' specific requests for additional information:

1. Q: Your submission instructions state that the proposal should be sent as a Microsoft Word document. Will you accept a PDF document in lieu of Word?

A: We will accept the electronic copy of your proposal in a combination of PDF and Word formats. Please provide the text of your responses to the proposal forms in Word format. Signed forms and other attachments can be provided in PDF format.

2. Q: As the proposal forms are requested to be completed and submitted as Word documents, can you provide those to proposers as Word documents?

A: Addendum #1 will include a word version of the RFP document.

3. Q: The RFP indicates that the proposal should be sent to "Proposal Clerk" at Procurement and Materials Management, but there is no contact name. Please provide a contact name for that person.

A: The proposal responses should be directed to the "Proposal Clerk" as stated in the RFP.

4. Q: Will the Exhibit F reports (Historical Claims and Bill Review Data), which contain current loss runs, be broken out separately to include open Legal, Lost Time and Medical Only claims?

A: The report titled Loss and Claim Experience in Exhibit F provides a break out of Workers' Compensation claims data into Medical Only Claims and Indemnity Claims. The current system does not break out "Legal" claims.

5. Q: For the bill review savings, will you provide the following for each of the periods provided:

a. Fee Schedule savings
b. PPO savings
c. UR savings

A: The reports titled Bill Review Savings in Exhibit F provide total Bill Review Savings for each annual term. Bill Review Savings includes UR Savings and Fee Schedule Savings. A breakout is not available at this time.

PPO savings were:

	2011-12	2012-13	2013-14
PPO Savings	**$1,017,521.54**	**$1,236,705.67**	**$981,236.35**

6. Q: Regarding External Medical Bill Review Auditing, is this a service M-DCPS and/or your current TPA has already contracted for? If so, please provide vendor contact information and current costs for this service.

A: Yes, the current TPA contracts this service with:
Maddy Bowling & Associates
1869 Jahns Drive
Wheaton, IL 60187

The cost for the service is included in the current flat TPA fee.

7. Q: Since the all-inclusive pricing must include run-in fees for the transfer of data for the conversion, does your current TPA charge a fee to transfer data? If they charge a fee per policy year, please advise how many policy years of data will be transferred? Will these fees be paid by the School Board of Miami-Dade County or is the new TPA expected to pay these fees to the current TPA?

A: The contract with the current TPA requires the current TPA to include all costs associated with data transfer to be included in their flat fee. The data from all policy years must be transferred.

8. Q: Is it the District's expectation that the TPA set aside $100,000 out of the TPA service fees to fund the Wellness Initiatives?

A: Yes, the TPA is expected to set aside $100,000 for Wellness Initiatives.

9. Q: Does the School Board of Miami-Dade County intend to use their own subcontractor for Wellness Initiative Services or is the TPA expected to provide the subcontractor?

A: The Wellness Initiative contribution does not currently exist. We would expect that M-DCPS and the TPA would work together to find appropriate subcontractors which would be contracted through the TPA.

10. Q: How does the current TPA provide services for Legislative Liaisons? What lobby efforts on State and Federal issues have been provided by the current TPA in the last five years? If there is a dollar amount that has been expended, please provide that amount.

A. The current TPA employs a Governmental Affairs team to provide legislative, regulatory and industry liaison services. The mission of the Governmental Affairs team is to identify, track and advocate for insurance related issues.

State and Federal legislative initiatives are very important to the success of the District's self-funded claims management program. Specifically, the District is seeking a third party claims administrator which can demonstrate their ability to monitor and advocate for those legislative initiatives which would impact the District's program.

Examples of Florida-based legislative initiatives which are important to the District include but are not limited to potential changes in Sovereign Immunity (F.S. 768.28), Workers' Compensation (Chapter 440, Florida Statutes) as well as specific legislation on physician dispensing of pharmaceuticals and changes to Fee Schedules.

On the Federal level, the District is very interested in Congressional Reauthorization of the Terrorism Risk and Insurance Act (TRIA), and implementation of the previously passed SMART Act.

11. Q: Who are the current MBE/WBE/SBE providers utilized on Miami-Dade County's workers' compensation and liability programs?

A: The Board adheres to a policy of non-discrimination in educational programs, activities and employment and strives affirmatively to provide equal opportunity for all. The Board encourages the participation of local SBEs, MBEs and M/WBEs, but there is no actual percentage that is required in the solicitation.

12. Q: Section II - Page 9 – Hold Harmless/Indemnification. Please clarify as to the intent as it relates to the increase of liability on the part of the TPA. Is it the intention of the District that the TPA be liable for any and all damages, except those damages caused by the sole negligence or culpability of the Board? (e.g., if the TPA is determined to be 5% liable for certain damages, and the remaining 95% are attributable to the Board, is it the intent of the Board that the TPA bear responsibility for 100% of the damages?)

A: The District will negotiate contract terms with recommended Proposer. If your firm cannot agree to terms included in RFP, please note your deviation in your response.

13. Q: Section II - Page 3 - SBE/MBE and M/WBE Participation

a. Does the District require the Proposer participation? If yes, what is the required percentage for sub-contracting a SBE/MBE and/or M/WBE?

b. Who are the current SBE/MBE and/or M/WBE(s)? What is the current percent of participation?

A: The Board adheres to a policy of non-discrimination in educational programs, activities and employment and strives affirmatively to provide equal opportunity for all. The

Board encourages the participation of local SBEs, MBEs and M/WBEs, but there is no actual percentage that is required in the solicitation.

14. Q: Section III – Page 11 – Network Access and Development Services

a. Is the District satisfied with Coventry?

b. Will the District accept alternative and more comprehensive Network Access solutions?

A: a. Coventry is a vendor partner of the current TPA. M-DCPS does not contract directly with Coventry. M-DCPS has worked with Coventry to create programs that meet the needs of M-DCPS.

b. Yes.

15. Q: Section III – Page 2 – Current Staffing Description

a. Are the employees listed under workers' compensation staffing description all employed by Gallagher Bassett?

b. There appears to be some discrepancy between the current Gallagher Bassett contract and the staffing requirements in Section III – Page 2. Is the current staffing model indicated in Section III – Page 2 required? Is this the staffing model required to use as a basis for pricing?

A: a. No. Nurses are employed by Coventry.

b. Current staffing for Workers' Compensation is as follows:
1 Branch Manager
3 Claims Supervisors
1 Operations Supervisor
14 Adjusters
6 Claims Assistants
1 Client Liaison
1 Network Liaison
3 Nurse Consultants

Please see Staffing Requirements in RFP (Section III, Page 3). The RFP does not require a specific staffing model. However, proposers must provide requested details regarding staffing in their proposal.

16. Q: Section IV – Page 1 – Current Staffing Description

a. Are the employees listed under the liability staffing description employed by Gallagher Bassett?

b. Is the current staffing model indicated in Section IV –Page 2 required? Is this the staffing model required to use as a basis for pricing?

A: a. Yes.

b. The current liability staffing is as follows:

1 Claims Supervisor
5 Adjusters
1 Claims Assistant

Please see Staffing Requirements in RFP (Section IV, Pages 1-2). The RFP does not require a specific staffing model. However, proposers must provide requested details regarding staffing in their proposal.

17. Q: Exhibit F – Historical Claims and Bill Review Data

Will the District please provide detailed loss run in Excel to help ascertain status of claims, shelf life, and other pertinent information to properly underwrite and provide the District with an appropriate and best possible quote? We request comprehensive loss run in excel comparable to what is required for market excess insurance quotes. We will respectfully provide an FTP site to receive loss runs as necessary due to size of file or any capacity issues or concerns.

A: The reports provided in Exhibit F are not available in excel format. More detailed reports are not being provided at this time.

18. Q: Section III – Page 3 – Staffing Requirements. Provider Outcome Analysis

a. How frequently is a Provider Outcome Analysis required?

b. Please provide a current sample of a Provider Outcome Analysis provided to the District.

A: a. District staff and the current TPA perform quarterly claims reviews where every open claim is reviewed by the workers' compensation coordinator, the adjusters, the field case managers, if applicable, and to the extent needed, any medical manager, and if a matter of litigation, any outside counsel.

Additionally, the current TPA often provides reports of provider activity, including drugs dispensed from the physician's office, to assist in evaluating the outcomes of the program's medical providers. Many of these reports are in response to specific queries or discussions regarding issues or specific providers. These are not standardized reports.

b. Reports regarding specific medical providers will not be provided at this time.

19. Q: Section III – Page 10 – First Notice of Injury Services

a. Who currently provides call center services?

b. What are the current credentials and requirements for call center operators?

c. Are all incidents for workers' compensation and liability claims reported telephonically?

d. Are incident only records for workers' compensation and liability claims reported telephonically?

e. If Proposer can provide higher level of services for call center services that benefit the District, will the District accept call center services not based out of Miami or Florida?

f. What are the current rates for call center services?

A: a. Call center services are currently provided by Seltzer and Associates.

b. We do not require any professional designations for call center operators. Current credentials for call center staffing are a High School diploma plus 2 years minimum local (Miami-Dade, Broward and Monroe Counties) phone experience, and knowledge of the Miami-Dade area geography required. Call center staff also must be Bilingual English/Spanish.

c. All workers' compensation incidents are reported telephonically. The intake for liability claims is multifaceted. Claims can be reported in a variety of manners including but not limited to, attorney letters, phone calls, incident/police reports, etc. The District works very closely with all of our work site supervisors to ensure that risk management is notified of anything that could become a potential liability.

d. All workers' compensation incidents are reported telephonically. The intake for liability claims is multifaceted. Claims can be reported in a variety of manners including but not limited to, attorney letters, phone calls, incident/police reports, etc. The District works very closely with all of our work site supervisors to ensure that risk management is notified of anything that could become a potential liability.

e. Please see First Notice of Injury Services section of RFP (Section III, Page 10). The District will consider all proposals which meet the Minimum Requirements. A call center located in the South Florida area is preferred.

f. $14.25 per report.

20. Q: Section III – Page 10 – Claim Information System Services

a. How many licenses or users does the District require for on-line claim system access to workers' compensation claim files?

b. How many licenses or users does the District require for on-line claim system access to liability claim files?

A: a. There are approximately 46 users; however, the board reserves the right to add or remove users as needed at no additional cost to the District. The RMIS is used for both workers' compensation and liability claims.

b. There are approximately 46 users; however, the board reserves the right to add or remove users as needed at no additional cost to the District. The RMIS is used for both workers' compensation and liability claims.

21. Q: Section IV – Page 2 – Cost Proposal

a. Is indexing (Central Index Bureau) required on all bodily injury claims including Auto BI, Medical only and Indemnity?

b. How frequently are Index reports required?

A: a. The claims service instructions do not include a requirement regarding frequency of indexing.

b. The claims service instructions do not include a requirement regarding frequency of indexing.

22. Q: Section III – Page 3-4 – Cost Proposal Requirements

Please confirm annual flat fee shall include bill review (fee schedule reduction) and network access fees.

A: Yes.

23. Q: Section III – Page 5 – Audit of Files and Procedures

We understand we will make available our internal audits and external SSAE 16 (SOC 1) Type II audits to the District. Please confirm the District will pay for auditors and that the TPA is not responsible for auditor fees. If not, how much has the audit cost the current TPA over each year over the last three years? Will the District provide a copy of the incumbent's last SSAE 16 audit results?

A: The TPA is responsible for the cost of the bill review audits included in the RFP requirements. The cost of bill review audits to the current TPA has not been disclosed. The TPA is responsible for the cost of their SSAE-16 audit. Attached is requested report.

24. Q: Section III – Page 6 – Scope of Services

Scope of service requires wellness initiative services. Please provide current wellness initiative service program, if any.

A: M-DCPS currently manages its entire disease management program through the District branded, Rebuilding Me, for workers' compensation claimants on a one-on-one basis. We also have a targeted prevention program that includes lectures, demonstrations, and activities for a high-risk, high dollar population. The workers' compensation program participates in joint District-wide initiatives with the District's healthcare wellness program. This function is provided through an on-site nurse, currently employed by Coventry.

25. Q: Section III – Page 6 – Scope of Services

Scope of service requires communicable disease management program services. Please provide current communicable disease management program services.

A: All communicable disease claims are treated the same as any other workers' compensation claim. However, they are assigned to a dedicated adjuster.

26. Q: Please provide a sample of reports currently provided to the District.

A: We are not able to provide a listing of all required reports. Currently, many standardized reports are posted on the current TPA's website monthly. The website provides users the ability to create a personalized dashboard of claims data and the ability to run/order many reports. Also, the current TPA provides reports to M-DCPS staff as requested and/or in response to various issues.

27. Q: Does the District require any single or bi-directional electronic interfaces to its own RMIS system, or human resources or payroll system? Will the District consider electronic data exchanges to create information exchange efficiencies?

A: Currently, the District is providing outgoing data via an electronic interface with limited census information for pre-populating the first report of injury form.

28. Q: Section III – Page 11 – Network Access & Development Services

a. The RFP requires local provider relations staff member. Is a local provider relations staff member required if the TPA provides toll free provider inquiry line for its own bill review and network access services?

b. If yes, approximately how many provider inquiries does the District currently receive on an annual basis?

c. What other tasks is this current position performing?

A: a. The responsibilities of this position are described in Question #67.

b. Provider inquiries are not tracked.

c. Please see Question #67.

29. Q: Section III – Page 11 – Network Access & Development Services

The RFP indicates peer review and utilization services are required. Are these services currently included in the annual flat fee or are services an allocated loss expense? If services are included please provide how many peer review and utilization review services were required last year and the costs associated for services.

A: All network access and development services are included in flat fee. Standard utilization review associated with the bill review process is included in the flat fee. Specified peer review services, such as prescription peer reviews, and more complex utilization review services are subject to an allocated loss adjustment expense or other fee.

30. Q: Section III – Page 12 – Medical Bill Review and Audit Services. External Medical Auditing Services

a. The RFP requires the TPA hire an additional outside auditor. How many bills met audit criteria last year?

b. How much did the current TPA spend for such audits the last year?

c. Is the purpose of this specific audit strictly to determine if there were any overpayments?

d. If the TPA collects overpayments, if any, please confirm the District will not penalize the TPA.

A: a. Recent audits reviewed the following bill counts:

2nd Q 2013	614 bills reviewed
3rd Q 2013	587 bills reviewed
4th Q 2013	530 bills reviewed
1st Q 2014	682 bills reviewed

b. The current TPA has not disclosed the cost of these audits.

c. The purpose of these audits is to review the accuracy of the bill review process.

d. If the TPA collects overpayments, it is expected that the School District will be promptly reimbursed.

31. Q: Section III – Page 12 – Pharmaceutical Management Services

a. Who is the current Pharmacy Benefit Manager (PBM)?

b. How many negotiated physician dispensed pharmaceutical program contracts are currently in place?

c. Are the contracts two party contracts between the District and the Physicians or between the PBM and the physicians?

A: a. The current Pharmacy Benefit Manager is First Script.

b. As of September 30, 2014, we are aware of two physician dispensed pharmacy agreements.

c. The agreements are between the PBM and the third party biller/dispensing provider.

32. Q: Section III – Page 4 – Compliance with Laws and Rules of Division of Workers' Compensation. Scope of service requires payment of penalties, if any.

a. How many infractions have occurred the last year by the current TPA?

b. What was the total cost of penalties to the TPA?

c. Has the District incurred any infractions, and if yes, how many, and what was the total cost?

A: a. 4

b. $1,500

c. None.

33. Q: Will the District require the TPA to produce OSHA reports and logs from the TPA claim system?

A: Yes.

34. Q: The request for proposal is extensive and requires thoughtful responses. Will the District please allow at least three (3) weeks for proposal submission after the District releases answers to enable proposers to modify responses?

A: Please see updated timeline included in this addendum (#1).

35. Q: Please provide a copy of the Account Parameter Agreement between M-DCPS, Citibank N.A. and Arthur J. Gallagher & Company.

A: The Account Parameter Agreement was used by the District to acknowledge the establishment of the account with Citibank and agree with the bank to fund the account via electronic fund transfer on a weekly basis by the amount necessary to cover checks paid. The pertinent details regarding this process were provided in this section of the RFP. Please note that proposers can also recommend the use of another bank that can provide the same level of service being provided by Citibank.

36. Q: Please provide the number of Utilization Reviews performed for contract years:

a. 2011-2012
b. 2012-2013
c. 2013-2014

A: Total bills subject to bill review utilization review process for 7/1/11 to 6/30/14 were 9,452.

37. Q: Please provide the number of Pre Certifications (concurrent and retrospective) performed for contract years:

a. 2011-2012
b. 2012-2013
c. 2013-2014

A: This data is not available. There is no separate ALAE charge for pre-certifications. Both nurse consultants and field case nurses provide this service.

38. Q: Please provide the number of Peer Reviews Performed for contract years:

a. 2011-2012
b. 2012-2013
c. 2013-2014

A: There were 43 peer reviews from 7/1/11 to 6/30/14.

39. Q: Please provide a sample copy of a Letter of Agreement between Gallagher Basset, Miami Dade County Public Schools and a Provider.

A: Provider specific documents are not being released as a part of this RFP process.

40. Q: Please provide information regarding all current Wellness programs in place. (Health, Workers' Compensation, etc.)

A: Please see Question #24.

41. Q: Please provide a breakdown of medical bill reviews for the following contract years:

a. 2011-2012
b. 2012-2013
c. 2013-2014

Total Bills
- Medical
- Pharmacy

A: Please see Exhibit F.

Data in bill review reports does not include pharmacy payments processed by PBM.

42. Q: Does the current contact include SBE/MBEs?

A: The Board adheres to a policy of non-discrimination in educational programs, activities and employment and strives affirmatively to provide equal opportunity for all. The Board encourages the participation of local SBEs, MBEs and M/WBEs, but there is no actual percentage that is required in the solicitation.

43. Q: When you refer to proprietary network through Coventry, do you mean selective providers within that network?

A: The current proprietary network includes use of existing Coventry network agreements and M-DCPS specific agreements (Letters of Agreement (LOA)).

44. Q: So are those two-party agreements between the District and the providers?

A: The LOAs are two party contracts between Gallagher Bassett and the providers, on behalf of M-DCPS.

45. Q: How many LOA contracts are there?

A: Currently, there are approximately 80 LOAs.

46. Q: Is it the District's expectation that if a new TPA is selected, that new TPA would enter into the LOA contracts replacing the current TPA?

A: Yes. Additionally, proposers must be able to manage the bill review process for these LOA/client-specific provider agreements.

47. Q: Section III – Page 3 – Staffing Requirements. Provider Outcome Analysis

Is there a particular provider profiling or provider outcomes that you are looking at with regards to within treatment guidelines, modalities utilized, diagnostics?

A: The District does not wish to dictate exactly how that would come from a potential proposer. The District has levied it as something that we believe is value added to the District, but left it open to the proposer as to how a proposer would put together that which the proposer would believe would be of value to the District.

48. Q: Section III – Page 10 – First Notice of Injury Services

The RFP specifically requires that the call center be located in Florida. If the Proposer has its own call center, but is manned outside of the State of Florida, will that be acceptable to the District?

A: Please see Question #19e.

49. Q: Section III – Page 6 – Scope of Services

The RFP requires wellness initiative services. Will this be the first wellness initiative service program or does the District have other current wellness initiative programs?

A: Please see Question #24.

50. Q: Do you have any other wellness initiative services for workers' compensation at this time, such as food service workers or teachers, which are specific to workers' compensation?

A: Please see Question #24.

51. Q: What is the District's expectation as to what is required by the TPA for the wellness initiative as far as services? The RFP discusses a fund of $100,000. Please elaborate on this. Are you looking for the TPA to put an actual fund of available money that someone could use to pay for these services or, as an alternative, would it be TPA staffing of the equivalent of $100,000?

A: Please see Question #24.

The District does not want to limit a Proposer. The District is looking for a Proposer to demonstrate $100,000 worth of wellness resources that could be used towards the goal of improving the wellness of injured workers and our employees. We would expect that M-DCPS and the TPA would work together to find appropriate subcontractors which would be contracted through the TPA. The District is not looking for a TPA staffing equivalent to $100,000.

52. Q: a. Is Miami Dade County Public Schools looking specifically for the development of an Outcome Based Network which would provide a selection of providers

(primary care and orthopedic specialists only) who have been shown statistically to be associated with quality patient outcomes and controlled claims costs?

b. If so, is Miami Dade Public Schools prepared to share claim information on a regular basis as a part of that process?

c. Or, is Miami Dade Public Schools looking for a Customized Network that could be inclusive of any provider specialties within the current network and could be selected, added and termed on a monthly basis?

A: a. Yes.

b. Yes.

c. M-DCPS is looking for a customized network with ability to make changes.

53. Q: In an effort to determine if a current interface exists for claim notes capture purposes, would you provide us with the name of your current field case management vendor?

A: Currently, Seltzer and Associates and Coventry are used for field case management.

54. Q: Do you have 24-hour injuries exposure and, if so, do your nurse consultants provide any medical support after hours?

A: Yes, M-DCPS has 24-hour injury exposure and nurse consultants would be able to provide medical support after hours.

55. Q: Who reports the injury? Do EE ever report their injuries?

A: Typically, administrative staff at a work site report the injury.

56. Q: Who is your selected vendor for translation and transportation?

A: <u>Translation Services</u>
L.T.D. America Total Care, Inc.
ProCare Transportation and Language Services
Tri-County Medical Transportation

<u>Transportation Services</u>
L.T.D. America Total Care, Inc.
ProCare Transportation and Language Services
Tri-County Medical Transportation
Transmed Xpress, Inc.

57. Q: Are all injuries reported to the TPA?

A: Yes.

58. Q: Is drug testing required post injury event?

A: M-DCPS does not mandate drug testing, unless it is required by State Statute or Federal Guidelines.

59. Q: Who performs the utilization review function?

A: Gallagher Bassett Managed Care Services (GBMCS).

60. Q: Is any pre-dispense pharmacy utilization review done? Do you make any pre-authorization efforts?

A: There is pre-dispense pharmacy utilization review when prescriptions are filled through the PBM at a retail facility. Pre-authorization efforts are made.

61. Q: Do you give injured workers a temporary pharmacy card as a standard practice?

A: No.

62. Q: Do your nurses engage for pharmacy controls (opioid agreements, drug testing?)

A: Yes.

63. Q: Is there any union involvement?

A: Yes.

64. Q: Do you participate in the Florida MCO?

A: No.

65. Q: Please provide more details on the meeting with the District's Risk and Benefits Officer. Does the officer need to have the examiners in-person at any specific interval or to supply a claim status report upon meeting the established criteria?

A: Claim review meetings are held quarterly. These meetings usually include supervisors, District staff, adjusters and nurses, if applicable. These meetings are often held at the TPA's dedicated office.

66. Q: Please clarify the specific nature of the items in this question: "Monitor the purchase of items deemed to be medically necessary for the accommodation of an injured

employee. Advise the Risk and Benefits Officer, or designee, of all purchases over $2,500 and obtain approval from the Risk and Benefits Officer, or designee, for those items with a cost greater than $5,000." Does this relate to all DME or only ergonomic items necessary for the employee to return to work?

A: This requirement applies to all DME over $2,500.

67. Q: Please define the job responsibilities for the following dedicated positions: Client Liaison and Network Provider Liaison.

A: The current TPA's job descriptions are an internal HR document and will not be provided. However, the following are details regarding these positions.

Network Developer

Responsibilities include but are not limited to:

- Work in collaboration with M-DCPS and adjusting team to identify emerging program trends.
- Responsible for developing competitive provider agreements in keeping with the M-DCPS vision and program requirements.
- Recommends contract (LOA's) terms and actively involved in rate negotiations with hospitals, facility, ancillary and professional providers.
- Participates in cost and utilization data analysis
- Maintains a working knowledge of industry, national coding initiatives, licensure and accreditation, payer benefit packages, policies and procedures
- Expected to identify new therapies and providers that could be beneficial to M-DCPS injured workers
- Communicates requirements to contracted providers and assists contracted providers when they have questions or concerns with payments
- Conducts provider training
- Ensures that relevant data is gathered and monitored regarding the provider community.
- Ensure (LOA agreements) contracts are loaded into the bill review timely and accurately by auditing the contract and demographics after data entry.

Client Liaison

Responsibilities include but are not limited to:

- Ability to step in or help manage any claim issue
- Acts as an extension of the Risk Management department
- Works in collaboration with M-DCPS and adjusting team to identify emerging program trends.
- Understanding of M-DCPS infrastructure and inner working with ability to communicate at all levels
- Promote M-DCPS program vision and program requirements
- Assist with WERC payroll processing and reconciliation of salary in lieu of workers' compensation indemnity benefit protocol

- Coordinate legal file reviews - assists M-DCPS Risk Management in ranking external workers' compensation defense firms
- Maintains as a working knowledge of industry, strong technical competency required
- Communicates requirements to all stakeholders
- Conducts file audits as necessary and maintains high profile claims on diary as required by M-DCPS
- Assists with monthly report distribution
- Serves as liaison between claims adjusters, outside parties and Risk Management.
- Located in house at M-DCPS.

68. Q: Please identify if the 1 dedicated nurse for the Wellness Program is incorporated in the 3 WC dedicated nurse consultants as outlined in the RFP.

A: Yes. The 3 dedicated nurses include the nurse dedicated to the Wellness Program.

69. Q: Please identify the number of system users required as follows:

A:

Type of user	Number of view only access users	Number of ad hoc report/query users
Client	22	16
Broker		8

There are approximately 46 users, however, the board reserves the right to add or remove users as needed at no additional cost to the District.

70. Q: Please identify and list all interfaces/data feeds required:

A: TPA is responsible to manage all interfaces required pursuant to Chapter 440 and Florida Statute as well as the client's needs. This will include, but not be limited to interfaces for banking/finance department needs, State of Florida requirements, intake call center, etc.

Sl. No.	File Type	Inbound to GB or Outbound	Frequency	Vendor

		from GB		
	Snapshot	Outbound	Monthly	Safety National

Sl. No.	File Type	Inbound to GB or Outbound from GB	Frequency	Vendor
	Nurse Notes	Inbound	Daily on weekdays	Seltzer and Associates

71. Q: Please identify on how many questionable or contested cases and those with an estimated value in excess of $15,000 require the supervisor adjuster to meet with the District's Risk & Benefit Officer on an annual basis?

A: Approximately 250 claims annually meet these requirements.

72. Q: Please advise on how first notice of injury reports are currently fed to the TPA from Seltzer & Associates.

A. Seltzer inputs data directly into the TPA's system. The first notice reports are sent electronically to the TPA.

73. Q: The RFP indicates that Miami Dade requires periodic data transfers. Please identify what system the School District currently utilizes and what frequency these data transfers.

A: TPA is responsible to manage all interfaces required pursuant to Chapter 440 and Florida Statute as well as the client's needs.

74. Q: Please advise who your current field case management vendor is today and how this service is managed.

A: Currently, Seltzer and Associates and Coventry are used for field case management. Both entities are subject to quarterly file reviews and quarterly cost experience. They are also required to participate in quarterly quality assurance committee meetings.

These services are not being solicited in this RFP.

75. Q: If feasible, please provide the loss runs in a Microsoft Excel format by claim by claim type.

A: This is not available.