

# Quote Request

## WORKERS' COMPENSATION ACTUARIAL SERVICES

**Quotes due January 23, 2015 @ 10:00 a.m.**

**Fax to Debbie Norkevics at (412) 456-5007**

### **Scope of Work**

The Selected Offeror will perform an actuarial analysis of our workers' compensation program. This actuarial valuation will be used as part of the run-off report submitted to the Commonwealth of Pennsylvania. HACP requires that the analysis be completed.

In addition to performing an actuarial analysis, the Selected Offeror will also be required to convert data to comply with Generally Accepted Accounting Principles (GAAP) for our Financial Services Department. The GAAP conversion will be due no later than December 1<sup>st</sup> of the contract year.

HACP had self-insured its workers' compensation program since August 1992 with the program ending as December 31, 2014. We used a third party administrator to administer claims (Inservco). HACP and Inservco will furnish payroll and claims information.

Initial term of contract will be one (1) year with two (2) one (1) year extension options.

***Please contact Debbie Norkevics at (412)456-5000 ext 8505 or at  
Debbie.Norkevics@HACP.org with any questions about the above scope.***

# Quote Request

## WORKERS' COMPENSATION ACTUARIAL SERVICES

1/23/15 @ 10 am

2015 Workers Compensation Analysis: \$ \_\_\_\_\_

2015 GAAP Conversion: \$ \_\_\_\_\_

2016 Workers Compensation Analysis: \$ \_\_\_\_\_

2016 GAAP Conversion: \$ \_\_\_\_\_

2017 Workers Compensation Analysis: \$ \_\_\_\_\_

2017 GAAP Conversion: \$ \_\_\_\_\_

**Total Bid amount for all work: \$** \_\_\_\_\_

(add the three amounts from above together)

**Total Bid amount** \_\_\_\_\_ **dollars**

In words

**Contract award will be based on total bid amount**

**(Please print clearly)**

**Company Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

(of person signing)

**Address:** \_\_\_\_\_

(of company)

**Phone Number:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_