



State of New Mexico
Educational Retirement Board

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**QUESTIONS AND RESPONSES
DISABILITY EVALUATION SERVICES
RFP# 24-352-0815-02412**

1. Who is the incumbent vendor(s)?

Maximus Federal Services, Inc.

2. What are the current rates for these reviews?

The rates are as follows: Disability Review is \$417.00, Annual Review is \$191.00, and COLA Adjustment is \$93.00.

3. Do reviewing doctors need to hold a license in New Mexico?

No.

4. What is the average page count per review?

An average of approximately 15 pages. This depends on the amount of medical records the member provides to support their claim.

5. Will more than one vendor be awarded?

RFP# 24-352-0815-02412 for Disability Evaluation Services does allow for the awarding of multiple contract agreements (Section II B. 10.)

6. Please provide ERB's current fee schedule for the services currently being utilized to fulfill the services as required in the RFP.

Please see the response to Question #2.

7. Per IV. Specifications, A. Detailed Scope of Work, question #2, what is the current fee for Case Management?

- **(The firm is responsible for sending the Disability Retirement Application Packet to the applicant. Applicants will forward all application- related documentation directly to the firm in a postage-prepaid envelope provided by the firm. The firm will send notice to the applicant acknowledging receipt of the application. If the firm subsequently determines the application is complete, the applicant receives written notice confirming completion of application by the firm.)**

To my knowledge, the cost is all inclusive, there is no additional fee for Case Management.

8. Is there a timeframe in which the applicant must have required disability claim documents and medical records submitted to the Qualified Firm before being considered the member non-compliant?

Yes, there are timelines in place that begin when the application packet is sent to the member from the firm. Currently we provide 45 days for the member to submit their packet to the vendor before a member is non-compliant. There are processes in place to ensure there has been an attempt to contact the member. However, when a member has started the process, but additional information is requested there is an additional 30 days provided to the member to submit the additional information.

9. What is the average disability claim file size (in page count) that gets sent to the physician for review?

Please see the response to Question #4.

10. Per IV. Specifications, A. Detailed Scope of Work, question #5, what type of status information will the Qualified Firm be required to provide to the Agency on a weekly basis? Would the Agency not just direct the applicant to the Firm for questions regarding the status of their claim?

Ideally this is communicated through a dashboard in a portal provided by the firm, with the option to pull reports ad hoc. We review cases in progress, cases pending request for information, cases closed, cases pending periodic review. NMERB will direct the applicant to the firm when they are unable to answer the questions being asked. However, if the member is inquiring about the timeline or a status, having access to see where a member is in the process has been extremely helpful.

11. Per IV. Specifications, A. Detailed Scope of Work, question #6, are permanently disabled applicants subject to re-examinations, or are re-examinations applicable to temporarily disabled applicants only?

A member who is approved for permanent disability is no longer subject to re-examination. The re-evaluation process is for members who were awarded a temporary disability.

12. Per IV. Specifications, A. Detailed Scope of Work, question #8 letter (c), what does the Agency mean by "a detailed description of the diagnosis determined by the Qualified Firm's medical professionals...?" It is presumed to mean the firm will determine the diagnoses for which the applicant is deemed incapacitated, permanently, or temporarily. Is this accurate?

Yes, you are correct.

13. Is there an Attending Physician's Statement, or similar form, that the applicant's treating provider completed to set the diagnostic scope of the review?

Yes, there is a physicians statement of disability that the treating provider shall complete and provide to the member to submit along with the supporting medical documentation.

14. Per IV. Specifications, A. Detailed Scope of Work, question #9, is there a designated timeframe in which the applicant has to submit additional medical records requested by the firm's medical professionals?

30 days however, this is subject to change depending on the situation.

15. Per IV. Specifications, A. Detailed Scope of Work, question #9 (10 as there are two #9), how does the Agency define "completed application"?

The disability application packet completed in its entirety, to include:

1. Disability Retirement Application
2. Informed Consent and Authorization
3. Physicians Statement of Disability
4. Medical evidence to support the disability claim.

16. Per IV. Specifications, A. Detailed Scope of Work, question #10 (11), please elaborate and/or clarify "what a report summarizing the individual recommendations" means.

The format for the disability application recommendation reports may vary for each medical specialty and the reports should contain certain unique discussion areas specific to each specialty (such as mental status exam and substance abuse information for psychiatric-related disability application). However, certain general elements are expected to be addressed within each disability application recommendation report as follows:

- a. Review of records - a description detailing the medical records reviewed for the disability application.
- b. Current or most recent employment status - a description of the applicant's current or most recent job duties and related physical demands.
- c. Diagnosis - a detailed description of the diagnosis determined by the firm's medical professionals from their review of the disability applicant's medical records.
- d. Discussion - a description of the rationale and medical findings that led to the firm's medical professionals' diagnosis and opinions on the disability of the applicant, in light of the duties description provided.
- e. Prognosis - a description of the likelihood for medical recovery and whether the applicant has reached maximum medical improvement (MMI). The prognosis should address whether the applicant might be expected to medically recover sufficiently to return to

his/her job. If a prognosis for recovery exists, the report should include the reasonable length of time the firm's medical professionals expect will be needed to elapse before such a recovery is reasonable and would be expected to be sufficient to require a reexamination of the applicant by the applicant's physician(s). The recommendation report should state if an applicant shows no possibilities for recovery or where a recovery is not expected to allow an applicant to return to his/her job.

- f. Other important issues - a description of other issues the firm's medical professionals believe should be considered or addressed relative to assessing the applicant's request for disability benefits.

17. Per IV. Specifications, A. Detailed Scope of Work, question #12 (13), do all Applicant Appeals require an administrative hearing and attendance from the Qualified Firm's medical professional?

Once a Disability Applicant files a notice of an appeal of the denial of disability benefits, a hearing is set up and then heard by the Hearing Officer. The Agency will require a representative of the Qualified Firm, usually a licensed medical doctor, to testify in support of the Agency's decision to deny the Applicant's disability application. The appearance of this witness can be made by telephone.

18. Per IV. Specifications, A. Detailed Scope of Work, question #12 (13), please provide insight into the type of preparation for the hearing which will be requested by Agency counsel.

Agency counsel will contact the Qualified Firm's representative to help in the preparation of the Agency being able to support its position of the denial of the disability application. This can be conducted by telephone. Usually this can be accomplished in one session.

19. Per IV. Specifications, A. Detailed Scope of Work, question #12 (13), can the Agency provide historical numbers of Applicant appeals that become a reconsideration?

I do not have any statistics on disability appeals that have been successful in overturning the initial finding of denial. However, this is a very rare occurrence and has not occurred for a number of years.

20. How many applications for disability-related retirement benefits needed an Independent Medical Evaluation (IME) as part of the disability retirement claim in 2022 and 2023?

There have been no IME's.

21. How many applications for disability-related retirement benefits needed a Vocational Assessment as part of the disability retirement claim in 2022 and 2023? How frequently (what percentage of claims) are labor market surveys (LMS) required as part of the disability recommendation? Does NMERB require LMS to be based on national, regional,

county or other area statistics? How frequently (what percentage of claims) require transferrable skills analysis (TSA)?

To my knowledge, NNERB has never used LMS to determine information regarding available employment related to disability claims. A disability status is determined by the medical authority's opinion, based upon sufficient medical evidence of whether or not the disability applicant is totally disabled to continue the applicant's employment and unable to retain and obtain other gainful employment commensurate with the member's background, education, and experience.

22. What is the current process for reviewing applications for disability-related cost-of-living adjustments (COLA)?

For the vendor (firm) the application form is different, but the process is the same.

23. What information is the qualified firm reviewing for COLA adjustments; Disability COLA Application Form and physical requirements from the applicant's former ERB employer of most recently held position?

The Disability COLA application, which includes a licensed physician's prognosis and signature, the job description from the applicant's most recently held position prior to retirement and supporting medical records.

24. 3. Desirable Specification: Is a SOC 2 audit required for this bid? Would NNERB accept a Security Scan instead of a SOC 2 audit?

A copy of your previous SOC 2 audit is preferred. Otherwise, a SOC type 1 would be acceptable.

25. IV. Specifications: A. Detailed Scope of work #2: Would the Agency consider allowing the included workflow to be completed electronically via the Firm's online system?

Yes.

26. IV. Specifications: A. Detailed Scope of work #10: What is the firm's responsibilities in the appeal process? Please provide the annual volume of appeals anticipated.

The appeal process is a very rare occurrence, has not occurred for years. However, The Agency will require a representative of the Qualified Firm, usually a licensed medical doctor to testify in support of the Agency's decision to deny the Applicant's disability application. The appearance of this witness can be made by telephone.

27. IV. Specifications: A. Detailed Scope of work #10: What is the total turnaround time for issuing a Recommendation Report? For example, if referral is received on 1/1/2024, is the Recommendation Report due no later than 2/15/2024?

Your example is accurate. As stated in the detailed scope of work, the firm shall provide the written recommendation report to the agency as it is available, but no later than the 15th of the month following the month in which the completed application was received.

28. IV. Specifications: A. Detailed Scope of work #12: Can this notification be sent electronically?

Yes.

29. IV. Specifications: A. Detailed Scope of work #7 and 8: What are the required credentials associated with the review (Part 1) and writing (Part 2) of the Recommendation Report?

Applicant's Name, Application Type, Date Application was received, name and title of medical expert reviewing case, Recommendation, and Synopsis / Summary.

30. Appendix D Cost Response Form: What is the current rate for services provided as associated with the existing contract and vendor?

Please see the response to Question #2.

31. General: Who is the incumbent?

Please see the response to Question #1.

32. General: Will there be multiple vendors awarded?

Please see the response to Question #5.

33. Appendix D Cost Response Form: Can the State provide instructions or an example of how to complete each of the criteria (Description, Type, Quantity, & Cost per Item) outlined in the chart in the Cost Response Form?

Description: Disability Review, Periodic Review, Disability COLA, Appeals, LMA, Admin fee

Type: Dependent on the description (e.g., per recommendation, per hour, per analysis, per month)

Quantity: Dependent on type

Cost per Item: Dependent on Item

34. IV. Specifications: A. Detailed Scope of work #14: Please confirm this is the link to the New Mexico Records retention rule <https://www.srca.nm.gov/parts/title01/01.021.0002.html> and indicate which category would apply to the disability related data retention period.

The link above is correct. New Mexico Administrative Code (NMAC) 1.21.2.242 applies to approved disability and NMAC 1.21.2.243 applies to not approved disability regarding retention and disposition of public records.

35. B. BACKGROUND INFORMATION: Regarding- NMERB staff enters the member into the Contracted Evaluation Service provider's electronic portal.

Question- Please confirm that the Contracted Evaluation Service provider's electronic portal is the system/portal that the vendor is using for the contracted program. Vendor's cloud-based portal (referenced on page 21, #15).

Yes, the portal is provided by the vendor, issuing access to NMERB employees to upload requests, pull reports, import, and export medical information, and communicate with the vendor as needed.

36. A. DETAILED SCOPE OF WORK, 2: Question- Please confirm. NMERB staff begin the member application process by inputting information in the vendor's cloud-based portal (referenced on page 21, #15).

Yes, NMERB staff initiate the process by entering the members request into the portal.

37. A. DETAILED SCOPE OF WORK, 5: Can the state support SFTP (FTP over SSH) for secure data transmission? If not, what methods are currently in place for accepting vendor data transmissions?

ERB can support SFTP for secure data transmission.

38. A. DETAILED SCOPE OF WORK, 13: For each of the past three contract years, please provide the number of hearings the vendor has participated in by the following means:

- i. in person**
- ii. telephonic**
- iii. video conference**

b. Please provide projected annual volume across contract years for vendor hearing participation.

In the last three years, there has not been any disability appeals. It is difficult to assess how many disability hearings we might have for the coming contract years, but we would expect anywhere from 0-3.

39. B. TECHNICAL SPECIFICATIONS, 3. Desirable Specification, 5: Regarding- How is data protected in transit between the vendor and NMERB? Question- Data transmission

methods. Can the state support SFTP (FTP over SSH) for secure data transmission? If not, what methods are currently in place for accepting vendor data transmissions.

Please see the response to Question #37.

40. General: Regarding- NMERB systems, applications, platforms, etc. Question- Is the vendor required to access any NMERB systems, applications, platforms, etc.? If so, what is the name of the NMERB system? Can the state provide information regarding the system? Is this a web interface system, thin client Citrix platform, or mainframe system? Will the state allow a network communication using an internet site secure VPN tunnel for accessing the state system?

Vendor should not need access to any NMERB System other than SFTP for transmission of Disability Evaluation documentation.

41. Appendix D Cost Response Form: The Cost Response Form lists all 4 potential contract years as Options, can the State confirm which contract years comprise the Base Period of the Contract and which years comprise the Option Periods? Is the State able to provide anticipated start and end dates for each of the contract years so Offerors are better able to forecast the anticipated costs of operating the program?

In Section II. A. of the RFP, the tentative due date for the contract awards is December 5, 2023. Based on a multi-year contract of four years, the end date of the contract would be around December 4, 2027. Each contract year would be based on 12 months.

42. Section II.A: Sequence of Events: What is the State's desired target date for when the awarded vendor will begin to provide the requested disability evaluation services?

Services are expected to begin when there is a fully executed contract. In Section II. A. of the RFP, the tentative due date for the contract awards is December 5, 2023.

43. Sample Contract. Item 2.: Compensation: Please provide the "shall not exceed" or maximum set-aside for each year of this contract.

The "shall not exceed" or maximum set-aside for each year of this contract will be determined during contract negotiation.

44. Appendix D: Cost Response Form: Please specify the cost categories that are to be included within the Cost Form along with the volumes for each Cost Category the Agency anticipates for each of the four potential contract years.

Please see the response to Question #33. Unable to provide any additional information.

45. Appendix D: Cost Response Form: Please provide a copy of two or more current monthly

billing invoices.

An IPRA request needs to be submitted through <https://www.erb.nm.gov/inspection-of-public-records/> to obtain copies of invoices for the current vendor.

46. Appendix D: Cost Response Form: Please specify the anticipated beginning and ending dates for each potential contract year.

Please see the response to Question #41.

47. IV. Specifications. Detailed Scope of Work: SOW Item 7: Please provide a breakdown over the last four years of the volume/percentage of cases by medical specialty required for review as listed in SOW Item 7.

Unable to provide by medical specialty; see breakdown by case type below:

Dating back to December 2019

91 Disability Review

107 Periodic

2 COLA

48. IV. Specifications. Detailed Scope of Work: SOW Item 8: Please provide a sample written recommendation report (with PHI redacted).

Please see attachment Appendix A.

49. IV. Specifications. Detailed Scope of Work: SOW Item 8: Please provide a sample two-month Recommendations Summary Report (with PHI redacted).

Please see attachment Appendix B.

50. IV. Specifications. Detailed Scope of Work: SOW Item 6: Please indicate the percentage of cases over the past four years, within the following types of reviews, for each of the following recommended outcome: *permanent disability, temporary disability, and/or denial.*

- a. **New disability applications**
- b. **Annual reviews**
- c. **Cost of Living Adjustments**

Please see the response to Question #47.



Disability Recommendation Letter

May 11, 2023

State of New Mexico Educational Retirement Board
Via Email

Applicant Name	
Application Type	Initial Disability
Application Received	May 1, 2023

To Whom It May Concern at the New Mexico Educational Retirement Board:

As requested, Maximus conducted a review of the above-named applicant's request for disability benefits. Our medical expert recommends that the applicant's request be granted as Permanent Disability. An explanation for this recommendation can be found on the following pages.

Sincerely,

How We Made Our Decision

Maximus sent the file to a medical expert. The medical expert has no history of disciplinary actions or sanctions and is a licensed M.D., board-certified in Physical Medicine and Rehabilitation/Pain Medicine. We screened this medical expert to ensure he/she has no affiliation with any of the parties involved in this review.

Analysis and Determination

Summary:

The applicant is a 61-year-old female, with a history of advanced glaucoma.

The physician statement of disability dated April 25, 2023, indicates that the applicant has disabling diagnosis of severe primary open angle glaucoma. The prognosis is poor. The treatment plan included that the applicant is not currently on medication but has had multiple surgical interventions to both eyes. The applicant is totally disabled to continue her employment. The physical/medical restrictions include poor vision and the eyes fatigue very easily. The applicant has reached maximum medical improvement. The applicant's disability is permanent.

The physician wrote a letter dated January 24, 2023, indicating an initial encounter with the applicant on February 21, 2012, for advanced glaucoma with extensive field loss in both eyes and involving fixation in the right eye. The medical therapy was maximized, and the applicant remained stable for several years. The intraocular pressure became uncontrollable with medication, and she eventually required glaucoma surgery. She then developed hypotony of the left eye and required revision surgery. The physician notes the glaucoma is aggressive and difficult to control and the applicant has had multiple additional procedures and multiple sessions of micropulse laser and has required cataract surgery to both eyes. The physician indicates in the letter that at the most recent visit the applicant was classified as legally blind. The vision was 20/30 with correction in both eyes. The physician notes that vision loss from glaucoma is permanent and the vision loss has made work as an educator difficult/impossible.

Rationale:

Based on the documentation provided the applicant meets the criteria for Permanent Disability (cannot return to teaching or current job).

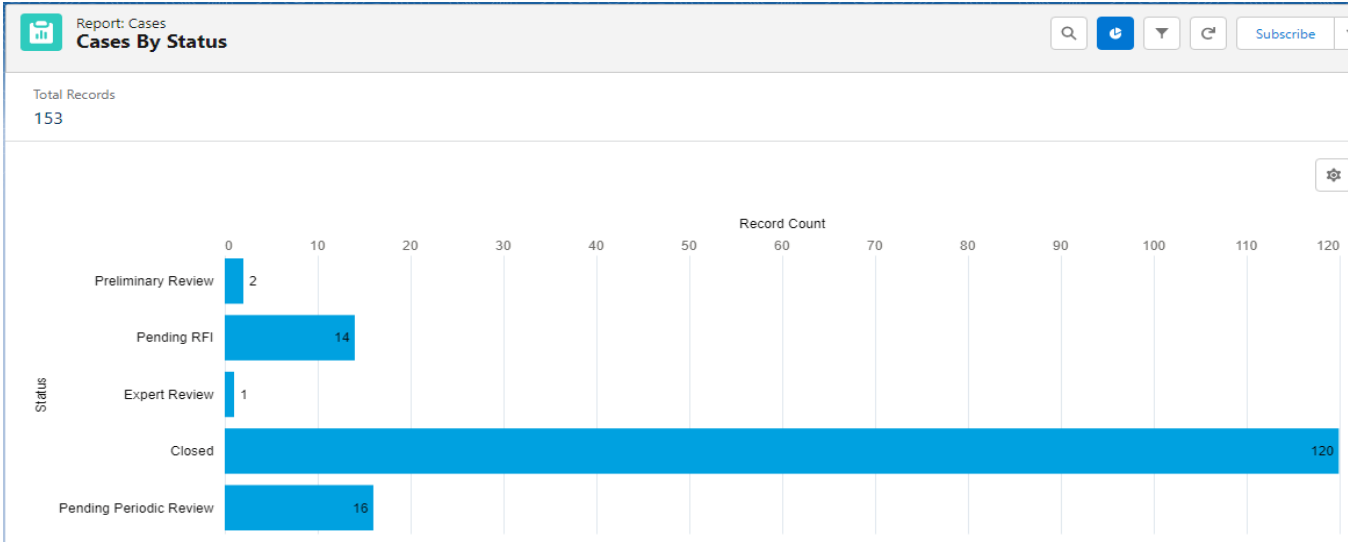
The applicant's job requires activities including preparing for instruction and show written evidence of preparation. Communicate accurate and up-to-date information to students in a way that enhances student learning, and includes demonstrating effective writing skills, and use of standard English. Managing time appropriately and cooperating with

administration, parents, and co-workers. Creating a positive atmosphere and arranging the physical environment of the classroom for optimum learning. Maintain accurate and complete records as required by the school district. Report progress or lack thereof to parents in a timely manner. Attend and participate in faculty and committee meetings. Complete duties such as hall and bus duties as assigned. Leave adequate preparations for a substitute. Take precautions to protect equipment, materials, and facilities. Develop and implement appropriate classroom management strategies while maintaining high expectations for student behavior. Encourage cooperation between students. Maintain student involvement in appropriate tasks

The applicant has diagnoses which include severe primary open-angle glaucoma. An Attending Physicians' Statement identified that the applicant has had multiple surgical interventions to both eyes. The applicant is totally disabled to continue her employment. The physical/medical restrictions include poor vision and the eyes fatigue very easily. The applicant has reached maximum medical improvement. The applicant's disability is permanent. The physician wrote a letter dated January 24, 2023, indicating advanced glaucoma with extensive field loss in both eyes and involving fixation in the right eye. The physician indicates in the letter that at the most recent visit the applicant was classified as legally blind. The vision was 20/30 with correction in both eyes. The physician notes that vision loss from glaucoma is permanent and the vision loss has made work as an educator difficult/impossible. **Therefore, the applicant meets the criteria for Permanent Disability (cannot return to teaching or current job).**

Appendix B

New Mexico Educational Retirement Board



Case #	Member	Case Type	Status	Days Pending Packet	Decision	Decision Letter Sent Date	Comment
NB21-0042		Disability Review	Closed	36	Administrative closure	02/02/2022	
NB21-0003		Periodic Review	Closed		Approve for one year with periodic review	02/17/2022	
NB22-0054		COLA	Closed	33	COLA Approved	02/25/2022	
NB21-0013		Periodic Review	Closed		Approve for one year with periodic review	03/01/2022	
NB21-0004		Periodic Review	Closed	62	Approve with permanent disability	03/14/2022	
NB21-0008		Periodic Review	Closed		Approve with permanent disability	03/25/2022	
NB21-0033		Disability Review	Closed		Approve with permanent disability	03/31/2022	
NB22-0064		Disability Review	Pending Packet	3			
NB22-0066		Disability Review	Pending Packet	3			
NB22-0063		Disability Review	Pending Packet	4			
NB22-0065		Disability Review	Pending Packet	4			
NB22-0062		Disability Review	Pending Packet	15			
NB22-0061		Disability Review	Pending Packet	21			
NB22-0060		Disability Review	Pending Packet	23			
NB22-0059		Disability Review	Pending Packet	24			
NB22-0057		Disability Review	Pending Packet	30			
NB21-0017		Periodic Review	Pending Packet	31			
NB22-0055		Disability Review	Pending Packet	63			waiting on packet
NB22-0052		Disability Review	Pending Packet	78			New packet resent last month--pending return--called and left VM, sent letter
NB21-0016		Periodic Review	Pending Packet	87			packet remains due--states she has covid and it is delayed

NB21-0021		Periodic Review	Pending Packet	87			packet remains incomplete--letter sent
NB21-0051		Disability Review	Pending Packet	101			we continue to wait for her to send MR--will close on 4/30 if none are received
NB21-0038		Disability Review	Pending Packet	165			we continue to wait for her to send MR--will close on 4/30 if none are received
NB21-0025		Disability Review	Pending Packet	238			States he is sending MR this week--will close his case on 4/15 if not

NMERB Cases						
Month 2022	Initial Disability	Periodic Reviews	COLA	Admin Closure		
January	4	0	0	3		
February	0	1	1	0		
March	1	3	0	0		
April						
May						
June						
July						
August						
September						
October						
November						
December						
Total	5	4	1	3		