REQUEST FOR PROPOSALS

CITY OF PITTSTON WORKERS COMPENSATION INSURANCE



DEADLINE TO SUBMIT: Monday, November 13, 2023 12:00PM (Noon) To be publicly opened immediately thereafter in the Basement Conference Room, City Hall, 35 Broad Street, Pittston, PA 18640

BID AWARD (intended): CITY COUNCIL MEETING, NOVEMBER 15, 2023 AT 7:00PM)

Joe Chacke, City Administrator
City of Pittston
35 Broad Street
Pittston, PA 18640
jchacke@pittstonrda.com
www.pittstoncity.org

INTRODUCTION

The City of Pittston is a 3rd class, home rule City located in Northeastern Pennsylvania. The City employees more than 75 full-time, part-time and seasonal employees. The City is a full-service municipality that provides police, fire, public works, administrative, code services and elected officials.

The City seeks proposals from persons or organizations qualified to provide workers compensation insurance. The effective date of the workers compensation insurance shall be January 1, 2024.

Sealed proposals are due by 12:00PM (Noon) on Monday, November 13, 2023.

Any questions on this RFP shall be submitted in writing to:

Joe Chacke, City Administrator City of Pittston 35 Broad Street Pittston, PA 18640 jchacke@cityofpittston.org

No other forms of communication will be accepted or responded to.

A complete proposal package may be obtained on the City's website: www.pittstoncity.org or by emailing as indicated above.

GENERAL UNDERWRITING INFORMATION:

- 1. Total payroll is approximately \$3.3 million in 2023. Detailed employee information can be obtained by contacting Director of Operations David Hines at dhines@cityofpittston.org.
- 2. A Loss Run report and PA Experience Rating Modifications are attached in the appendix.
- 3. The City has approximately 75 employees.
- 4. Employees undergo mandatory drug and alcohol testing, prior to starting work. Employees are tested for drugs and alcohol after work related injuries. Full-time street department employees must undergo a physical prior to starting work.
- 5. The City has a Safety Committee that meets on a regular basis.

APPENDIX

LOSS RUN REPORT & PA EXPERIENCE RATING MODIFICATIONS

Report Number: GWCC_POLR0016_01

Report Name : Policy Holder Claims Analysis

Business Date :09/07/2023

Run Date :09/08/2023 Run Time :10:00:48 AM

Policy Number: 06308753 From Year: 2021 To Year: 2024

As of Date :2023-09-08

GWCC_POLR0016_01 - Policy Holder Claims Analysis

Pittston City 35 Broad Street Pittston, Pennsylvania 18640 United States

Report Number : GWCC_POLR0016_01
Report Name : Policy Holder Claims Analysis

Business Date Run Date Run Time Policy Number From Year To Year As of Date : 09/07/2023 : 09/08/2023 : 10:00:48 AM : 06308753 : 2021 : 2024 : 2023-09-08

GWCC_POLR0016_01 - Policy Holder Claims Analysis

Request Listing As of 2023-09-08

	Policyholder Name	Policy Period Effective Date	Policy Period Expiration Date	User Name	Claim Number	Claim Status	Claimant Name	Claim Description	Regional Office	Injury Date	Claimant Class Code	Loss Description	Exposures	Net Incurred	Net Payments	Outstanding Reserve
06308753	Pittston City	01/01/2021	01/01/2022		03163422	Closed	Charles	Medical	TPA	05/07/2021	0980	Claimant	Indemnity	0.00	0.00	0.00
				LossRunPCCall			Everett	Only				was getting horses out	Medical	1,304.88	1,304.88	0.00
												of a shed	Vocational	0.00	0.00	0.00
												when a piece of metal struck him,	Rehabilitation	0.00	0.00	0.00
													Employer's Liability	0.00	0.00	0.00
												resulting in the injury.	Claim Level	0.00	0.00	0.00
												uie irijury.	Expense			
l			Net Inc		Payments	Out	tstanding F									
Indemnity				0.00	0.00	Out	tstanding F	0.00								
Medical				0.00 304.88	0.00 1,304.88	Out	tstanding F	0.00 0.00								
Medical	tehabilitation			0.00	0.00	Out	tstanding F	0.00								
Medical				0.00 304.88	0.00 1,304.88	Out	tstanding F	0.00 0.00								
Medical Vocational R				0.00 304.88 0.00	0.00 1,304.88 0.00	Ou	tstanding F	0.00 0.00 0.00								
Medical Vocational R Employer's L				0.00 304.88 0.00 0.00	0.00 1,304.88 0.00 0.00	Out	tstanding F	0.00 0.00 0.00 0.00								
Medical Vocational R Employer's L Claim Level	_iability			0.00 304.88 0.00 0.00	0.00 1,304.88 0.00 0.00	Out	tstanding F	0.00 0.00 0.00 0.00 0.00								
Medical Vocational R Employer's L Claim Level Expense	Liability			0.00 304.88 0.00 0.00	0.00 1,304.88 0.00 0.00	Out	tstanding F	0.00 0.00 0.00 0.00 0.00								
Medical Vocational R Employer's L Claim Level Expense Total Claims	Liability Claims			0.00 304.88 0.00 0.00 0.00 0.00	0.00 1,304.88 0.00 0.00	Out	tstanding F	0.00 0.00 0.00 0.00 0.00								

Report Number : GWCC_POLR0016_01
Report Name : Policy Holder Claims Analysis

Business Date
Run Date
Run Time
Policy Number
From Year
To Year
As of Date

: 09/07/2023 : 09/08/2023 : 10:00:48 AM : 06308753 : 2021 : 2024 : 2023-09-08

GWCC_POLR0016_01 - Policy Holder Claims Analysis

Request Listing As of 2023-09-08

							Request I	isting As of 2	023-09-08							
Policy Number	Policyholder Name	Policy Period Effective Date	Policy Period Expiration Date	User Name	Claim Number		Claimant Name	Claim Description	Regional Office	Injury Date	Claimant Class Code	Loss Description	Exposures	Net Incurred	Net Payments	Outstanding Reserve
06308753	Pittston City	01/01/2022	01/01/2023	wM- LossRunPCCall	03165054	Closed	Cody Cawley	Loss Time	Eastern	03/12/2022	0985	Claimant was walking into the building when he slipped and fell on ice, struck his head off the ground and had a seizure, resulting in the concussion, pain in is neck, head and jaw	Indemnity Medical Vocational Rehabilitation Employer's Llability Claim Level Expense	5,163.80 62,879.17 0.00 0.00 0.00	0.00	0.00 0.00 0.00 0.00
06308753	Pittston City	01/01/2022	01/01/2023	wM- LossRunPCCall	03165308	Closed	Charles Everett	Medical Only	Western	04/26/2022	0880	Claimant was undoing a turnbuckle on the garbage truck, when he felt a tear in his left shoulder, resulting in the injury.	Indemnity Medical Vocational Rehabilitation Employer's Liability Claim Level Expense	0.00 171.00 0.00 0.00 0.00 0.00	0.00 171.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00
06308753	Pittston City	01/01/2022	01/01/2023	wM- LossRunPCCall	03165428	Open	Isaac Whispell	Loss Time	Western	05/17/2022	0980	Claimant was on the back on a recycling truck, when the truck leaned he became caught the truck between a building and the truck was ripped of causing him to fall off the truck, resulting in the broken.	Indemnity Medical Vocational Rehabilitation Employer's Liability Claim Level Expense	8,990.50 190,599.17 0.01 0.00 0.00 6,279.30		2,500.00 148,578.36 0.01 0.00 0.00 0.03
08308753	Pittston City	01/01/2022	01/01/2023	wM- LossRunPCCall	03165872	Open	THOMAS ABBOTT		Western	07/20/2022	0980	CLAIMANT WAS ON THE BACK OF THE TRUCK PICKING UP GARBAGE, WHEN HE STEPPED ON BEES NEST, RESULTING IN BITES TO BOTH ANKLES AND HE HAD AN ALLERGIC REACTION	Indemnity Medical Vocational Rehabilitation Employer's Liability Claim Level Expense	0.00 2,151.04 0.00 0.00 0.00 0.02	0.00 1,651.04 0.00 0.00 0.00 0.00	0.00 500.00 0.00 0.00 0.00 0.00
Indemnity Medical Vocational Employer's Claim Level Expense Total Claim Total Open Total Close Total Legal	s Claims d Claims		255,	154.30	Payments 11,654.30 106,722.02 0.00 0.00 0.00 6,279.27	Ou		eserve 500.00 078.36 0.01 0.00 0.00 0.00								

Report Number : GWCC_POLR0016_01
Report Name : Policy Holder Claims Analysis

Business Date Run Date Run Time Policy Number From Year To Year As of Date

: 09/07/2023 : 09/08/2023 : 10:00:48 AM : 06308753 : 2021 : 2024 : 2023-09-08

GWCC_POLR0016_01 - Policy Holder Claims Analysis

Request Listing As of 2023-09-08

Policy Number	Policyholder Name	Policy Period Effective Date	Policy Period Expiration Date	User Name	Claim Number		Claimant Name	Claim Description	Regional Office	Injury Date	Claimant Class Code	Loss Description	Exposures	Net Incurred	Net Payments	Outstanding Reserve
06308753	Pittston City	01/01/2023	01/01/2024		111100000181	Open	George	Medical	Eastern	05/30/2023	0951	Claimant	Indemnity	0.00	0.00	0.00
				LossRunPCCall			Spotts	Only				was taking someone	Medical	2,500.00	0.00	2,500.00
												into custody, when they			0.00	0.00
												got in a	Rehabilitation	0.00	0.00	0.00
												physical altercation,	Employer's Liability	0.00	0.00	0.00
												resulting in the abrasion	Claim Level	0.01	0.00	0.01
												to rt arm, rt	Expense			
												knee and rt hip.				
06308753	Pittston City	01/01/2023	23 01/01/2024		111100000178	Open	Zach	Loss Time	Eastern	05/30/2023		Claimant	Indemnity	0.00	0.00	0.00
				LossRunPCCall	all		Valeski					was putting a sign up, when the	Medical	2,500.00	250.00	2,250.00
													Vocational	0.01	0.00	0.01
												sign fell and struck his	Rehabilitation	0.00	0.00	0.00
												struck his head,	Rehabilitation Employer's Liability	0.00	0.00	0.00
												struck his	Employer's			
												struck his head, resulting in	Employer's Liability	0.00	0.00	0.00
												struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
			Net Inc	curred Net	Payments	Ou	tstanding F	leserve				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
ndemnity			Net Inc	curred Net	Payments 0.00	Ou	tstanding F	leserve 0.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
-					•	Ou						struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Medical	Rehabilitation			0.00	0.00	Ou		0.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Medical Vocational I Employer's	Liability			0.00 000.00 0.01 0.00	0.00 250.00 0.00 0.00	Ou		0.00 ,750.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Medical Vocational I Employer's Claim Level	Liability			0.00 000.00 0.01 0.00 0.00	0.00 250.00 0.00 0.00 0.00	Ou		0.00 ,750.00 0.01				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Medical Vocational I Employer's Claim Level Expense	Liability			0.00 000.00 0.01 0.00 0.00 0.04	0.00 250.00 0.00 0.00	Ou		0.00 ,750.00 0.01 0.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Medical Vocational I Employer's Claim Level Expense	Liability I			0.00 000.00 0.01 0.00 0.00 0.04	0.00 250.00 0.00 0.00 0.00	Ou		0.00 ,750.00 0.01 0.00 0.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00
Indemnity Medical Vocational I Employer's Claim Level Expense Total Claim: Total Closei	Liability s Claims			0.00 000.00 0.01 0.00 0.00 0.04	0.00 250.00 0.00 0.00 0.00	Ou		0.00 ,750.00 0.01 0.00 0.00				struck his head, resulting in	Employer's Liability Claim Level	0.00	0.00	0.00

Report Number: GWCC_POLR0016_01

Report Name : Policy Holder Claims Analysis

Business Date :09/07/2023

Run Date :09/08/2023 Run Time :10:00:48 AM

Policy Number :06308753 From Year :2021 To Year :2024 As of Date :2023-09-08

GWCC_POLR0016_01 - Policy Holder Claims Analysis

Grand Total	Net Incurred I	Net Pavments	Outstanding Reserve
Indemnity	14,154.30	11,654.30	2,500.00
Medical	262,105.26	108,276.90	153,828.36
Vocational Rehabilitation	0.02	0.00	0.02
Employer's Liability	0.00	0.00	0.00
Claim Level	0.00	0.00	0.00
Expense	6,279.36	6,279.27	0.09
Total Claims	7		
Total Open Claims	4		
Total Closed Claims	3		
Total Legal Claims	1		

PCRB

PENNSYLVANIA

Compensation Rating Bureau

PA EXPERIENCE RATING MODIFICATION

File Number:

30189

County:

Luzerne County

Data History:

1.470

Mailing Address:

35 Broad Street

Location: Issue Date: 1

Effective Term:

Pittston PA 18640 01/01/2023 - 01/01/2024

Employer Name:

10/03/2022 Pittston City

.

Class Code:

0906

0951

0953

0985

Class Code.	
Data History	Effective Date
1.103	01/01/2024
Class Reviewed	04/01/2023
1.470	01/01/2023
Class Reviewed	04/01/2022
1.680	01/01/2022
1.481	01/01/2021
1.185	01/01/2020
0.978	01/01/2019
1.070	01/01/2018
0.952	01/01/2017
0.987	01/01/2016
1.078	01/01/2015
1.109	01/01/2014
1.312	01/01/2013
1.552	01/01/2012
1.310	01/01/2011
1.048	01/01/2010
0.838	01/01/2009
1.117	01/01/2008
1.143	01/01/2007
0.956	01/01/2006
0.765	01/01/2005
0.775	01/01/2004
0.752	01/01/2003
0.794	01/01/2002
Class Code Rating Value	Description Location

Volunteer Ambulance Corps - Support Staff1

1

1

Salesperson Outside

Office

17.08

0.14

0.07

09852.00Police or Firefighters, Salaried10993369.57Volunteer Ambulance Corps1

Compensation Rating Bureau

PA EXPERIENCE RATING MODIFICATION

File Number:

30189

County:

Luzerne County

Data History:

1.680

Mailing Address:

35 Broad Street

Location:

1

Pittston PA 18640

Issue Date:

Effective Term:

01/01/2022 - 01/01/2023

1

1

1

Employer Name:

0951

0953

0980

10/01/2021 Pittston City

Class Code:

0985

Class Code:	0985	
	Data History	Effective Date
	1.103	01/01/2024
	Class Reviewed	04/01/2023
	1.470	01/01/2023
	Class Reviewed	04/01/2022
	1.680	01/01/2022
	1.481	01/01/2021
	1.185	01/01/2020
	0.978	01/01/2019
	1.070	01/01/2018
	0.952	01/01/2017
	0.987	01/01/2016
	1.078	01/01/2015
	1.109	01/01/2014
	1.312	01/01/2013
	1.552	01/01/2012
	1.310	01/01/2011
	1.048	01/01/2010
	0.838	01/01/2009
	1.117	01/01/2008
	1.143	01/01/2007
	0.956	01/01/2006
	0.765	01/01/2005
	0.775	01/01/2004
	0.752	01/01/2003
	0.794	01/01/2002
Class Cod	le Rating Value	Description Location

Salesperson Outside

City, Township

Office

0.17

80.0

2.98

PCRB

PENNSYLVANIA

Compensation Rating Bureau

PA EXPERIENCE RATING MODIFICATION

File Number:

30189

County:

Luzerne County

Data History:

1.481

Mailing Address:

35 Broad Street

Location:

1

Pittston PA 18640

Issue Date:

10/06/2020

Effective Term:

01/01/2021 - 01/01/2022

Employer Name:

Pittston City

Class Code:

0985

Class Code.	
Data History	Effective Date
1.103	01/01/2024
Class Reviewed	04/01/2023
1.470	01/01/2023
Class Reviewed	04/01/2022
1.680	01/01/2022
1.481	01/01/2021
1.185	01/01/2020
0.978	01/01/2019
1.070	01/01/2018
0.952	01/01/2017
0.987	01/01/2016
1.078	01/01/2015
1.109	01/01/2014
1.312	01/01/2013
1.552	01/01/2012
1.310	01/01/2011
1.048	01/01/2010
0.838	01/01/2009
1.117	01/01/2008
1.143	01/01/2007
0.956	01/01/2006
0.765	01/01/2005
0.775	01/01/2004
0.752	01/01/2003
0.794	01/01/2002
Class Code Rating Value	Description Location

Class Code	Rating Value	Description	Location	
0951	0.17	Salesperson Outside	1	
0953	0.07	Office	1	
0980	3.09	City, Township	1	