

EXHIBIT D

CONTRACT ATTACHMENT 3

Performance Incentives

Goal: To provide excellent customer services and an excellent treatment experience for injured employees.

Criteria: Customer satisfaction rating from completed telemedicine visits.

Compliance: Average score greater than 4.5 stars out of 5 stars.

As measured by: Customer survey completed after each telemedicine visit by the injured employee.

Reporting Tool: Survey Results report from Telemedicine team compiled at the end of each contract year.

Incentive: 4.5+ to 4.75 stars= \$10,000
4.75+ stars= \$20,000

Goal: To ensure timely processing of claims by answering calls made to the Call Center.

Criteria: Measure the total number of calls and the time within each call is answered.

Compliance: 90% or more of all calls answered within 90 seconds

As measured by: Time the call is received by the call center and the time the call is answered

Reporting Tool: Activity report from Analytics

Incentive: 90% or more within 90 seconds = \$10,000

Goal: To ensure accurate reserving of claims and reduce reserve variance.

Criteria: Measure total incurred on claims reported during defined period compared to reserve variance on same set of claims one year later.

Compliance: less than 20% variance in total incurred

As measured by: Loss run report for claims officially reported to the Contractor between 7/1 – 6/30 of a given year, which will be valued as of 6/30 and compared to loss run of same period one year later.

Reporting Tool: Loss runs

Incentive: Less than 20% variance = \$10,000
Less than 15% = \$20,000

Goal: To provide prompt and respectful communication with employees and respond timely to all inquiries.

Criteria: 3-point contact is made or attempted and documented for all claims within 1 business day.

Compliance: 90%

As measured by: Date the claim is assigned to adjuster to date 3-point contact is documented.

Must document attempted or successful 3-point contact to be compliant. No partial credit given for less than 3-point contact.

Reporting tool: Activity report from Analytics

Incentive: 90% to 95% = \$15,000
95%+ = \$25,000

Goal: To comply and report compliance, well within state law requiring timely compensability decisions.

Criteria: Decision to accept, deny, partially deny or delay must be clearly documented by the 10th calendar day from date Contractor is notified.

Compliance: 90%

As measured by: Date claim received by Contractor to the date documented in the claim file regarding status of compensability.

Reporting tool: Compensability Report from Analytics

Incentive: \$20,000

Goal: To provide timely and accurate payments to medical providers.

Criteria: Medical bills are processed timely.

Compliance: Medical bills are processed an average of 8 business days or less.

As measured by: Date medical bills received by Contractor and date sent to adjuster for approval.

Reporting tool: Contractor bill review turnaround time report

Incentive: \$10,000

Goal: Reduce medical cost associated with claim through medical bill review process and proactive medical management.*

Criteria: Evaluate the medical bill review savings from prior vendor and compare to Contractor results.

Compliance: For every percentage point above 64%, Contractor earns \$2,500 up to a max of \$20,000

As measured by: Medical bill review savings divided by billed charges, excludes duplicate bills.

Reporting tool: Bill review savings report

Incentive: \$20,000

* To be re-evaluated if any fee schedule or provider reimbursement legislation enacted.

Goal: To focus on closing claims when appropriate and settle claims quickly when possible.

Criteria: Measure claims reported by claims closed.

Compliance: 98% or better closure ratios.*

As measured by: The claims reported during the contract year plus re-opened claims divided by the number of claims closed in a fiscal year. Does not include Report Only claims (ROs).

Reporting tool: Claim detail report in Contractor's software claims system.

Incentive: 98%-102% = \$10,000

102%+ = \$15,000

* If the State ever reaches a point where claim settlements are limited or prohibited, which would impact closure ratios, Contractor will not be penalized.

Goal: Reduce indemnity costs by aggressive claims handling and return to work prior to the statutory waiting period and facilitation/coordination of early return to work with the medical provider and employer.

Criteria: Evaluate and compare LT to MO ratio from the prior contractor for the previous year (7/1/18 – 6/30/19). The ratio from the previous year for that contractor was 32% Indemnity. The 32% will be used as the baseline for measurement each year.

Compliance: For every percentage point below 32%, the Contractor will be paid \$5,000, capped at \$20,000.

As measured by: Dividing the number of indemnity claims by the total number of claims (excluding any Report Only claims) during most recent contract year.

Reporting tool: Claim detail report from Contractor's software claims system.

Incentive: \$20,000