



Managed Medical Review Organization

**Medical Advisor to the Alameda County
Employees' Retirement Association**

June 20, 2024



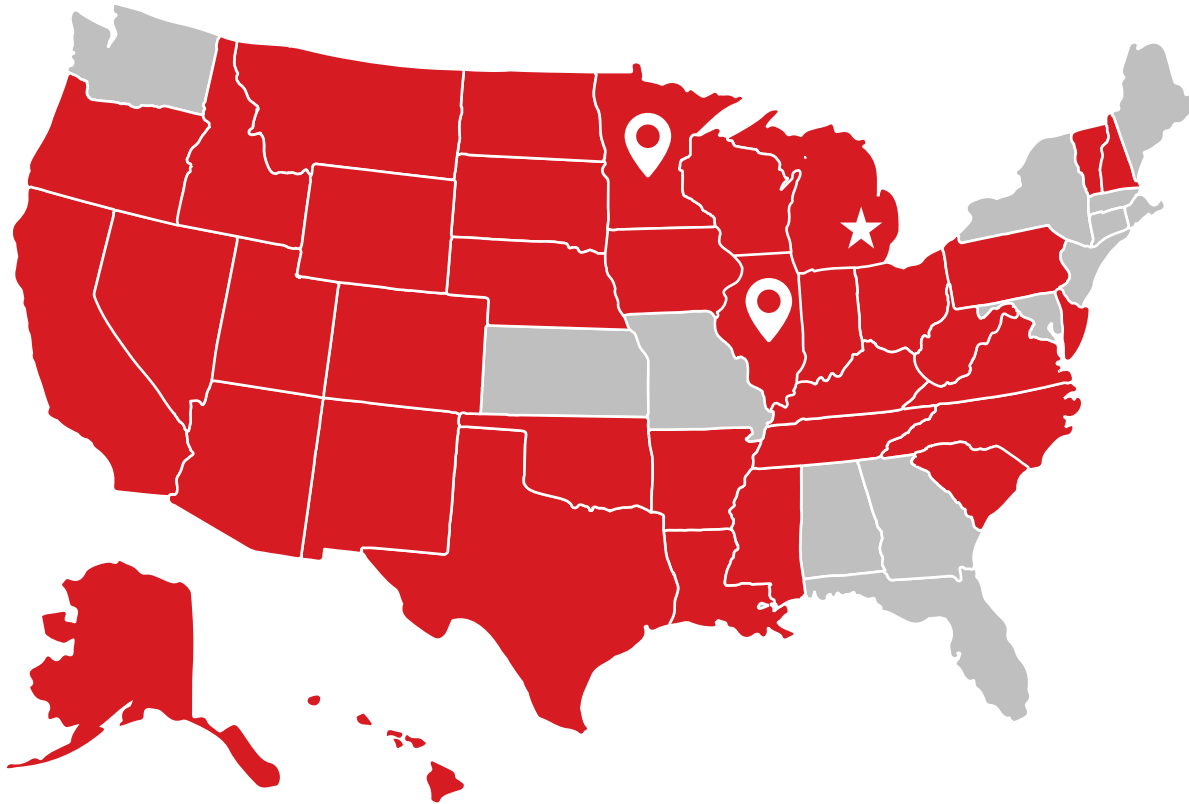
Who We Are & What We Do Best

MMRO is a national leader in providing Case Management and Disability Retirement Review Services to Public Retirement Systems. We partner with more than 75 state, county and municipal retirement systems nationwide.

Our specialties include:

- Modernizing and streamlining disability retirement programs
- Incorporating the most advanced technology and the industry's best practices
- Meeting all applicable statutes, ordinances, and administrative requirements

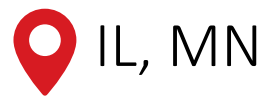
Approximately 10,000 disability reviews performed per year



Corporate Offices



Satellite Offices





URAC ACCREDITATION



MMRO maintains accreditation as an Independent Review Organization.

The company just completed its triennial URAC Accreditation, with certification remaining valid through April 1, 2026.

- Through its URAC accreditation, MMRO adheres to nationally recognized standards to ensure **Quality, Credibility and Independence.**
- MMRO applies URAC Standards to every aspect of the disability retirement program, including:
 - **Credentialing & Qualifications**
 - **Conflict of Interest**
 - **Quality Review and Measure**
 - **Quality Management and Control**



Certification & Testing

MMRO's security systems and controls are reviewed and tested on an ongoing basis.

SOC2 Type II

Annual Audit of MMRO's internal control environment

- SOC 2 Type II report provided by outside audit firm
- Currently finishing our annual SOC2 Audit, with final report expected in July 2024

Security Testing

- Internal Vulnerability Scans
- Web Application (Portal) Scans
- External Penetration Tests
- Internal Penetration Tests



California County Retirement System Clients

MMRO continues to grow its California County client base

MMRO currently serves as Medical Advisor to six (6) California County Retirement Systems, including:

- ***Alameda County Employees' Retirement Association (ACERA)***
- ***Kern County Employees' Retirement Association (KCERA)***
- ***Mendocino County Employees' Retirement Association (MCERA)***
- ***San Mateo County Employees Retirement Association (SAMCERA)***
- ***Contra Costa County Employees' Retirement Association (CCCERA)***
- ***San Luis Obispo County Pension Trust (SLOCPT) (**California Charter County)***

Through more than nine (9) years of experience in the California market, MMRO has developed the institutional knowledge to properly handle the unique clinical questions present in CERL claims:

- ***“Incapacity” Standard***
- ***“Permanency” Standard***
- ***“Service Connected” Disability Analysis***
- ***Safety Member “Presumption” Cases (including newly-enacted presumptions)***



The ACERA-MMRO Partnership

MMRO is proud to have served as ACERA's Medical Advisor since 2017

- Since 2017, MMRO has handled more than **365 disability retirement claims** on behalf of ACERA
 - 47 claims currently amid the clinical review process (9 Reports in Final QA)
- ***A strong working relationship has developed between the MMRO and ACERA Disability Staff, with bi-weekly meetings to discuss claim status,***
- ***Our teams are constantly looking for process improvements that will strengthen the disability retirement claim process***



Disability Program Enhancements

In 2022, MMRO and ACERA jointly developed and implemented an enhanced disability claim review model based on clinical review by physician specialists

- **HIGHLIGHTS:**

- *This Specialist Review model utilizes MMRO's panel of more than 375 board-certified physicians, in virtually all major specialties and sub-specialties.*
- **BENEFIT:** Recommendation Reports are completed by specialists who are board-certified in the condition(s) at issue (e.g., a heart presumption claim is best reviewed by a Cardiologist; a PTSD claim is best reviewed by a Psychiatrist, etc.)
- *A specialized, expert opinion in each Disability Retirement claim makes the claim process more efficient and less burdensome on members.*
- **BENEFIT:** The revised process is leading to a decrease in the overall claim completion timeframes, while in-person Independent Medical Examinations (IME) are reserved for claims where there is a discorrelation within the medical evidence after an initial Medical Board review. In these instances, the member will be seen for an IME, and then the specialist reviewer will review the IME report and issue an Addendum with a final recommendation.



Physician Reviewer/Examiner Network



MMRO maintains nationwide access to qualified and fully credentialed Disability Physician Reviewers/Examiners who ***specialize*** in Disability:

Covers over 65 specialties and sub-specialties:

- American Board of Medical Specialties (ABMS)
- Osteopathic Board Certification (AOA)
- American Board of Professional Psychology (ABPP)
- American Board of Podiatric Medicine (DPM)

Physician Reviewers are trained and well-versed in the unique disability retirement statutes and factors of Disability Retirement Review

Specialties include, but not limited to: ***Cardiology, Family Medicine, Gastroenterology, Internal Medicine, Neurology, Occupational Medicine, Orthopedics, Physical Medicine & Rehabilitation, Psychiatry, Psychology***



Credentialing Standards

- Current non-restricted license or certification
- Board Certification
 - American Board of Medical Specialties (ABMS), American Osteopathic Association (AOA), American Board of Podiatric Surgery (ABPS), American Board of Podiatric Orthopedics and Primary Podiatric Medicine (ABPOPPM), or American Board of Professional Psychology (ABPP)*
- Professional experience to include five (5) years' full-time experience providing direct clinical care to patients
- No history of sanctions or disciplinary actions
- Specialty matched based on Dx



QUALITY ASSURANCE REVIEW

Quality Assurance (QA) Review is a key value add process in the Disability Retirement Review

- **Quality Assurance (QA) Review:**
 - *Physician Reviewer Reports are clinically reviewed by a Quality Nurse Reviewer*
 - *Minimum of five (5) years' experience in Disability Claim Review*
 - *Overseen by the MMRO Associate Medical Director*
 - *Clinically managed by MMRO's Quality Improvement Committee*
- **Key areas of Quality Assurance (QA) Review:**
 - *Compliance (disability standards, program requirements)*
 - *Thoroughness of Report and Responses*
 - *Clarity of Report and Rationale*
 - *Timeliness of Report*
 - *Citing Evidence Based Clinical Criteria*
 - *Clinical Correlation and Sound Medical Reasoning*

This QA Process also includes compliance review with the ACERA team to ensure reports meet CERL Standards



Medical Board Program Results

Review of past 12 months of Medical Board Operations

- 41 Claims have completed clinical handling over the past 12 months, with Recommendation Reports proceeding to the Board for consideration. Four (4) additional claims are awaiting claim completion following referral for IMEs.
- A rigorous, physician specialist-driven clinical review process supporting all claim recommendations with the aim of increased credibility/reliability.
- Overall claim completion timeframes are decreasing, with a material decrease in the incremental times from: (i) receipt of claim through clinical triage and sending the Disability Packet to the parties, and (ii) the end of the commenting period through the completion of the Medical Board Recommendation Report.
 - *Physician training and QA efforts are reducing the time claims are in final Report Completion Stage. Over the past 14 Claims completed, average Report completion is down to 34.8 days (removing one (1) claim that took an inordinate amount of time as the claim file was in excess of 8,000 pages)*



Disability Program Enhancements

Medical Board Program Growth Points

- ***The ACERA/MMRO Partnership continues to strengthen the Disability Retirement Program with the following enhancements:***
 - ***MMRO's Associate Medical Director, Michelle Brezinski, M.D., has taken the lead role in clinical oversight involving the ACERA Claim Reviews, including chairing the Clinical Escalation Committee reviewing all ACERA claims.***
 - *Centralized review of Medical Board Reports to ensure clinical compliance with Report structure*
 - *Available for peer-to-peer discussions with Medical Advisors to discuss clinical complexities of a claim, ensure understanding and application of medical/legal standard, as well as proper analysis as applied to a specific Job Description (and "usual job duties").*
 - *Reconciling/harmonizing IME Report opinions and ultimate Medical Advisor Recommendation Reports.*



Disability Program Enhancements

Program Growth Points

- ***Expansion of Applicable Statutory Presumptions***
 - *Effective January 1, 2024, the California Legislature added several statutory presumptions that will impact CERL claims, including:*
 - Post-Traumatic Stress Disorder (Sec. 31720.91)
 - Lower Back Impairments (Sec. 31720.96)
 - Skin Cancer (Sec. 31720.94)
 - Hernia or Pneumonia (Sec. 31720.97)
 - Additional Presumptions (Tuberculosis, Meningitis, Lyme Disease)
 - *MMRO and ACERA have worked together to develop question templates for the Medical Advisors to guide them through the proper analyses in these claims (in addition to existing templates for the “Heart Trouble” and existing “Cancer” presumptions).*



Any Questions?

THANK YOU!

