



**RFP – Third Party Claims Administrator
Addendum #1 – dated June 22, 2026**

1. **Page 4 of the RFP indicates that bid must be mailed or hand delivered. It also indicates that bids can be submitted electronically via the Bonfire portal instead. Just to confirm, are mailed in copies required in addition to an electronic submission, or is it acceptable to submit via portal instead of submitting mailed in copies?**
Submissions can be mailed, hand delivered or submitted through Bonfire.
2. **Please provide a detailed 5-year loss run in Excel format to include claim status (open, closed) and Claim type – i.e., Indemnity, Medical Only**
See Pages 5 through 18 below for more detailed information.
3. **Please provide a copy of the current contract in place with your TPA and any amendments.** Awaiting legal review for release.
4. **Please confirm the current staffing model of the County's claims team.** We have one Risk Director and one OJI Specialist
5. **Can you provide details on the current team structure handling the County's claims?** Currently, we have 1 adjuster that we deal with pretty exclusively.
6. **Can you specify the specific areas of program performance improvement sought by the County?** We are not seeking an RFP for performance issues. This is a required process for government.
7. **Does the incumbent pursue subrogation for the County, and is there an associated cost?** They do and yes there is a cost.
8. **How many claims is received per month?** Estimate of 10.
9. **How many open claims are there for all years broken down by type?** See Pages 5 through 18 below for more detailed information.
10. **Will this contract involve handling takeover claims?** Yes it will.

11. **We assume the program includes bill review, pharmacy, utilization review, case management, and subrogation as standard components.**

Please provide:

a. Current vendors for each service

Bill review: CompIQ

PBM: WAM

UR/CM/Subro: Provided by incumbent TPA

b. Annual volumes, spend, and fee structure for the past 3–5 years - See Page 4 for the Summary Savings Analysis. Fee structure: 2023: \$8/bill; 2024 \$8/bill; 2025: \$9/bill

c. Any contractual carve-outs, guarantees, or required vendor relationships -yes

d. Historical subrogation recoveries and fee arrangements -30% of recovery

12. **How many nurse case managers are currently assigned to the County, and are they exclusively dedicated?** Currently, there is 1 assigned and they are not exclusive.

13. **How many claims per year were assigned to Nurse Case Managers for the past 3 years?** 9

14. **Are all new claims triaged by a nurse?** They are triaged currently through a case mgr.

15. **Is the assignment of Nurse Case Managers standard for all cases, or are there specific criteria for their assignment?** Standard

16. **Does the County use Field Case Managers for medical management purposes, and if so, what criteria are used for their assignments?** Currently, we only use nurse case mgr as needed.

17. **What is the number of billed charges, bill review allowance, negotiated bill fees, hospital review fees, PPO savings for the past 3 years, and current fee structure?** - See Page 4 for the Summary Savings Analysis. Fee structure: 28% of savings below FS

18. What PPO network does the County use for Medical Bill Review services? –

- Optum
- Prime
- Careworks
- NBD
- Multiplan
- Plexas

19. Who is the County's current provider for Medical Bill Review Services? Brentwood Services.

20. Who does the County currently work with for Pharmacy Benefit Management Services, and what is the number of prescriptions filled for the past 3 years? Carlisle Medical.

21. Does the County have an EDI with its PBM vendor for pharmacy bills, or is this handled manually? All of our pharmacy bills are reviewed and paid through Brentwood.

22. Is the County interested in Utilization Review services as part of our offerings, or will the county be utilizing a vendor for these services? If so, who is the vendor? We use our current provider, Brentwood Services.

23. Who does the County currently work with for Independent Review Organization Services? Brentwood Services

24. In the County's workflow, do adjusters process their own prior authorizations? On most areas this is a joint conversation between the county and adjusters.

- a. **Can the County provide detailed utilization review statistics for the past five years, including the number of assignments, gross annual expense, gross savings, net savings, and percentage of savings? There have been 2 UR referrals for the past 5 years – See Pages 5 through 18**
 - i. Both were Peer Review
 - ii. Both were for the same Injured Worker
- b. **Total amount billed - \$676.00**
- c. **Total savings - \$49,525.00**
- d. **ROI – \$1:\$73**

	Bill Count	Billed Amount	FS Reductions	Audit Reductions	PPO Reductions	Total Reductions	Total Savings %
March – Jan 2023	256	\$470,363.67	\$361,108.86	\$582.17	\$8,445.32	\$370,397.07	78.75%
2024	456	\$657,596.57	\$471,062.89	\$7,181.87	\$12,089.74	\$490,334.50	74.6%
2025	263	\$617,154.45	\$462,202.04	\$2,378.93	\$9,096.43	\$473,677.40	76.8%
Jan – May 2026	134	\$134,578.62	\$97,274.02	\$1,160.66	\$1,625.75	\$100,060.43	74.4%

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