# CALIFORNIA ASSOCIATION FOR PARK AND RECREATION INDEMNITY BOARD OF DIRECTORS MEETING

#### **AGENDA**

Wednesday, March 28, 2018

10:00 a.m.

# **Telephonic Meeting**

6341 Auburn Blvd., Suite A Citrus Heights, CA 95621 (916) 722-5550

In compliance with the Brown Act the following Board Members and attendees will be dialing into conference call from the following locations:

Lindsay Woods (Board Member), 16292 Lime Street, Hesperia, CA 92340
Dean Wetter (Board Member), 901 West Esplanade, San Jacinto, CA 92583
Tim Barry (Board Member), 4444 East Avenue, Livermore Area, CA 94550
Jim Friedl (Board Member), WorldMark by Wyndham, 2221 Gondola Way, Whistler, B.C., Canada VON1B2

Colin Miller (Board Member), 1000 La Sierra Drive, Sacramento, CA 95864
Brigitte Shearer (Board Member), 1851 Lexington Avenue, San Mateo, CA 94402
CAPRI staff, 6341 Auburn Blvd, Suite A, Citrus Heights, CA 95621
Doug Wozniak (Alliant), 8032 Avenida Secreto, Carlsbad, CA 92009
Byrne Conley (Gibbons & Conley), 3480 Buskirk Avenue Suite 200, Pleasant Hill, CA 94523

#### 1. CALL TO ORDER

#### 2. INTRODUCTIONS

#### 3. PUBLIC COMMENTS

This time is reserved for members of the public to address the Board relative to matters of the CAPRI not on the agenda. No action may be taken on non-agenda items unless authorized by law.

#### 4. CLOSED SESSION

Pursuant to government Code Section 54956.95 (a), the Board will hold a Closed Session to discuss the claims for the payment of tort liability losses, workers' compensation losses, or public liability losses incurred by the Joint Powers Authority. Also, pursuant to government Code Section 54957 (b) (1), the Board will hold a Closed Session to discuss the appointment, employment, and/or evaluation of performance.

- \*A Liability/Property
  - Allegro vs. Rancho Simi Recreation and Park District
  - Arispe vs. Fulton-El Camino Recreation and Park District

- Becker vs. Sunrise Recreation and Park District
- Beliso vs. Arcade Creek Recreation and Park District
- Hendershot vs. Cordova Recreation and Park District
- Perrin-Aquino vs. Greater Vallejo Recreation and Park District
- Claims Settled Since Last Board Meeting
- \*B Workers' Compensation
  - Galvan, Desert Recreation District
  - Bowen, Arcade Creek Recreation and Park District
  - Thorton, Hayward Area Recreation and Park District
  - Willefert, Isla Vista Recreation and Park District
  - Calderon, Desert Recreation and Park District
  - Claims Settled Since Last Meeting
- \*C. Evaluation of Performance Administrator/Risk Manager

#### 5. REPORT FROM CLOSED SESSION

Pursuant to Government Code Section 54957.1, the Board must report in open session any action taken, or lack thereof, taken in closed session.

#### 6. CONSENT ITEMS

The following items are expected to be routine and non-controversial and will be acted upon by the Board at one time without discussion, unless a Board member requests that an item be removed from the consent agenda and held for discussion.

- \*A. Draft CAPRI Board Minutes, November 13, 2017
- \*B. Draft CAPRI Board Minutes, February 21, 2018

#### 7. DISCUSSION/ACTION ITEMS

*A.	Succession Plan Policy	1
*B.	Employee Health and Dental Benefits	5
*C.	2018-2019 CAPRI Budget	6
*D.	CARPD/CAPRI Executive Director Services Contract	7
*E.	Safety Award Plaques Update	8
*F.	CAPRI Workers' Compensation Claim Audit	9

#### 8. ADMINISTRATOR/STAFF REPORTS

The Administrator and staff will report on the following topics, report on committees, district visits, and other activities.

# CAPRI BOARD OF DIRECTORS MEETING March 28, 2018 Page 3

	*A.	CAJPA Conference	32
	*B.	WC Experience Modification Factors	33
	*C.	CARPD Board of Directors Meeting – March 21, 2018	36
	*D.	CAPRI Board of Directors Position Vacancy – Tim Barry's Retirement	37
	*E.	November 4-6, 2018 Board Retreat/Meeting	38
9.	BOA	RD MEMBER REPORTS	
	*A.	Personnel/Finance Committee Report	39
10.		SING COMMENTS time is reserved for comments by Board members and Staff and to identify	

#### matters for future Board business.

\*B. Staff

\*A. Board

# 11. ANNOUNCEMENTS

The next CAPRI Board of Directors meeting will be held on May 30, 2018 at 9:00 a.m. at the Lake Tahoe Resort in South Lake Tahoe, CA.

# 12. ADJOURNMENT

## Agenda Item 7.A

# **DISCUSSION/ACTION ITEMS**

**SUBJECT:** Succession Plan Policy

# **BACKGROUND AND STATUS:**

The Board of Directors directed the Administrator to develop a Succession Plan Policy in the event of an unplanned absence or for a permanent replacement of the Administrator.

The attached is the Succession Plan Policy for CAPRI. This plan has been reviewed by the Personnel/Finance Sub-Committee.

# **RECOMMENDATION:**

To approve the CAPRI Succession Plan Policy for CAPRI.

# **REFERENCE MATERIALS ATTACHED:**

CAPRI Succession Plan Policy



# **Succession Plan for the Administrator Position**

The Board of Directors of the California Association for Park and Recreation Indemnity (CAPRI) recognizes that this is a plan for contingencies due to the disability, death or departure of the Administrator. If the organization is faced with the unlikely event of an untimely vacancy, CAPRI has in place the following succession plan to facilitate the transition to both interim and longer-term leadership.

The Board of Directors of CAPRI has reviewed the job description of the Administrator. The job description is attached. The board has a clear understanding of the Administrator's role in organizational leadership, program development, program administration, operations, Board of Director's relationships and financial operations.

# Succession Plan in Event of a Temporary or Unplanned Absence.

A temporary absence is one of less than three months in which it is expected that the Administrator will return to his/her position once the events precipitating the absence are resolved. An unplanned absence is one that arises unexpectedly, in contrast to a planned leave, such as a vacation or a sabbatical. The Board of Directors is authorized to implement the terms of this emergency plan in the event of the unplanned absence of the Administrator.

In the event of an unplanned absence, the Administrator or the designee is to immediately inform the President of the Board of the absence. As soon as it is feasible, the President should convene a meeting of the Board of Directors to affirm the procedures prescribed in this plan or to make modifications as the Board deems appropriate.

At the time that this plan was approved, the position of Acting Administrator could be:

- Qualified Employee of CAPRI; or
- CAPRI's Legal Counsel; or
- CAPRI's Board President

The Board of Directors may also consider the option of splitting executive duties among the designated appointees.

# **Authority and Compensation of the Acting Executive Director**

The person appointed as Acting Administrator shall have the full authority for decision-making and independent action as the regular Administrator. If the Acting Administrator is an employee of CAPRI, they will receive a out of class pay adjustment of no more than 20% and no less than 5% as a result of their taking on additional responsibility. If the term

of the Acting Administrator is short (less than 3 months) the Acting Administrator may receive no additional compensation as determined by the Board.

# **Board Oversight/Communications Plan**

The President is responsible for monitoring the work of the Acting Administrator. Immediately upon transferring the responsibilities to the Acting Administrator, the President will notify staff members, members of the Board of Directors, key vendors/contractors and Member Districts of the delegation of authority.

# Succession Plan in Event of a Long-Term Temporary, Unplanned Absence

A long-term absence is one that is expected to last more than three months. In accordance with personnel policies, the procedures and conditions to be followed should be the same as for a short-term absence with one addition:

The Board of Directors will give immediate consideration, in consultation with the Acting Administrator, to **temporarily** filling the Administrator position left vacant by the Acting Administrator. This is in recognition of the fact that for a term of more than three months, it may not be reasonable to expect the Acting Administrator to carry the duties of both positions. The position description of a temporary Administrator would focus on covering the priority areas in which the Acting Administrator needs assistance.

# **Completion of Long-Term Emergency Succession Period**

The decision about when the absent Administrator returns to lead CAPRI should be determined by the Administrator and the President. They will decide upon a mutually agreed upon schedule and start date.

# Succession Plan in Event of a Permanent Change in Administrator

A permanent change is one in which it is firmly determined that the Administrator will not be returning to the position. The procedures and conditions should be the same as for a long-term temporary absence with one addition:

The Personnel Sub-Committee will act as the Transition/Search Committee to plan and carry out a transition to a new permanent Administrator. The Board will also consider the need for outside consulting assistance depending on the circumstances of the transition and the Personnel Sub-Committee's capacity to plan and manage the transition and search. The Personnel Sub-Committee will also determine the need for an Interim Administrator, and plan for the recruitment and selection of an Interim Administrator and/or permanent Administrator.

# Options for CAPRI for Succession Plan in Event of Permanent Change in Administrator

CAPRI has several options for Succession Plan in event of a permanent change in the Administrator position to include:

- 1) Replace from within CAPRI
- 2) Advertise the Administrator Position opening in the PARMA, CAJPA and AGRIP job marketplace to fill the Administrator opening. The current Administrator may also provide recommendations of qualified individuals who could be interested in filling the CAPRI Administrator position.
- 3) Solicit JPA Administration firms to provide the Administration for CAPRI.
- 4) Merge with another insurance pool.

## Agenda Item 7.B

#### **DISCUSSION/ACTION ITEMS**

**SUBJECT:** Employee Health and Dental Benefits

#### **BACKGROUND AND STATUS:**

The Personnel/Finance Sub-Committee met on March 13, 2018 and reviewed the Health and Dental Benefits for CAPRI and is recommending a change to our current benefit policy.

Our current benefit plan, which was approved in May of 2013, states that CAPRI will reimburse health insurance and dental insurance with a \$950 cap and a \$50 cap respectively.

The recommendation is to have CAPRI secure the health and dental insurance for CAPRI full-time employees and will pay up to \$950 for health insurance and \$50 for dental insurance.

# **RECOMMENDATION:**

To approve the new health and dental policy that CAPRI will secure the health and dental insurance for CAPRI full-time employees and CAPRI will pay up to \$950 for health insurance and \$50 for dental insurance.

#### **REFERENCE MATERIALS ATTACHED:**

Agenda Item 7.C

#### **DISCUSSION/ACTION ITEMS**

**SUBJECT:** 2018 – 2019 Draft Budget

# **BACKGROUND AND STATUS:**

The Draft 2018-2019 CAPRI budget will be provided as a handout. This is our second shot at the budget based on current usage and projections.

Staff believes the draft budget will be an accurate reflection of CAPRI's revenues and expenditures as of this point in time. Ultimately, these numbers will change as firm insurance quotes are received, actuarial analysis is conducted and the Board determines the direction they want to take CAPRI in the next fiscal year. Staff will provide a more detailed budget for approval at the May Board of Directors meetings.

No action needs to be taken. This is just another opportunity to take a look at the projected budget.

#### **RECOMMENDATION**

Provide direction to staff.

#### **REFERENCE MATERIALS ATTACHED:**

## Agenda Item 7.D

#### **DISCUSSION/ACTION ITEMS**

**SUBJECT:** CARPD/CAPRI Executive Director Services Contract

# **BACKGROUND AND STATUS:**

The current CARPD/CAPRI Executive Director Services Contract will expire June 30, 2018.

Staff will e-mail the Draft "redlined" copy of the CARPD/CAPRI Executive Director contract with a recommended term through June of 2021. Most of the recommended changes will be minor (changing CARPD to 501(c)6, changing the year, changing the term of the contract, adding the word insurance to the WC and Liability coverage, etc.)

Staff will go over the recommended changes at the meeting. Byrne Conley, Legal Counsel should review the contract and the Personnel/Finance Sub-Committee should work with CARPD to finalize the contract.

We will discuss this issue in greater detail at the meeting.

# **RECOMMENDATION:**

None

#### **REFERENCE MATERIALS ATTACHED:**

Agenda Item 7.E

#### ADMINISTRATOR/ STAFF REPORTS

**SUBJECT:** Safety Award Plaques Update

# **BACKGROUND AND STATUS:**

The Safety Awards are derived through the District Visitation Program and are based on a set of risk management guidelines identified in the District Visitation Criteria. Each member district is encouraged to implement the District Visitation Criteria. Those members that put into practice a minimum of 93% of the suggested criteria earn a **Very Good** evaluation. To achieve a Very Good evaluation in the Cycle XV District Visitation Program, a District must obtain a minimum of 53 out of a possible 57 points. In recognition of outstanding performance, District Safety Awards are presented to those members who receive a **Very Good** evaluation. The following districts are now eligible for a Cycle XV Safety Award:

# Cycle XV

Auburn Area	Desert	Rancho Simi
Beaumont-Cherry Valley	Hesperia	Rim of the World
Bear River	Isla Vista	Sunrise
Carmichael	Lake Cuyamaca	Truckee-Donner
Conejo	Pleasant Valley	Valley-Wide

District Safety Awards are presented at the CARPD Conference each spring. This year the CARPD Conference is scheduled for May 30-31 and June 1, 2018 in S. Lake Tahoe, California.

#### **RECOMMENDATION:**

None

#### **REFERENCE MATERIAL:**

None.

## Agenda Item 7.F

# **DISCUSSION/ACTION ITEMS**

**SUBJECT:** CAPRI Workers' Compensation Claims Audit

#### **BACKGROUND AND STATUS:**

ALC Claims Collaborations conducted an audit of York Risk Services regarding CAPRI's Workers' Compensation claims in late February 2018.

Our last audit was conducted in February 2016 by ALC Claims Collaborations where our overall audit score was 86.87%, which was a significant improvement from the previous audit.

This year our final audit score was 90.62% which is a significant improvement from our last audit. There were a few areas of improvement needed that are outlined in the audit; however, overall, we are very happy with the audit results.

We will discuss this in greater detail at the meeting.

#### **RECOMMENDATION:**

None

#### **REFERENCE MATERIALS ATTACHED:**

**ALC CAPRI Claims Audit** 

March 2018 CSAC EIA AUDIT REPORT

**Butte County & CAPRI Third Party Administrator - York** 



# **Table of Contents**

**Executive Summary** Page 2 **Category Results** Page 4 **Audit Team**  Page 21 **Audit Cross Reference List**  Appendix A **Audit Worksheets** Appendix B

#### **EXECUTIVE SUMMARY**

This section will serve as an overview of the audit findings with recommendations for moving forward. The *final score of 90.62%* is the first audit result for York for the combined programs of Butte County and CAPRI.

Category	Points Available	Points	Score
Claims Handling Administration	366	315	86.07%
Claim Creation	176	171	97.16%
Claims Handling Technical	334	308	92.22%
Litigated Cases	6	6	100.00%
Subrogation	9	9	100.00%
Excess	15	12	80.00%
Overall Score	906	821	90.62%

#### We saw strong performance in the following areas:

• A score of 100% was achieved in the categories of caseload, file contents, return phone calls, date stamp mail, file balancing, Medicare reporting, initial decision, delay letter, final decision, AOE/COE investigation, initial reserves for probable value, initial reserves timely, indexing, initial TD/PD payment, DWC notice, copy of award to excess, medical bills paid timely, employee reimbursements timely, self-imposed penalties paid, penalties coded correctly, penalty reimbursement, IMR, NCM used appropriately, apportionment ruled in/out, apportionment pursued appropriately, proactive RTW, SJDB provided timely, TD/4850 reserves separate, FM reserves consistent with OSIP, settlement valuation, Medicare's interest protected, member settlement authority request, proof of member/EIA authority, proper litigation management, settlement proposals direct to member, identify/notice third party, periodic contact with third party, subro pursued for maximum recovery and timely initial excess reporting.

#### Performance areas that require improvement:

- With respect to timely plan of action updates we recommend making sure all open files have a current diary for the adjuster and supervisor. Due to the low score, we recommend reviewing the CSAC standard with the adjusting team. Finally, we recommend creating a weekly or monthly management report wherein the supervisor and claim manager can monitor the timeliness of the POA updates and provide additional training for adjusters not meeting the standard.
- There were four subcategories where only one downgraded file produced a low score. We consider these to be outliers and not an adverse trend. Categories impacted were medical only conversions, payments on correct claims, subsequent TD/PD payments and advance travel timely.

#### **AUDIT CRITERIA**

The audit criterion was formed by using the CSAC EIA standards. The file audits specifically focused on claims handling activity from 02/01/16 through the date of the audit. York provided a list of the open inventory covered by the CSAC EIA program and a random selection of the files was pulled to gather 50 files from the open inventory. The file selection consisted of a mix of indemnity claims, future medical files and medical only claims. File documents, notes, payments, letters and reserves are maintained in electronic form. The files were accessed electronically.

#### **AUDIT PROCESS**

The audit was completed electronically. Each worksheet was provided to Stephanie Millhollon and Jeff Ponte for review and comment. They engaged with the auditors and submitted all questions, feedback or disputes prior to the conclusion of the audit.

# **CATEGORY RESULTS**

Category	Points Available	Points	Score
Claims Handling Administration	366	315	86.07%
Claim Creation	176	171	97.16%
Claims Handling Technical	334	308	92.22%
Litigated Cases	6	6	100.00%
Subrogation	9	9	100.00%
Excess	15	12	80.00%
Overall Score	906	821	90.62%

Category	Points Available	Points	Score
Caseload	2	2	100.00%
Case Review Documentation	202	158	78.22%
Communication	93	87	93.55%
Fiscal Handling	26	25	96.15%
Medicare Reporting	43	43	100.00%
Three Point Contact	29	24	82.76%
Compensability	44	44	100.00%
AOE/COE Investigations	8	8	100.00%
Initial Reserves	58	58	100.00%
Indexing	37	37	100.00%
Payments	116	109	93.97%
Medical Treatment	43	41	95.35%
Apportionment	7	7	100.00%
Disability Management	5	5	100.00%
SJDB	1	1	100.00%
Reserves	111	99	89.19%
Resolution of Claim	27	22	81.48%
Settlement Authority	24	24	100.00%
Litigated Cases	6	6	100.00%
Subrogation	9	9	100.00%
Excess	15	12	80.00%
Overall Score	906	821	90.62%

#### Caseload

#### Standard 100% → Audit Score 100%

There are two non-dedicated adjusters for Butte County with workloads within the CSAC EIA Standards. For CAPRI there is one dedicated adjuster and one non-dedicated person to handle medical only/future medical files. The supervisors for both members do not carry a caseload.

#### **Case Review & Documentation**

Examiner Plan of Action Updates
Files Meeting the Criteria 50 | Files in Compliance 20
Standard 95% → Audit Score 40.00%

Timely plan of action updates were evident within 20 of the 50 claims that met this audit criteria. The following audit files did not meet standard:

A-5362	A-5364	A-5366	A-5369	A-5370	A-5373	A-5374	A-5375	A-5376	A-5377
A-5378	A-5379	A-5381	A-5385	A-5386	A-5387	A-5388	A-5389	A-5390	A-5391
A-5395	A-5396	A-5397	A-5400	A-5404	A-5406	A-5408	A-5410	A-5412	A-5417

#### **Quality Plan of Action**

Files Meeting the Criteria 50 | Files in Compliance 48

Standard 95% → Audit Score 96.00%

Quality plan of actions were evident within 48 of the 50 claims that met this audit criteria. The following audit files did not meet standard: **A-5371** and **A-5372**.

#### **Supervisor Reviews**

Files Meeting the Criteria 48 | Files in Compliance 37

Standard 95% → Audit Score 77.08%

Timely supervisor reviews were evident within 37 of the 48 claims that met this audit criteria. The following audit files did not meet standard:

A-5364	A-5375	A-5376	A-5378	A-5379	A-5395	A-5396	A-5406	A-5410	A-5417
A-5418									

#### **File Contents**

Files Meeting the Criteria 50 | Files in Compliance 50

Standard 95% → Audit Score 100%

File contents were clearly identified within all claims that met this audit criteria.

#### **Medical Only Conversion**

Files Meeting the Criteria 4 | Files in Compliance 3

Standard 95% → Audit Score 75.00%

Timely medical only conversion reviews were evident within 3 of the 4 claims that met this audit criteria. Audit file **A-5358** failed to document a review for closure versus transfer within 90 days.

#### Communication

**Return Phone Calls** 

Files Meeting the Criteria 11 | Files in Compliance 11

Standard 95% → Audit Score 100%

Return phone calls were returned within the standard for all claims that met this audit criteria.

**Respond to Written Inquiries** 

Files Meeting the Criteria 25 | Files in Compliance 21

Standard 95% → Audit Score 84.00%

Written inquiries were timely responded to within 21 of the 25 claims that met this audit criteria. For audit file **A-5369** the member approved the settlement on 01/10/18 and the settlement documents were untimely sent to the employee on 02/20/18. For audit file **A-5376** the member approved the settlement on 06/27/16 and the settlement documents were untimely sent to the employee on 11/17/16. For audit file **A-5385** the settlement was approved by the member on 01/10/17 and the settlement documents were untimely sent to the employee on 01/23/17. For audit file **A-5390** the settlement was approved by the member on 04/03/17 and the settlement documents were untimely sent to the employee on 04/20/17.

**Date Stamp Mail** 

Files Meeting the Criteria 48 | Files in Compliance 48

Standard 95% → Audit Score 100%

All incoming correspondence was date stamped with the date of receipt for all claims that met this audit criteria.

Ongoing Employee Contact

Files Meeting the Criteria 9 | Files in Compliance 7

Standard 95% → Audit Score 77.78%

Timely ongoing contact with the employee while off work was evident within 7 of the 9 claims that met this audit criteria. For audit file **A-5377** there was a gap in employee contact for the period of TPD/TTD from 11/28/16 to 02/17/17. Also, contact after the 02/08/17 surgical procedure was not evident. Audit file **A-5381** failed to document employee contact within 3 days of the surgical procedure.

# **Fiscal Handling**

**Payments on Correct Claims** 

Files Meeting the Criteria 12 | Files in Compliance 11

Standard 95% → Audit Score 91.67%

Payments were made on the correct claims for 11 of the 12 claims that met this audit criteria. For audit file **A-5375** bills paid during the audit period belong to the master file as this audit file was a trailing denied claim that was ultimately dismissed.

**File Balancing** 

Files Meeting the Criteria 14 | Files in Compliance 14

Standard 95% → Audit Score 100%

File balancing was timely evident within all claims that met this audit criteria.

# **Medicare Reporting**

Files Meeting the Criteria 43 | Files in Compliance 43

Standard 100% → Audit Score 100%

Medicare reporting was completed for all claims that met this audit criteria.

#### **Three-Point Contact**

Files Meeting the Criteria 29 | Files in Compliance 24 Standard 95% → Audit Score 82.76%

Timely three-point contact was evident within 24 of the 29 claims that met this audit criteria. For audit file **A-5361** three documented attempts to contact the employee within three days were not evident. For audit file **A-5368** three documented attempts to contact the physician within three days were not evident. For audit file **A-5372** three documented attempts to contact the employee within three days were not evident. For audit file **A-5374** three documented attempts to contact the employee and physician within three days were not evident. For audit file **A-5377** the three-point contacts were untimely completed.

# Compensability

Initial Decision
Files Meeting the Criteria 27 | Files in Compliance 27
Standard 100% → Audit Score 100%

An initial decision was completed timely for all claims that met this audit criteria.

#### **Delay Letter**

Files Meeting the Criteria 8 | Files in Compliance 8

Standard 100% → Audit Score 100%

Delay letters were sent timely for all claims that met this audit criteria.

Final Decision

Files Meeting the Criteria 9 | Files in Compliance 9

Standard 100% → Audit Score 100%

A final decision was made timely for all claims that met this audit criteria.

# **AOE/COE Investigations**

Files Meeting the Criteria 8 | Files in Compliance 8

Standard 95% → Audit Score 100%

AOE/COE investigations were triggered timely for all claims that met this audit criteria.

#### **Initial Reserves**

Initial Reserves for Probable Value
Files Meeting the Criteria 29 | Files in Compliance 29
Standard 95% → Audit Score 100%

The initial reserves were set for the appropriate probable value for all cases that met this audit criteria.

Initial Reserve Timely

Files Meeting the Criteria 29 | Files in Compliance 29

Standard 95% → Audit Score 100%

The initial reserves were set timely for all cases that met this audit criteria.

# **Indexing**

Files Meeting the Criteria 37 | Files in Compliance 37 Standard 95% → Audit Score 100%

Initial indexing and/or appropriate re-indexing was evident within all files that met this audit criteria.

# **Payments**

Initial TD/PD Payment
Files Meeting the Criteria 14 | Files in Compliance 14
Standard 100% → Audit Score 100%

Initial TD/PD payment were timely for all files that met this audit criteria.

#### **DWC Notice**

Files Meeting the Criteria 17 | Files in Compliance 17 Standard 100% → Audit Score 100%

Initial DWC notices were timely for all files that met this audit criteria.

# Subsequent TD/PD Payments

Files Meeting the Criteria 10 | Files in Compliance 9

Standard 100% → Audit Score 90.00%

Subsequent payments were supported and/or timely for 9 of the 10 files that met this audit criteria. For audit file **A-5397** the TD payment for period of 07/29/17 to 08/11/17 was calculated incorrectly.

#### **Timely Final Payment & Notice**

Files Meeting the Criteria 13 | Files in Compliance 10 Standard 100% → Audit Score 76.92%

All final payments and/or notice letters were timely for 10 of the 13 files that met this audit criteria. For audit file **A-5368** the PD decision date of 10/05/17 was missed. For audit file **A-5376** the PD denial was untimely issued 07/19/16 as the PTP report was received 05/24/16. For audit file **A-5377** the 07/16/17 PD decision was missed and the file is currently lacking a PD notice.

#### **Overpayments**

Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95%  $\rightarrow$  Audit Score N/A

There were no applicable claims for this category.

# Undisputed Awards Paid Timely Files Meeting the Criteria 7 | Files in Compliance 5 Standard 95% → Audit Score 71.43%

Undisputed awards were paid timely for 5 of the 7 claims that met this audit criteria. Audit file **A-5387** was settled via Stipulation on 03/07/17 with payment untimely issued 03/22/17. Audit file **A-5390** was settled via Stipulation on 06/21/17 with payment untimely issued 07/11/17.

#### **Copy of Award to Excess**

Files Meeting the Criteria 1 | Files in Compliance 1

Standard 95% → Audit Score 100%

The excess carrier was copied with the Award for the claim that met this audit criteria.

Medical Bills Paid Timely
Files Meeting the Criteria 42 | Files in Compliance 42
Standard 100% → Audit Score 100%

Medical bills were paid timely for all claims that met this audit criteria.

Objection Letters Timely
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 100% → Audit Score N/A
There were no applicable claims for this category.

Employee Reimbursements Timely
Files Meeting the Criteria 5 | Files in Compliance 5
Standard 95% → Audit Score 100%

Employee reimbursements were timely for all claims that met this audit criteria.

Advance Travel Timely
Files Meeting the Criteria 4 | Files in Compliance 3
Standard 95% → Audit Score 75.00%

Advance travel was timely paid for 3 of the 4 claims that met this audit criteria. For audit file **A-5374** advance mileage for the 11/29/16 med-legal evaluation is not evident.

Self-Imposed Penalties Paid
Files Meeting the Criteria 1 | Files in Compliance 1
Standard 100% → Audit Score 100%

Self-imposed penalties were timely paid for the claim that met this audit criteria.

Penalties Coded Correctly

Files Meeting the Criteria 1 | Files in Compliance 1

Standard 95% → Audit Score 100%

Penalties were coded correctly for the claim that met this audit criteria.

Penalty Reimbursement Plan

Files Meeting the Criteria 1 | Files in Compliance 1

Standard 95% → Audit Score 100%

There was a proper penalty reimbursement plan evidenced within the claim that met this audit criteria.

#### **Medical Treatment**

Proper Use of UR

Files Meeting the Criteria 39 | Files in Compliance 37

Standard 100% → Audit Score 94.87%

Proper UR was evidenced within 37 of the 39 claims that met this audit criteria. For audit file **A-5368** there is an 09/15/17 medical entry that indicates the RFA dated 08/22/17 was not timely addressed so the treatment had to be approved. For audit file **A-5374** there appears to be a lack of UR for the acupuncture treatment that continued in to August 2016 (UR approved July 2016 acupuncture).

UR Dispute Resolved via IMR

Files Meeting the Criteria 3 | Files in Compliance 3

Standard 100% → Audit Score 100%

In that only the employee, his representative or the treating doctor can request IMR the administrator can have no impact on ensuring UR disputes are resolved by IMR. There were 3 claims with an IMR request or decision with proper medicals submitted by the TPA.

NCM Used Appropriately
Files Meeting the Criteria 1 | Files in Compliance 1
Standard 95% → Audit Score 100%

Proper NCM was evident within the claim that met this audit criteria.

# **Apportionment**

Ruled In/Out
Files Meeting the Criteria 4 | Files in Compliance 4
Standard 95% → Audit Score 100%

Apportionment was properly ruled in/out for all claims that met this audit criteria.

Pursued Appropriately
Files Meeting the Criteria 3 | Files in Compliance 3
Standard 95% → Audit Score 100%
Apportionment was properly pursued for all claims that met this audit criteria.

# **Disability Management**

Proactive Return to Work

Files Meeting the Criteria 5 | Files in Compliance 5

Standard 95% → Audit Score 100%

Proactive return to work was evident within all claims that met this audit criteria.

Member Noticed of Permanent Work Restrictions
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

20 Day Member Follow Up on Permanent Restrictions Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95% → Audit Score N/A

There were no applicable claims for this category.

#### **SJDB**

SJDB Provided Timely
Files Meeting the Criteria 1 | Files in Compliance 1
Standard 100% → Audit Score 100%
The SJDB was appropriately and timely sent for the claim that met this audit criteria.

SJDB Concluded Appropriately
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

#### **Reserves**

Reserves Adjusted Timely at Diary or with Triggering Event Files Meeting the Criteria 49 | Files in Compliance 39 Standard 100% → Audit Score 79.59%

Reserves were timely adjusted with a triggering event, or on diary, for 39 of the 49 claims that met this audit criteria.

The following file was downgraded for an untimely and understated medical reserve: A-5358.

The following file was downgraded for untimely and understated reserve for the overall case exposure: **A-5362.** 

The following files were downgraded for overstated indemnity reserve and/or an untimely reduction of the indemnity reserve: **A-5371, A-5406, A-5411, A-5412** and **5418.** 

The following file was downgraded for an understated indemnity reserve: A-5372.

The following file was downgraded for an overstated reserve for the overall case exposure: A-5375.

The following were downgraded for untimely and understated expense reserves: A-5410.

TD & 4850 Reserved Separately
Files Meeting the Criteria 5 | Files in Compliance 5
Standard 95% → Audit Score 100%

Separate TD/4850 reserves were evidenced on all claims that met this audit criteria.

PD Exposure Includes Life Pension
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 100% → Audit Score N/A
There were no applicable claims for this category.

FM Reserves Consistent with OSIP Standards
Files Meeting the Criteria 11 | Files in Compliance 11
Standard 100% → Audit Score 100%

Future medical reserves were in line with OSIP standards for all claims that met this audit criteria.

Allocated Reserve Includes medical cost containment, legal, investigation, copy service and other related fees. Files Meeting the Criteria 46 | Files in Compliance 44 Standard 100% → Audit Score 95.65%

Allocated reserves contained values for bill review, utilization review and independent medical review for 44 of the 46 claims that met this audit criteria. For audit files **A-5362** and **A-5410** the allocated reserves were not accurately forecasted resulting in multiple reserve increases during the audit period.

#### Reserve Detail

No recommended changes 5 claims
Increase recommended 2 claims
Decrease recommended 43 claims
Total estimated reserve variance (\$619)

#### **Resolution of Claim**

Resolution Pursued within 10 Days
Files Meeting the Criteria 17 | Files in Compliance 12
Standard 95% → Audit Score 70.59%

Resolution was timely pursued within ten days for 12 of the 17 claims that met this audit criteria. For audit file **A-5374** the defense attorney recommended Stip at 0% on 12/19/16. The initial settlement authority request was untimely completed 01/17/17. For audit file **A-5376** the PTP report was received 05/24/16 and the settlement authority request was untimely completed 06/09/16. For audit file **A-5378** the employee was MMI as of 08/17/17. There is documentation of an untimely discussion with the employee regarding settlement on 09/19/17 and the settlement request was untimely sent to the member on 12/06/17. For audit file **A-5390** the employee was deemed MMI 07/27/16 with the MMI report received on 11/04/16. This WCAB requires completion of the DEU rating on pro per cases. The DEU rating was received 02/27/17 with settlement authority untimely sent to the member on 03/23/17. For audit file **A-5403** the claimant was deemed MMI on 11/28/17 with the MMI report received on 01/30/18. The settlement authority request was untimely sent to the member on 02/25/18.

#### **Settlement Valuation**

Files Meeting the Criteria 9 | Files in Compliance 9 Standard 95% → Audit Score 100%

Accurate settlement valuations were evident within all claims that met this audit criteria.

Medicare's Interests Protected
Files Meeting the Criteria 1 | Files in Compliance 1
Standard 95% → Audit Score 100%

Medicare's interests were protected for the claim that met this audit criteria.

# **Settlement Authority**

EIA Settlement Authority Requested
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

Member Settlement Authority Requested
Files Meeting the Criteria 13 | Files in Compliance 13
Standard 95% → Audit Score 100%

Member settlement authority was evident within all claims that met this audit criteria.

Proof of Member/EIA Authority

Files Meeting the Criteria 11 | Files in Compliance 11

Standard 95% → Audit Score 100%

Proof of Member/EIA settlement authority was evident within all claims that met this audit criteria.

# **Litigated Claims**

Initiate Investigation Material to Potential Litigation Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95% → Audit Score N/A

There were no applicable claims for this category.

Defense Attorney on Panel with Proper Initial & Ongoing Management Files Meeting the Criteria 5 | Files in Compliance 5 Standard 95% → Audit Score 100%

Approved defense counsel assigned to each file with proper initial and ongoing litigation management was evident within all claims that met this audit criteria.

Settlement Proposals Direct to Member in Concise and Clear Written Form with Reasoned Recommendation Files Meeting the Criteria 1 | Files in Compliance 1 Standard 95% → Audit Score 100%

Defense counsel's settlement proposals were validated and timely communicated to the member for the claim that met this audit criteria.

Member Involved in Deposition, Examinations and Trial Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95% → Audit Score N/A

There were no applicable claims for this category.

Comply with Reporting Requirements of Member Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95% → Audit Score N/A

There were no applicable claims for this category.

# **Subrogation**

Identify & Notice 3<sup>rd</sup> Party in 14 days
Files Meeting the Criteria 5 | Files in Compliance 5
Standard 95% → Audit Score 100%

The potential  $3^{rd}$  party was timely noticed within 14 days for all claims that met this audit criteria.

Periodic Contact with 3<sup>rd</sup> Party Evidenced
Files Meeting the Criteria 2 | Files in Compliance 2
Standard 95% → Audit Score 100%

Periodic contact with the 3<sup>rd</sup> party was evident within all claims that met this audit criteria.

Complaint or Lien Filed Timely
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

Member Involved in Complaint
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

Subrogation Pursued for Maximum Recovery
Files Meeting the Criteria 2 | Files in Compliance 2
Standard 95% → Audit Score 100%
Subrogation was pursued for maximum recovery for both claims that met this audit criteria.

Member/EIA Approval to Waive or Settle 3<sup>rd</sup> Party Case Files Meeting the Criteria 0 | Files in Compliance N/A Standard 95% → Audit Score N/A

There were no applicable claims for this category.

#### **Excess Coverage**

Report within 5 Days of Knowledge That Reporting Criteria Met

Files Meeting the Criteria 5 | Files in Compliance 5

Standard 95% → Audit Score 100%

Reporting was done within five days for all claims that met this audit criteria.

Subsequent Reports Meet 90/180 Day Standard Files Meeting the Criteria 10 | Files in Compliance 7 Standard 95% → Audit Score 70.00%

Subsequent reports were timely for 7 of the 10 claims that met this audit criteria. The following claims did not meet standard: **A-5411, A-5412** and **A-5417.** 

Reimbursement Requests Meet 90/180 Standard
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

Closing Report Sent
Files Meeting the Criteria 0 | Files in Compliance N/A
Standard 95% → Audit Score N/A
There were no applicable claims for this category.

**Claims Handling Administration** 

Category	Points Available	Points	Score	Standard	Standard Met
Claims Handling Administrative					
Caseload					
Supervisor Caseload	1	1	100.00%	100%	YES
Adjuster Caseload	1	1	100.00%	100%	YES
Sub-Total of Category	2	2	100.00%		
Case Review & Documentation					
Examiner Plan of Action Updates	50	20	40.00%	95%	NO
Quality POA	50	48	96.00%	95%	YES
Supervisor Reviews	48	37	77.08%	95%	NO
File Contents	50	50	100.00%	95%	YES
Medical Only Conversion	4	3	75.00%	95%	NO
Sub-Total of Category	202	158	78.22%		
Communication					
Return Phone Calls	11	11	100.00%	95%	YES
Respond To Written Inquiries	25	21	84.00%	95%	NO
Date Stamp Mail	48	48	100.00%	95%	YES
Ongoing Employee Contact	9	7	77.78%	95%	NO
Sub-Total of Category	93	87	93.55%		
<i></i>					
Fiscal Handling			04.670/	050/	
Payments On Correct Claims	12	11	91.67%	95%	NO
File Balancing	14		100.00%	95%	YES
Sub-Total of Category	26	25	96.15%		
Ad disease Demonstrate					
Medicare Reporting	43	42	100.00%	1000/	VEC
Medicare Reporting	43	43	100.00%	100%	YES
Sub-Total of Category	43		100.00%		
Claims Handling Administrative Score	366	315	86.07%		

CAPRI				Other Accounts				
Adjuster / Supervisor	Indemnity	Med Only	Future Med	Indemnity	Med Only	Future Med	Total	Weighted Value
Teng Her, Supervisor	0	0	0	o	0	0	0	0
Sally Town, Adjuster	89	12	30	0	0	0	131	110
Shawna Culp, Supervisor	0	0	0	0	0	0	0	0
Marietta Orden-Schaab, Adjuster	0	1	29	2	0	164	196	99
Total	89	13	59	2	0	164	327	209

# Claim Creation

Category	Points Available	Points	Score	Standard	Standard Met
Claim Creation					
Three Point Contact	29	24	82.76%	95%	NO
Sub-Total of Category	29	24	82.76%		
Compensability					
Initial Decision	27	27	100.00%	100%	YES
Delay Letter	8	8	100.00%	100%	YES
Final Decision	9	9	100.00%	100%	YES
Sub-Total of Category	44	44	100.00%		
AOE/COE Investigation	8	8	100.00%	95%	YES
Sub-Total of Category	8	8	100.00%		
Initial Reserves					
Initial Reserves for Probable Value	29	29	100.00%	95%	YES
Initial Reserves Timely	29	29	100.00%	95%	YES
Sub-Total of Category	58	58	100.00%		
Indexing	37	37	100.00%	95%	YES
Sub-Total of Category	37	37	100.00%		
Claim Creation Score	176	171	97.16%		

# Claim Handling Technical

	Category	Points Available	Points	Score	Standard	Standard Met
	Claims Handling Technical					
	Payments					
	Initial TD/PD Payment	14	14	100.00%	100%	YES
	DWC Notice	17	17	100.00%	100%	YES
	Subsequent TD/PD Payments	10	9	90.00%	100%	NO
	Timely Final Payment & Notice	13	10	76.92%	100%	NO
	Overpayments	0	0	N/A	95%	N/A
	Undisputed Awards Paid Timely	7	5	71.43%	95%	NO
	Copy of Award to Excess	1	1	100.00%	95%	YES
	Medical Bills Paid Timely	42	42	100.00%	100%	YES
	Objection Letters	0	0	N/A	100%	N/A
	Employee Reimbursements Timely	5	5	100.00%	95%	YES
	Advance Travel Timely	4	3	75.00%	95%	NO
	Self Imposed Penalties Paid	1	1	100.00%	100%	YES
	Penalties Coded Correctly	1	1	100.00%	95%	YES
	Penalty Reimbursement	1	1	100.00%	95%	YES
	Sub-Total of Category	116	109	93.97%		
	Medical Treatment					
	Proper Use of UR	39	37	94.87%	100%	NO
	UR Dispute Resolved Via IMR	3	3	100.00%	100%	YES
	NCM Used Appropriately	1	1	100.00%	95%	YES
	Sub-Total of Category	43	41	95.35%		
	Apportionment					
	Apportionment Ruled In/Out	4	4	100.00%	95%	YES
Арр	portionment Pursued Appropriately	3	3	100.00%	95%	YES
	Sub-Total of Category	7	7	100.00%		

Category	Points Available	Points	Score	Standard	Standard Met
Disability Management					
Proactive RTW	5	5	100.00%	95%	YES
Member Noticed of Permanent Work Restrictions	0	0	N/A	95%	N/A
20 Day Member Follow Up on Permanent Restrictions	0	0	N/A	95%	N/A
Sub-Total of Category	5	5	100.00%		
SJDB					
SJDB Provided Timely	1	1	100.00%	100%	YES
SJDB Concluded Appropriately	0	0	N/A	95%	N/A
Sub-Total of Category	1	1	100.00%		
Reserves					
Reserves Adjusted Timely	49	39	79.59%	100%	NO
TD & 4850 Reserves Separate	5	5	100.00%	100%	YES
PD Exposure Includes Life Pension	0	0	N/A	95%	N/A
FM Reserves Consistent with OSIP Standards	11	11	100.00%	100%	YES
Allocated Reserves Accurate	46	44	95.65%	100%	NO
Sub-Total of Category	111	99	89.19%		
Resolution of Claim					
Resolution Pursued Timely	17	12	70.59%	95%	NO
Settlement Valuation	9	9	100.00%	95%	YES
Medicare's Interests Protected	1	1	100.00%	95%	YES
Sub-Total of Category	27	22	81.48%		
Settlement Authority					
EIA Settlement Authority Requested	0	0	N/A	95%	N/A
Member Settlement Authority Requested	13	13	100.00%	95%	YES
Proof of Member/EIA Authority	11	11	100.00%	95%	YES
Sub-Total of Category	24	24	100.00%		
Claims Handling Technical Score	334	308	92.22%		

# **Litigated Cases**

Category	Points Available	Points	Score	Standard	Standard Met
Litigated Cases					
Initiate Investigation Material to Potential Litigation	0	0	N/A	95%	N/A
Proper Litigation Management & Defense Attorney on Panel	5	5	100.00%	95%	YES
Settlement Proposals Direct to Member in Concise & Clear	1	1	100.00%	95%	YES
Member Involved in Legal Activities where Appropriate	0	0	N/A	95%	N/A
Comply with Member Reporting Requirements	0	0	N/A	95%	N/A
Litigated Cases Score	6	6	100.00%		

# **Subrogation**

Category	Points Available	Points	Score	Standard	Standard Met
Subrogation					
Identify & Notice 3rd Party Timely	5	5	100.00%	95%	YES
Periodic Contact With 3rd Party	2	2	100.00%	95%	YES
Complaint or Lien Filed Timely	0	0	N/A	95%	N/A
Member Involved in Complaint vs. Lien	0	0	N/A	95%	N/A
Subro Pursued for Maximum Recovery	2	2	100.00%	95%	YES
Member/EIA Approval to Accept Waive or Settle 3rd Party Case	0	0	N/A	95%	N/A
Subrogation Score	9	9	100.00%		

# **Excess**

Category	Points Available	Points	Score	Standard	Standard Met
Excess					
Timely Initial Excess Reporting	5	5	100.00%	95%	YES
Timely Subsequent Excess Reporting	10	7	70.00%	95%	NO
Timely Excess Reimbursement Requests	0	0	N/A	95%	N/A
Closing Excess Report Sent	0	0	N/A	95%	N/A
Excess Score	15	12	80.00%		

# **Overall Score by Member**

# **CAPRI**

Category	Points Available	Points	Score
Claims Handling Administration	182	159	87.36%
Claim Creation	85	81	95.29%
Claims Handling Technical	161	143	88.82%
Litigated Cases	5	5	100.00%
Subrogation	8	8	100.00%
Excess	7	4	57.14%
Overall Score	448	400	89.29%

#### NOTE:

In the master score card the total points available for adjuster and supervisor workloads is 2.

In the individual score cards, so that the adjuster and supervisor workloads can be considered, they are counted within each individual program total. Because of this the total points available for adjuster and supervisor workload is 4 when calculating the totals for the two programs.

This creates a variance of 2 in the total points available when comparing the master values to the combined values for Butte County and CAPRI. Likewise, there will be a variance in the total accurate points between the master values and the combined values.

The Master value is accurate as to the total points available and total points received. The individual program charts are supplemental to provide CSAC with information on the relative performance of each Member.

#### **AUDIT TEAM**

#### Angela Mudge

#### Owner, President & CEO

Over 27 years of workers' compensation claims experience. IEA Certificate, Self-Insured Certificate & WCCP Designation. Prior positions held - adjuster, supervisor, claims manager and vice president.

#### Anne Ruiz

#### **Chief Operating Officer**

Over 20 years of workers' compensation claims experience. Associate in Claims Designation, Self-Insured Certificate & WCCA Designation. Prior positions held - adjuster, supervisor, claims services liaison and central services manager.

#### **Mariam Osborne**

#### Senior Collaborator

Over 18 years of workers' compensation claims experience. IEA Certificate, Self-Insured Certificate and WCCP Designation. Prior positions held – adjuster and supervisor.

## Agenda Item 08.A

## **ADMINISTRATOR/STAFF REPORTS**

**SUBJECT: CAJPA Conference** 

# **BACKGROUND AND STATUS:**

The CAJPA Conference is scheduled for September 11-14, 2018 in South Lake Tahoe. The hotels for this conference include: Lake Tahoe Resort; Harrah's and Harvey's in South Lake Tahoe. The Lake Tahoe Resort usually sells out quickly.

If you would like to attend the conference, let me know as soon as possible so I can make hotel reservations and get you registered early.

Staff will discuss this in greater detail at the meeting.

# **RECOMMENDATION:**

Information only.

#### **REFERENCE MATERIALS ATTACHED:**

None.

Agenda Item 08.B

#### **DISCUSSION/ACTION ITEMS**

**SUBJECT:** Workers' Compensation Experience Modification Factor

#### **BACKGROUND AND STATUS:**

Jack Chen of Alliant Insurance Services has calculated this year's WC Experience Modification Factors for 2018 – 2019 (attached).

Four years ago the Board modified the Workers' Compensation Premium Allocation formula. The Board removed the cap for decreases in Experience Modifications so that Districts benefitted from the lower experience modification factors. So the current WC Premium Allocation Formula provides for a floor and ceiling cap of 75% and 225%. It also limits year to year swings by placing a cap on how much the Experience Modification Factor can go up which is capped at 20%.

The experience modification factor shows the actual Ex Mod for this year and the one that will be used in the formula in parenthesis if the cap came into play.

#### **RECOMMENDATION:**

None.

#### **REFERENCE MATERIALS ATTACHED:**

WC Experience Modification Factor

		CAPRI EX		PERIENCE MODIFICATIONS					
DISTRICT MEMBER	2010	2011	2012	2013	2014	2015	2016	2017	2018
Ambrose Recreation	102%	132% (122%)	106%	132% (126%)	201% (146%)	164%	207% (184%)	137%	143%
Arcade Creek	142%	153%	156%	144%	167% (164%)	251% (184%)	286% (204%)	233% (224%)	218%
Arden Manor	%86	94%	%88	%62	81%	82%	85%	82%	85%
Arden Park	85%	87%	%96	%36	95%	101%	146% (121%)	147% (141%)	%66
Auburn Area	109%	(86%) %88	119% (108%)	128%	164% (148%)	108%	%92	74%	131% (94%)
Bear Mountain	%82	%62	%22	131% (97)%	136% (117%)	144% (137%)	84%	142% (104%)	108%
Bear River			100%	100%	100%	100%	81%	87%	%98
Beaumont-Cherry	%92	83%	%62	84%	87%	83%	81%	81%	%08
Belvedere-Tiburon		103%	%06	78%	78%	%08	82%	83%	100%
Boulder Creek			100%	100%	100%	100%	81%	87%	%98
Buttonwillow							85%	85%	85%
Carmichael Recreation	107%	73% (87%)	(422) %29)	(%52) %89	85%	85%	85%	131% (105%)	133% (125%)
CAPRI	94%	%26	91%	(%52) %22	(22) %22	%82	%82	84%	84%
Central Plumas	83%	94%	%06	%82	78%	%08	82%	87%	%98
Coalinga-Huron	121%	287% (141%)	158%	155%	%£6	108%	91%	%88	73% (75%)
Cordova Recreation	%98	88%	85%	111% (105%)	135% (125%)	190% (145%)	202% (165%)	128%	%26
Desert Recreation	180%	225% (200%)	208%	226% (225%)	291% (225%)	316% (225%)	164%	123%	115%
Dunsmuir			100%	100%	100%	100%	81%	87%	%98
Durham Recreation	%26	%66	%06	80%	79%	81%	84%	%98	%98
Fair Oaks Rec	108%	%66	%86	139% (118%)	176% (138%)	186% (158%)	199% (178%)	182%	232% (202%)
Fulton-El Camino	138%	131%	120%	111%	115%	83%	84%	120% (104%)	164% (124%)
Greater Vallejo	126%	105%	72% (75%)	74% (75%)	80%	87%	82%	128% (102%)	109%
Hayward Area Rec	190%	157%	120%	114%	117%	111%	81%	157% (101%)	141% (121%)
Hesperia Recreation	%26	101%	123% (121%)	130%	124%	113%	113%	117%	114%
Highland Recreation	84%	119% (104%)	113%	117%	81%	104% (101%)	%66	82%	80%
Isla Vista Rec	77%	77%	85%	83%	86%	%92	76%	79%	119% (99%)
Jurupa Area Rec	141%	132%	147%	137%	158% (157%)	119%	121%	158% (141%)	115%
Ladera Recreation	104%	105%	105%	78%	78%	80%	82%	87%	%06
Lake Cuyamaca Rec		130%	84%*	%88	126% (108%)	119%	135%	143%	141%
Livermore Area Rec	124%	123%	104%	83%	137% (113%)	177% (133%)	190% (153%)	148%	146%
McFarland Rec	88%	%68	84%	138% (104%)	141% (124%)	139%	%98	%98	100%
Mendocino Coast Rec	133%	161% (153%)	129%	151% (149%)	110%	115%	171% (135%)	178% (155%)	174%
Mission Oaks Rec	84%	88%	%06	%86	93%	%62	72% (75%)	70% (75%)	70% (75%)
Monte Rio					100%	100%	81%	111% (101%)	111%
Mt. Shasta			210%	210%	210%	200%	177%	93%	%06
North Highlands	%62	%26	%86	136% (118%)	180% (138%)	185% (158%)	127%	91%	%62
North of the River	%66	128% (119%)	125%	152% (145%)	105%	116%	84%	136% (104%)	198% (124%)
Orangevale Rec	%92	82%	73% (75%)	149% (95%)	157% (115%)	168% (135%)	146%	113%	74% (75%)
Paradise Recreation	177%	276% (197%)	240% (217%)	174%	114%	169% (134%)	170% (154%)	153%	88%
Pleasant Hill Rec	%06	100%	83%	%62	106% (99%)	118%	115%	%02	%82
Pleasant Valley Rec	85%	120%	(32%) (28%)	(%52) %99	86%	82%	82%	111%	136% (131%)
Rancho Simi	%56	124% (115%)	132%	131%	134%	149%	196% (169%)	201% (189%)	162%

		CAPRI EX		<b>ERIENCE MODIFICATIONS</b>					
DISTRICT MEMBER	2010	2011	2012	2013	2014	2015	2016	2017	2018
Rio Linda-Elverta	160%	157%	150%	169%	%86	94%	%62	105% (99%)	105%
Russian River Rec	%86	105%	102%	94%	87%	93%	94%	103%	111%
Shafter Recreation	94%	%26	91%	78%	%62	107% (99%)	101%	106%	%66
Soledad Mission							%62	%62	%98
Southgate Rec	120%	124%	86%	102%	126% (122%)	145% (142%)	%98	88%	117% (108%)
Strawberry Recreation	85%	83%	91%	83%	166% (103%)	171% (123%)	162% (143%)	%58	82%
Sunrise	149%	153%	140%	122%	150%	146%	142%	123%	83%
Tehachapi Valley	188%	190%	211% (210%)	182%	205%	%96	109%	143% (129%)	140%
Truckee-Donner Rec	105%	%//	83%	%96	114%	108%	95%	109%	149%
Tuolumne Rec		%92	91%*	78%	%08	81%	106% (101%)	111%	%96
Valley Wide Rec	%69	85%	%96	111%	95%	123% (112%)	101%	106%	(%52) %69
Wasco Recreation	91%	91%	%68	85%	%28	%88	%06	103%	107%
Weed			100%	100%	100%	100%	106%	112%	111%
Western Gateway							%22	%22	%22
West Side	82%	85%	72% (75%)	74% (75%)	77%	77%	81%	%66	108%

Agenda Item 08.C

# **ADMINISTRATIVE/STAFF REPORTS**

**SUBJECT:** CARPD Meeting Update – March 21, 2018

#### **BACKGROUND AND STATUS:**

CARPD Board of Directors will meet on Wednesday, March 21, 2018. The following items will be discussed at the meeting: CARPD Spring Conference 2018; Executive Directors Goals and Objectives; CARPD Checking/Savings Account Update; Possible Bylaw Revisions; CARPD/CAPRI Executive Director Services Contract; CAPRI Board of Directors Position Vacancy; 2018 Slate of Officers; and Prop 68.

If the Board has any questions, we will discuss the CARPD meeting in greater detail at our Board of Directors meeting.

# **RECOMMENDATION:**

Information only.

#### **REFERENCE MATERIALS ATTACHED:**

Agenda Item 08.D

# ADMINISTRATIVE/STAFF REPORTS

SUBJECT: CAPRI Board of Directors Vacancy – Tim Barry's Retirement

#### **BACKGROUND AND STATUS:**

Tim Barry has submitted his letter announcing his retirement from Livermore Area Recreation and Park District on July 5, 2018. As a result, Tim tendered his resignation from the CAPRI Board of Directors effective July 5, 2018 also. Tim has been serving on the CAPRI Board of Directors as the CAPPI representative since January 1, 2016. Thank you Tim for your years of service to CAPRI and to Recreation and Park Districts.

This is a CARPD appointed position on the CAPRI Board of Directors. CARPD has two positions on the CAPRI Board of Directors that are appointed by CARPD. As standard protocol, CARPD will send letters to the membership soliciting interest in serving on the CAPRI Board of Directors as the CARPD representative. The CARPD Board will then select someone to serve on the CARPD Board at their May Board of Directors meeting.

#### **RECOMMENDATION:**

Information only.

# **REFERENCE MATERIALS ATTACHED:**

Agenda Item 08.E

# **ADMINISTRATIVE/STAFF REPORTS**

**SUBJECT:** November 4-6, 2018 Board Retreat/Meeting

#### **BACKGROUND AND STATUS:**

At our last meeting the Board of Directors directed staff to solicit quotes from various hotels to host our November 4-6, 2018 Board Strategic Retreat/Meeting in Anaheim or Newport Beach area.

We have received 17 responses from various hotels in the Anaheim and Newport Beach area. We just received the response from the Disneyland Resort. We will narrow the list down to 3-4 hotels and negotiate the rates even lower, if possible and then we will finalize the hotel selection.

Thus far we have received several very good competitive quotes from various hotels for rooms and meeting room space. We will continue to update the Board on the progress of securing a location for our November Strategic Retreat/Meeting.

#### **RECOMMENDATION:**

Information only.

#### **REFERENCE MATERIALS ATTACHED:**

## Agenda Item 09.A

#### **BOARD MEMBER REPORTS**

**SUBJECT:** Personnel/Finance Committee Report

#### **BACKGROUND AND STATUS:**

The Personnel/Finance Committee met on March 13, 2018. Those in attendance included Lindsay Woods, Dean Wetter, Colin Miller and Byrne Conley (via telephonic).

The Committee reviewed the Benefits of CAPRI and recommended that CAPRI clean up the language of the health and dental benefits. It is recommended that CAPRI secures the Health and Dental insurance for full-time CAPRI employees and will pay up to \$950 for health insurance and \$50 for dental insurance monthly.

The Committee reviewed the Administrator's succession plan and directed staff to put it on the Board of Directors agenda for approval.

The Committee also discussed the performance of the Administrator and staff.

#### **RECOMMENDATION:**

Information only.

#### **REFERENCE MATERIALS ATTACHED:**

None.