

West Virginia Board of Risk and Insurance Management

Medical Malpractice Risk Management Loss Prevention Consulting Services RFP#080112

Please note: To ensure fairness to all vendors who may wish to submit a proposal in response to this RFP, all data and/or information to be utilized with regard to the BRIM insurance program must come from BRIM in response to a question posed to BRIM. No vendor should utilize data and/or information from any source that may have been gathered for a purpose separate from this RFP, if applicable to any vendor. BRIM will share requested data and/or information with all interested parties through publication on the BRIM website in response to questions submitted.

Questions received and responses to those questions as of the current date:

08/17/12

1. To comply with 2.5(H), providing annual regional CE training with CME credits, would the vendor partner need to grant the actual CME or could that be coordinated with the insured facilities through appropriate content and documentation from the vendor partner to the facility's Director of Education?

The vendor partner is expected to provide the educational course content that qualifies for continuing education. The insured medical school will work with the vendor partner to validate the identity of the attendees to assure proper credit is given upon successful completion/attendance of the seminar by physicians/residents/nurses, etc.

An example of a one-day seminar at Site A might be 7:15 am - 8:00 am, complimentary light breakfast provided by the vendor partner; 8:00 am - 12 noon for primary care specialties seminar; lunch on your own; then 1:00 pm - 5 pm surgical specialties seminar. The same schedule could be repeated at Site B and then Site C for a total of three separate and distinct site seminars. For planning purposes, assume attendance for each session (morning and afternoon) to be approximately 50 individuals each.

At completion of the seminar, within an agreed upon specified time frame, the vendor partner will provide attendees with a certificate of completion. This can be accomplished by providing the bulk certificates to the insured facility education director for distribution.

2. Should external service costs, such as the cost to rent conference rooms for the regional training, food costs, a/v costs, be built into the vendor partner's quote or would those non-vendor partner expenses be invoiced directly to BRIM?

Assume that the conference room facility will be provided by the host insured facility at no cost to the vendor partner. However, food and a/v costs should be built in the vendor partner's quotation.

3. Would travel costs, needed to be onsite for 2.5(H) and 2.5(I) education and surveys, be outside of the proposed vendor proposal costs?

Travel costs needed to be onsite for 2.5(H) and 2.5(I) education and surveys should be incorporated in the vendor proposed costs.

08/20/12

4. We are in the process of putting our response to the referenced solicitation. We would like to have some additional information regarding the 1,371 medical professionals. How are these professionals classified and where are they located?

Medical malpractice exposures are stated in terms of base class full time physician equivalents. The five agency current exposures (FTE base class) are as follows: WVU--970.1; Marshall University--344.1; WV School of Osteopathic Medicine--31.4; Division of Public Health--25.1; and Division of Rehabilitation Services--n/a. This amounts to a total of currently 1370.7 FTE Base class physician exposure units. A list of physician specialty units that comprise the 1370.7 FTE Base class exposure units is attached. See Excel spreadsheet Medical Provider Specialties.

5. Also, with regard to your current medical malpractice risk control program, who currently provides these services?

Currently, West Virginia University and Marshall University provide in-house medical malpractice risk management loss control services for their respective physician base exposures.

6. How are the services, as outlined in the RFP, currently being handled, internally or using a vendor?
 - o If internally, how many people have been designated to perform the services?
 - o If external, who is the vendor performing these services and what are the current fees?

The services outlined in the RFP are not currently being provided from a vendor, nor are they being provided internally through the West Virginia Board of Risk and Insurance Management (BRIM).

7. How is the professional liability claims exposure currently being handled?

o If external, who is the current vendor?

If the intent of the word “handled” is meant to address how the exposure for professional claims liability is being “rated”, it is based on the FTE equivalent number of physicians using a weighting of each physician’s specialization relative to other specializations. There is currently no specific program in place internally, or through an external vendor, by which professional liability claims exposure is being “handled”.

8. Does the professional liability coverage exposure include the clinical MSOPTI sites for Osteopathy training, or any other GME training sites, and are they to be included in a risk assessment process?

No, the clinical MSOPTI sites or other GME training sites are not to be included in the risk assessment process.

It is not the intent of the RFP that responders are expected to visit all the satellite locations that come under the auspices of the respective agencies for which risk management loss control services are being sought. Rather, there are five principal locations (see #9 below). In conforming with requirement 2.5 (I) of the RFP, surveys should be conducted at the five principal locations to ascertain compliance in document management, telephone call management, electronic health record management, HIPAA compliance, informed consent practices, medical tracking systems, patient communication/education, programs, medical professional training requirements, patient grievances practices, incident reporting systems, patient sexual abuse prevention, records retention, medical staff bylaws, rules and regulations for medical/hospital practices, and other relevant items deemed significant by the vendor.

The deliverable for 2.5 (J) is three (3) written reports for each respective five principal locations surveyed in 2.5 (I).

9. Are all Department of Health locations throughout the State to be assessed as part of the annual comprehensive medical malpractice risk management program surveys of BRIM insured entities?

o If so, please confirm the number of locations and include addresses.

Annual comprehensive medical malpractice risk management surveys shall be completed at each insured entities’ central office/main headquarters. Thus, such surveys will be completed at five (5) locations within the state of West Virginia, as listed below:

- Morgantown, WV – West Virginia University
- Huntington, WV – Marshall University
- Lewisburg, WV – West Virginia School of Osteopathic Medicine
- Charleston, WV – West Virginia Department of Health and Human Resources
- Charleston, WV – West Virginia Division of Rehabilitation Services

10. Are all Department of Rehab Services locations throughout the State to be assessed as part of the annual comprehensive medical malpractice risk management program surveys of BRIM insured entities?

Annual comprehensive medical malpractice risk management surveys shall be completed at each insured entities' central office/main headquarters. Thus, such surveys will be completed at five (5) locations within the state of West Virginia, as listed below:

- Morgantown, WV – West Virginia University
- Huntington, WV – Marshall University
- Lewisburg, WV – West Virginia School of Osteopathic Medicine
- Charleston, WV – West Virginia Department of Health and Human Resources
- Charleston, WV – West Virginia Division of Rehabilitation Services

11. Do any of the current insured locations currently have an in-house risk manager?

Marshall University and West Virginia University have Medical Malpractice Risk Managers currently employed.

12. Of the insured medical professionals, how many (if any) are nurses, nurse practitioners, physician assistants, or other Allied Professionals (i.e. PT, OT, etc.)?

A comprehensive spreadsheet of medical professionals' specialty expertise is attached. See Excel spreadsheet Medical Provider Specialties.

13. What are the medical specialties practiced by the insured medical clinicians (i.e. OB, Neurosurgery)?

See response to 4 and 12 above.

14. Do all education programs need to be on site or can some be delivered via webinar?

The regional, one day continuing educational training seminars must be provided at three different locations of the State, as outlined in section two (2) (H) on page four (4) of the RFP. It is anticipated

that the three locations will be within the cities of the largest principal agencies with physician exposures, i.e., Morgantown, Huntington and Lewisburg.

15. Could all materials as outlined in the RFP be provided on line rather than in print?

All materials/deliverables outlined within the RFP must be provided to BRIM in hard copy.

16. Would site visits be only for current insureds or is there anticipated growth during the contract period?

If the latter, please detail the estimated growth that would impact scope of services as outlined in the RFP.

Site visits shall be for those insured entities as listed in section 2.4 on page three (3) of the RFP (and further explained in response to question 8 above) without any additional insured entities being added during the terms of this contract and renewal periods. Following the award of this contract should a formal contract change become necessary, it will be completed as specified in section 5.7 of the RFP on page ten (10).

17. Relative to the phone consultations, would there be a set number of hours per month? per year?

- o Should we anticipate providing underwriting pre audit visits ?
- o If so, what would be the estimated annual volume?

As outlined in section two (2.5) (E) on page four (4) of the RFP, BRIM does not establish a set number of hours per month. BRIM desires the successful vendor to make such services accessible. Should there be an additional fee for telephone consultation services, that fee should be outlined within the cost portion of the bid response.

Additionally, underwriting pre-audit visits are not desired or requested within the terms and conditions of this RFP. These services are not needed at this time.

18. Are physicians working in insured sites employed by the facilities, or independent practitioners?

Physicians working in insured sites are employees of the facilities.

08/21/12

19. Regarding the vendor providing medical malpractice risk management loss prevention consulting services for "BRIM insured entities," "BRIM insureds," and "selected state governmental agencies,"-would you be able to list each entity and/or governmental agency and the related locations where services are to be performed?

In compliance with mandatory requirements of RFP section 2.5 (I), the comprehensive medical malpractice risk management program surveys should only be performed at the five (5) principal BRIM insured entity locations:

- Morgantown, WV – West Virginia University
- Huntington, WV – Marshall University
- Lewisburg, WV – West Virginia School of Osteopathic Medicine
- Charleston, WV – West Virginia Department of Health and Human Resources
- Charleston, WV – West Virginia Division of Rehabilitation Services

20. Please identify the approximate number and type of insured medical professionals (e.g., physician, nurse practitioner, etc.) at each location where risk management services are being requested.

A comprehensive spreadsheet of medical professionals' specialty expertise is provided on BRIM's website at (www.state.wv.us/brim). See also the response to question four (4) above.

21. Please define the terms "BRIM insured" and "BRIM entity". (E.g., Does "BRIM insured" refer to an individual medical professional as opposed to a facility, or are the terms "BRIM insured" and "BRIM insured facility" being used interchangeably within the RFP?)

For purposes of this RFP, the terms "BRIM insured" and "BRIM entity" represent the five (5) principal locations illustrated in questions/responses 4, 8, 9, 10 and 19 above.

08/22/12

22. The RFP indicates that the successful bidder will be provided claim history and exposure data. Describe the format in which this data will be supplied.

The data will be supplied solely by BRIM in Microsoft Excel worksheets dependent upon its applicability to the scope of services to be provided.

23. How much lead time will typically be necessary for scheduling a BRIM representative/designee to accompany the selected vendor on scheduled loss control consultations? What is meant by "BRIM designee?"

BRIM desires a lead time of 7-14 business days in advance of projected meeting dates. The term "BRIM designee" as used in section 2.5 (B) represents an employee of BRIM selected by BRIM management.

24. Cost Proposal - Attachment C is Cost Sheet. Instructions are for an itemized cost/hour for the mandatory requirements contained in Section 2.5 of the RFP. These would appear to include: a) Loss control consultation meetings including a report for each; b) development of educational/informational materials delivered to all insureds; c) risk identification based on cooperative data review; d) quarterly meetings with BRIM; e) 3 annual regional and/or customer resource training seminars for 100 attendees to include certificates of completion, a handbook, and a light breakfast; f) a checklist/audit form to be administered annually to each insured; g) customer services/resources provided on an as-needed basis; and, h) 3 written reports plus an annual report. Can BRIM confirm that these are the specific items for which it is requesting an hourly rate?

In reviewing “Attachment C: Cost Sheet” of the RFP, it appears that the requirement stated by BRIM is vague and/or ambiguous. We apologize for the ambiguity and hopefully, this clarifies our request and more importantly, facilitates vendor responses:

There are several mandatory requirements stipulated in section 2.5 (A-K). The vendor partner should indicate on Attachment C, or alternately on another suitable sheet(s), either of which should be submitted in a separate sealed envelope, a listing of all mandatory requirements with an itemized cost for such deliverable. For example, section 2.5 (A) requires a deliverable of quarterly comprehensive loss control consultation meetings with BRIM insured entities (WVU, Marshall, WVSOM, DHHR, and Rehabilitation Services) to identify risks and exposures; claim history analysis; educational information services written post meeting summary letters. The vendor partner might list (for illustrative purposes only):

A.

WVU—4 quarterly meetings @ \$5000 each.	Total \$20,000
Marshall—4 quarterly meetings @ \$2500 each.	Total \$10,000
WVSOM—4 quarterly meetings @\$1000 each.	Total \$4,000
DHHR—4 quarterly meetings @\$1000 each.	Total \$4,000
Rehabilitation—4 quarterly meetings @1000 each.	Total \$4,000

Sections 2.5 (B) and (C) should not necessitate a cost parameter but one should acknowledge agreement to meet these requirements. Section 2.5 (D) requires three (3) quarterly meeting with BRIM. An example might be:

1st, 2nd, and 3rd quarter meetings with BRIM--@\$1,000 each.	Total \$3,000
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All other mandatory requirements should be listed and if the vendor partner concludes that a dollar amount should be stated for services rendered, that amount should be listed similar to the examples above. Note: Section 2.5 (F) requests consultations services as needed by BRIM. This

should be interpreted that those consultation services may not be needed. However, a dollar amount per hour should be stipulated in order for BRIM to ascertain a cost for possible consultation services.

When all mandatory requirements are listed and applicable costs are indicated, the itemized costs should be totaled to provide a total cost for all services to be provided.

25. Will BRIM consider providing a standardized cost sheet to be submitted by the proposers?

We are not able to define a standardized cost sheet as queried here. However, a cost sheet itemizing all services to be provided with its attendant per service cost as is indicated above, along with a total cost for all services, is preferred.