

Can you clarify what you mean by “provider-maintained employee records”?

Answer: As to the first bullet cited, NJSIG is seeking access to the information, processes, and/or criteria used by medical care providers when returning claimants to work. As to the second bullet cited, NJSIG is seeking immediate electronic access (by way of email, electronic database, etc.) to the claimants’ medical and other treatment records for all care related to their workers’ compensation claim.

Question 3: Page 6-7: For the NJSIG Workers’ Compensation Program Claim Activity 2018-2022, are those calendar years or school years? Can you please include 2023 YTD?

Answer: In the RFP, the “NJSIG Workers’ Compensation Program Claim Activity 2018-2022” refers to calendar years. For January 1, 2023 through March 31, 2023, the totals are as follows:

Reported Medical Only Claims with managed care: 1,024
Reported Lost Time Claims with managed care: 272

Question 4: In addition to the claim data, can you please provide detailed workers’ compensation repricing information pertaining to the years 2018, 2019, 2020, 2021, 2022 and 2023 YTD, including but not limited to:

- a. The number of medical bills processed for each year
- b. The amounts billed by medical providers for each year;
- c. The medical providers allowance and savings for each year;

Answer: See the answer to question 1, above.

Question 5: Can you please provide the number of claims currently open for case management as of this time.

Answer: NJSIG’s current workers’ compensation managed care services provider has indicated that there are 486 nurse case managed claims open at this time.

Question 6: Page 7: Question 4e: Will you require the MCO to report FROI and SROI data (supplied by NJSIG) to the State of NJ?

Answer: No.

Question 7: Page 8: Question 8: Regarding contact lists of all participating providers, are you referring to panels? Can you please clarify?

Answer: NJSIG is referring to any and all medical providers used by the managed care organization for medical case management.

Question 8: Page 17: 2.4 Mandatory contents of proposal:
Section 4 - Reference source not found.
(Section 2.5.3 - Reference source not found.)
What is the error message referring to?

Answer: This portion of the RFP should read as follows:

Section 1 – Fee Proposal (Section 2.4.1)
Section 2 – Executive summary (Section 2.5.1)
Section 3 – General Information (Section 2.5.2)
Section 4 – Organization profile and experience (Section 2.5.3)
Section 5 – Qualifications and Experience (Section 2.5.4)
Section 6 – Compliance information and forms (Section 2.5.5)

Question 9: Page 17: 2.4 Mandatory contents of proposal:
Page 31: CHECKLIST OF REQUIRED DOCUMENT AND FORMS:
3) Required after award, but before execution of contract:
Do we need to complete Exhibit 7.8 - Employee Information Report if we have a Certificate of Employee Information Report (Exhibit 7.9)?

Answer: No, Pursuant to N.J.S.A. 10:5-31 et seq. (P.L. 1975, c. 127) and N.J.A.C. 17:27 (mandatory equal employment opportunity language for goods, professional service and general service contracts), vendors are only required to submit one of the following documents: (1) Letter of Federal Affirmative Action Plan Approval, or (2) Certificate of Employee Information Report or (3) Employee Information Report Form AA302.

Question 10: Page 38: Exhibit 7.1 Pricing List by CPT Code & Location is for 8/1/2023. This date is in the future. Can you please verify what date you would like us to use. Also, on the pricing for areas North,

Central and South for specific CPT codes, are you looking for our lowest or average price?

Answer: For Exhibit 7.1, proposers may use a date other than 8/1/2023, as long as the date is within 90 days of the date that the proposal is submitted. If using a date other than 8/1/2023, proposers should clearly indicate what date they are using on the Exhibit. Proposers should list the average price for each service.

Question 11: Whether companies from Outside USA can apply for this? (like, from India or Canada)

Answer: NJSIG does not prohibit companies located in India or Canada from applying for this RFP; the only requirements are those outlined in the RFP. However, as outlined in the RFP, all proposers shall provide monthly updates regarding the status of all handled claims, including in-person meetings with NJSIG if necessary. Furthermore, all vendors must submit a copy of their business registration certificate (or interim registration) from the New Jersey Division of Revenue with their proposal. Failure to do so may be cause for rejection of the proposal. The requirement is a precondition to entering into a NJSIG contract.

Question 12: Whether we need to come over there for meetings?

Answer: As outlined in the RFP, all proposers shall provide monthly updates regarding the status of all handled claims, including in-person meetings with NJSIG if necessary.

Question 13: Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)

Answer: NJSIG does not require the workers' compensation managed care services outlined in the RFP to be performed in any particular location; the only requirements are those outlined in the RFP. However, as outlined in the RFP, all proposers shall provide monthly updates regarding the status of all handled claims, including in-person meetings with NJSIG if necessary. Furthermore, all vendors must submit a copy of their business registration certificate (or interim registration) from the New Jersey Division of Revenue with their proposal. Failure to do so may be

cause for rejection of the proposal. The requirement is a precondition to entering into a NJSIG contract.

Question 14: Can we submit the proposals via email?

Answer: No. All proposers must submit one paper copy, clearly marked as "COPY," plus an original electronic copy, clearly marked as "ORIGINAL," via NJSIG's website.

Question 15: Page 17- Section 4: Please define error.

Answer: This portion of the RFP should read as follows:

Section 1 – Fee Proposal (Section 2.4.1)
Section 2 – Executive summary (Section 2.5.1)
Section 3 – General Information (Section 2.5.2)
Section 4 – Organization profile and experience (Section 2.5.3)
Section 5 – Qualifications and Experience (Section 2.5.4)
Section 6 – Compliance information and forms (Section 2.5.5)

Question 16: Page 19-2.5.2: General Information - Please define error.

Answer: This portion of the RFP should read as follows:

All the requirements in the Mandatory Contents of Proposal, Section 2.4, must be complied with in order for the Response to be considered responsive to this RFP and complete.

Question 17: Page 29 Exhibit 7.1: Please specify Pricing List by CPT codes & Location. Is the request for UCR charges? Is there a specific zip code to be used for each region & North, Central, South Jersey? If this is a request for UCR, a service date will be needed for determination.

Answer: For Exhibit 7.1, there is no specific zip code to be used for North, Central or South Jersey. This is not a request for UCR charges, it is a request for repriced amounts. Proposers should list the average price for each service. Proposers may use a date other than 8/1/2023, as long as the date is within 90 days of the date that the proposal is submitted. If using a date other than 8/1/2023,

proposers should clearly indicate what date they are using on the Exhibit.

- Question 18: For Bills Processed for the Fund Years, 2020,2021,2022, Q1 2023:
- a. Overall Utilization to include
 - i. Bill Type (In-Patient, Out-Patient, Provider), Bill Count, Charged Amount, Reimbursement, Reduction by type (PPO, U&C, or denial)
 - b. Top 10 Facilities/Provider Utilization to include
 - i. In-Patient Facility Name, Bill Count, Charged Amount, Reimbursement, Reduction by type (PPO, U&C, or denial)
 - ii. Out-Patient Facility Name, Bill Count, Charged Amount, Reimbursement, Reduction by type (PPO, U&C, or denial)
 - iii. Provider Name, Bill Count, Charged Amount, Reimbursement, Reduction by type (PPO, U&C, or denial)

Answer: See the answer to question 1, above, for relevant information on bills.

- Question 19: Will First Report of Injury “FROI” State Reporting be a requirement of the Vendor as part of the flat fee arrangement? If so, please provide the number of FROI’s for the Fund Years: 2020,2021,2022, Q1 2023.

Answer: No.

- Question 20: Do all initial claims open as Medical Only designation? If not, please explain other initial claim designations.

Answer: While the majority of claims open with medical only designation, some claims may open as investigation, or as a claim for medical management/lost time.

- Question 21: Please Provide a count of 2023 Year-to-Date Lost Time and Medical Only Claims Opened.

Answer: See the answer to question 3, above.

Question 22: Please Provide a count of the current open pending by claim loss designation (Lost Time & Medical Only) and current age (days open) that would be required to take over if awarded the business today.

Answer: A new managed care services provider would only be expected to manage new claims that were received after the effective date of the service provider's contract with NJSIG.

Question 23: Does the NJSIG have a definition for what can be considered a re-open claim?

Answer: NJSIG considers reopened claims to include all claims that were closed to medical case management and then required to be reopened for additional treatment, either because of a request for additional treatment, the litigation process, or otherwise.

Question 24: Please provide a count of the re-open claims for Fund years 2020,2021,2022, Q1 2023.

Answer: NJSIG's current managed care services provider provided the following data:

2020 – 273 reopened claims
2021 – 196 reopened claims
2022 – 186 reopened claims

Question 25: Please provide a count of the Field Case Management referrals for Fund Years 2020,2021,2022, Q1 2023, as well as a count of the current active Field Case Management Case Load.

Answer: NJSIG does not separately track its field case management referrals, however, on average, there are likely less than five such referrals per year.

Question 26: Section 1.4, Question 8 – Please clarify what type of list is to be provided.
Is a website look-up sufficient to satisfy?

Answer: Yes, a website look-up would be sufficient to satisfy NJSIG's requirement that the managed care service provider regularly

provide updated contact lists of all participating treatment providers. The concern is that the list be consistently and routinely monitored and updated to ensure accuracy.

Question 27: Exhibit 7.1 – we currently break down fee schedules by North and South. Would that be acceptable for reporting purposes? If not, please provide the county breakdown (North, Central & South) the NJSIG uses today.

Answer: Yes, for Exhibit 7.1, prices can be provided for North and South Jersey only, as long as that is made clear on the submission.