

DEPARTMENT OF FINANCIAL SERVICES
2223-01 RCP RM
MEDICAL CASE MANAGEMENT SERVICES

Questions and Answers

Below are the questions and answers related to 2223-01 RCP RM, Medical Case Management Services. In the table below, the Department of Financial Services (Department), has answered each of the thirty-five (35) written questions submitted by potential respondents.

No.	RCP Section	RCP Page #	Question	Answer
1.	3.2. How to Submit a Response	11	Label the cover and spine of the volumes indicates that each of the 5 volumes are in separate binders capable of supporting a written label. So, the original version would consist of 5 separate volumes or binders. In addition the 8 copies of V 2, 5 copies of V3,V4,V5 and 1 redacted copy consisting of 5 binders. If I'm correctly adding up this would be a total of 33 volumes or separate binders . Is this correct?	<p>No. There should be a total of 28 binders submitted as follows:</p> <p>Respondents shall submit one (1) original set of volumes 1-5 of their response. There will be five (5) volumes submitted with your original set.</p> <p>Respondents shall submit eight (8) copies of Volume Two: Technical Response.</p> <p>Respondents shall submit five (5) copies of Volume Three: Optional Services.</p> <p>Respondents shall submit five (5) copies of Volume Four: Price Response.</p> <p>Respondents shall submit five (5) copies of Volume Five: Exceptions to Standard Contract.</p> <p>If applicable, a separate redacted copy of the response should be submitted electronically as indicated in section 3.3.1. Redacted Submissions.</p>
2.	3.2. How to Submit a Response	11	Volume Two 2 nd bullet indicates that documents should be in their native format, or on a flash drive . Does this give the option of putting the Technical	<p>No, Respondents shall provide originals of all documents in their native format (Word, Excel, etc.) or provide originals of all documents on one (1) flash drive.</p> <p>Respondents shall submit one (1) PDF version of all volumes of the Response on a flash drive. There will be five (5) volumes on one (1) flash drive.</p>

			response on 8 separate flash drives?	
3.	3.3 Confidential Response Materials & Redacted Submission	12	Please confirm that if confidential information is being provided, a total of 2 USB drives would be attached (1 non-redacted, and 1 redacted).	Yes, Respondents shall provide one (1) flash drive for non-redacted documents and one (1) flash drive for confidential information, if applicable.
4.	General		Will you allow for any offshore subcontractors?	Refer to section 4. Data Access and Storage, of Addendum B, Data Security Requirements; and section 25. Data, of Attachment 1, Standard Terms and Conditions.
5.	Attachment 2 SOW -Financial Consequences beginning on p.24	24	Are you willing to discuss any changes or negotiations to the financial consequences	This will be discussed during the negotiation process.
6.	Attachment 2. SOW 4.3.4 Claim Eligibility & File Maintenance a.b.c.d.	9	Can you clarify exactly how the eligibility and benefit termination data is to be received from the Division? Is this an EDI process? Could you elaborate on how this currently passes to the BR, UR and other systems for accurate handling?	<p>During implementation, the MCM will receive the eligibility file. Benefit termination is communicated through an email from the adjuster to the MCM.</p> <p>Data related to the services for this Contract are shared via SFTP.</p> <p>As the system of record, the MCM sends the eligibility file to the Division's MBR and PBM Contractors.</p>
7.	Attachment 2 SOW. 4.3.1 - regarding access to ECMS	6	Our systems provide the highest level of data integrity, security of confidential information, disaster recovery and security. Our preference is to provide direct access to information via an extract, digital file or portal access for read only information -would this be acceptable?	No, the Division requires access to the MCM's ECMS to see TCM notes, diaries, program metrics, generate reports, and to monitor the MCM Services.
8.	Attachment 2 SOW. 4.3.1 -	6	Please expand description on what authorized Division staff unlimited remote access mean?	The Division has staff that will require access to the MCM's ECMS. All Division staff work in one location in Tallahassee, Florida. There is a small number of contract staff that may work outside of Tallahassee that will require access. The Division requires

	regarding access to ECMS			access to the MCM's ECMS to see TCM notes, diaries, program metrics, generate reports, and to monitor the MCM Services.
9.	Attachment 2. SOW 4.3.10.entire section	16	Regarding Utilization Review and Peer Review services, can the Division confirm if the expectation is that the case managers perform UR functions or if a stand-alone UR team is expected?	Yes, the TCMs are required to monitor claim utilization but will coordinate with the assigned adjuster for approval to refer a claim to the Division's MBR Contractor for a higher-level review.
10.	General		Please provide the annual UR volume and PR Volume.	The TCMs are required to monitor claim utilization and coordinate with the assigned adjuster to refer claims to the Division's MBR Contractor; however, specific UR and PR services are not a part of this solicitation. Therefore, the Division is not providing statistics or volume.
11.	Attachment 2. SOW 4.3.4 a.	9	Which employers are eligible under this program? How often will we receive updated location feeds for each of the employers? What is the current process used, to keep the incumbent advised of eligibility? Does the eligibility file include locations, divisions, etc.	<p>Please see, "Entities Covered by the Division of Risk Management", for the employers that are eligible, which is a PDF document on the Division's Website.</p> <p>Also, the most current information regarding State workforce populations may be obtained through the Florida Department of Management Services at: https://www.dms.myflorida.com/content/download/158111/1047486/FY2020-21AnnualWorkforceReport-FINAL.pdf.</p> <p>Eligibility updates are provided as they occur through communication by the Division's assigned adjuster and the claim eligibility file.</p> <p>Yes, the eligibility file includes locations, divisions, etc.</p>
12.	Attachment 2. SOW 4.3.2 Call Center a.v.	7	In your current program who staffs your 24/7 call center for complaints? Is it comprised of non-clinicians?	<p>The MCM is required to maintain a secure toll-free telephone system twenty-four (24) hours per day, seven (7) days per week. See Attachment 2, SOW, 4.3.2, Call Center, a., i. through vi.</p> <p>Yes, the 24/7 call center is an administrative function, comprised of non-clinicians. Intake is an administrative function.</p>

13.	General		How many complaints do you receive annually that are not related to clinical management or FROI services, etc?	This information is not available to provide as it is currently not tracked.
14.	Attachment 2. SOW 4.3.2 Call Center a.v.	7	Is there a dedicated customer mailbox for complaints and benefit questions? Would this work for you? (ie, not answered by a human during non-business hours)	No, currently claimants call the call center to obtain assistance regarding complaints and/or benefit questions. No, the call center is required to be staffed twenty-four (24) hours per day, seven (7) days per week. See Attachment 2, SOW, 4.3.2, Call Center.
15.	General	7	Please provide the call center forecasted volume, can you break it out by time of day, weekends, evenings, etc?	Historical call center data shows an average of: 2020 - 1,983 calls per month 2021 - 1,865 calls per month 2022 - 1,524 calls per month The tracked data only includes overall volume and does not track the number of calls by time of day, weekends, or evenings. A review of historical data shows incoming calls mostly follow a bell curve distribution pattern when tracking a 12:00 AM to 11:59 PM period. The majority of incoming calls are received evenly throughout the week; however, calls are also received on weekends and holidays.
16.	Attachment 2 SOW 4.3.2 a. ii.		Will 80% at 30 sec response call metric statistics be acceptable vs 90% at 30 sec?	This will be discussed during the negotiation process.
17.	Attachment 2. SOW 4.3.2 a. ii.	7	Would you consider a % of calls that are on hold acceptable over 3:00 mins? (rather than not acceptable)	This will be discussed during the negotiation process.
18.	Attachment 2. SOW 4.3.2 a. call center	7	What types of customer service calls do you receive?	Customer service calls can vary from report of injury to questions regarding benefits.
19.	Attachment 2 SOW 4.3.5 b.	8	Could you elaborate on the escalation criteria for incident	This will be discussed during the negotiation process.

			reporting. Does this apply to initial treatment recommendations through nurse triage or continued treatment such as ancillary or specialist?	
20.	Attachment 2. SOW 4.3.3 FROI b. iv. 5.i. and ii	8	Along with the location codes/locations will you provide the appropriate NCCI codes? If so, what is the frequency of receiving this data, and updates for changes as needed?	No, the Respondent should obtain the NCCI codes from the NCCI. Updates are received as they occur.
21.	Attachment 2. SOW 4.3.3 FROI b. iv. 5.	8	For assignment of claim number: information fields 5. Employer acknowledgement of incident. Please elaborate on where this metric or data comes from.	The MCM will assign the claim number. For employer acknowledgement, the employer may give a verbal acknowledgement of the incident when calling in the FROI. Otherwise, the MCM will follow-up with the Employer to obtain an acknowledgement.
22.	Attachment 2. SOW 4.3.3 FROI e.	8	Is regular mail required, or could the email address be captured and used to send the completed FROI to claimant?	The Contractor is required to mail the completed FROI to the claimant. See subsection e. of section 4.3.3, First Report of Injury (FROI) and Division of Workers' Compensation (DWC) Packet, of Attachment 2, SOW.
23.	General		Please provide your annual claim volume broken down by Lost Time vs Medical Only.	Please see "Annual Claim Volume", for the Division's annual claim volume broken down by lost time vs medical only, which is a PDF document on the Division's Website.
24.	General		What is the average case duration for Telephonic Case Management?	The average case duration for telephonic case management is three hundred thirty-six (336) days for claims closed during Fiscal Year 2021-2022, excluding Permanent Total Disability and report only claims. For claims closed during Fiscal Year 2021-2022, thirty-four percent (34%) were closed within ninety (90) days.
25.	General		Will we be able to establish an EDI notes feed, or will TCM's be expected to work in your claim system?	No, the TCMs will not work in the Division's claims management system. The Division will have access to the MCM's ECMS.

26.	General		Can we utilize offshore administrative support?	Refer to section 4. Data Access and Storage, of Addendum B, Data Security Requirements; and section 25. Data, of Attachment 1, Standard Terms and Conditions.
27.	General		Can the same provider of TCM services(your selected partner) also provide FCM services when warranted to achieve the goals of the claim?	Yes, please refer to subsections 4.3.7, s. through v., of Attachment 2, SOW.
28.	RCP Section 3.1.2 “e” Claim Eligibility #2	10	Can you please provide either an example of or expand on the process of deleting claimants?	Claim files are closed, not deleted. The Division or the MCM may identify a duplicate claim, which would require one claim to be deleted by the MCM.
29.	Attachment 2, SOW section 4.3.11 <i>(description under the heading)</i>	17	Can you clarify what bills you are referring to?	Medical and non-medical bill data related to the provision of MCM Services.
30.	General		Please provide your annual volume and pricing for medical case management services broken down by service type (e.g., field case management, telephonic case management, telephonic triage, first report of injury, call center, utilization review etc.).	<p>Currently, pricing for MCM services is not broken down by service type (e.g., field case management, telephonic case management, telephonic triage, first report of injury, call center, utilization review, etc.).</p> <p>Refer to the Florida Accountability Contract Tracking System (FACTS) at: https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=430000&ContractId=D0812</p>
31.	General		Please provide the names of the current vendors for telephonic triage and medical case management and how long they have provided services.	<p>The Division’s current contract for MCM Services can be obtained in the Florida Accountability Contract Tracking System (FACTS) at: https://facts.fldfs.com/Search/ContractDetail.aspx?AgencyId=430000&ContractId=D0812</p> <p>Telephonic Triage is part of the services provided by our current MCM Contractor.</p> <p>The current MCM Contract was executed on 10/29/2013.</p>

32.	General		Please provide a breakdown of current vendor staff committed to telephonic triage and medical case management services.	MCM Services: 40 RNs Telephonic Triage: 11 RNs
33.	General		What are the primary pain points for managed care services?	This will be discussed during the negotiation process.
34.	General		Please confirm that if a respondent proposes only select services, it is desired that the fees provided be all inclusive for those services. Will any fee for service pricing be permissible?	The Respondent shall propose pricing for all services in Attachment 2, SOW. The Division does not intend to separate any of the services in Attachment 2, SOW, nor does the Division envision services be performed by different contractors. Attachment 3, Price Response, is designed so that each Respondent can enter pricing in accordance with industry standards for providing MCM Services, and as specified in Attachment 2, SOW, Part A and Part B, for the initial Contract period and the renewal Contract period.
35.	General		Will you permit bidding on select services outlined in the SOW (e.g., medical case management, utilization review/peer review, call center and triage etc.)?	No, the Division does not intend to separate any of the services in Attachment 2, SOW.