

**Exhibit 1 – Workers' Compensation Audit Scoring Summary**

<b>Audit Category</b>	<b>2019 Audit Scores</b> (Score combines performance of both administrators)
Critical Claim Audit Areas Contact with injured worker* Contact with member Diary systems: how often are claims reviewed?* Documentation/explanation of claim administration activities* Planning, direction, and follow-up Medical direction and control* Handling permanent disability issues Settlement of claims and closure efforts* Organization and claim data clarity	100% 100% 100% 95% 100% 95% 100% 100% 93%
Direction of Special Issues and Control of Vendors Litigation direction and management* Rehabilitation/SJDB direction and management Investigation and sub rosa activity* Subrogation identification and management Excess insurance identification and management Excess insurance identification and reporting	100% 100% 100% n/a 100% 100%
Financial Accountability Reserve adequacy and accuracy* Medical payment processing Indemnity payments processed accurately* System information reconciles with daily administration activity* Reconciling or "balancing" the claim data Medicare Set Aside identification/handling	96% 100% 100% 100% 100% 100%

**Aggregate Scoring – Weighted**

The overall score achieved by ICS is 99.1%. This score applies additional significance to categories marked with an asterisk (\*) (weighted averaging). Those marked categories compose 75% of the scoring impact.

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Audit Category	2017 Audit Scores
<b>Critical Claim Audit Areas</b>	
Contact with injured worker*	100%
Contact with member	100%
Diary systems: how often are claims reviewed?*	100%
Documentation/explanation of claim handling*	93%
Planning, direction, and follow-up	100%
Medical direction and control*	100%
Handling permanent disability issues	100%
Settlement of claims and closure efforts*	100%
Organization and claim data clarity	93%
<b>Direction of Special Issues and Control of Vendors</b>	
Litigation direction and management*	100%
Rehabilitation/SJDB direction and management	100%
Investigation and subrosa activity*	100%
Subrogation identification and management	100%
Excess insurance identification and management	95%
Excess insurance identification and reporting	95%
<b>Financial Accountability</b>	
Reserve adequacy and accuracy*	100%
Medical payment processing	100%
Indemnity payments processed accurately*	100%
Administration notes reconcile with system data*	100%
Reconciling or "balancing" the claim data	100%
Medicare Set Aside identification/handling	100%

**Aggregate Scoring – Weighted**

The overall score achieved by ICS is 98.9%. This score applies additional significance to categories marked with an asterisk (\*) (weighted averaging). Those marked categories compose 75% of the scoring impact.

Note: Three of the 30 (10%) claims lack clear documentation/explanation of the outstanding medical reserve. The full 10% reduction in performance was not applied, as multiple other elements of claim activity documentation were compliant.

[REDACTED]

[REDACTED]

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Audit Category	2015 Audit Scores
Critical Claim Audit Areas Contact with injured worker* Contact with member Diary systems: how often are files reviewed?* Documentation/explanation of file activities* Planning, direction, and follow-up Medical direction and control* Handling permanent disability issues Settlement of claims and closure efforts* Organization, appearance, and file maintenance	100% 100% 100% 100% 100% 100% 100% 100%
Direction of Special Issues and Control of Vendors Litigation direction and management* Rehabilitation/SJDB direction and management Investigation and subrosa activity* Subrogation identification and management Excess insurance identification and management Excess insurance identification and reporting	100% 100% 100% 100% 100% 100%
Financial Accountability • Reserve adequacy and accuracy* Medical payment processing Indemnity payments processed accurately* File information equals computer data* Reconciling or "balancing" the claim file Medicare Set Aside identification/handling	100% 100% 100% 100% 100% 100%

**Aggregate Scoring – Weighted**

The overall score achieved by ICS is 100%. This score applies additional significance to categories marked with an asterisk (\*) (weighted averaging). Those marked categories compose 75% of the scoring impact.

**Exhibit 1 – Workers' Compensation Audit Scoring Summary**

Audit Category	2013 Audit Scores
Critical Claim Audit Areas Contact with injured worker* Contact with member Diary systems: how often are files reviewed?* Documentation/explanation of file activities* Planning, direction, and follow-up Medical direction and control* Handling permanent disability issues Settlement of claims and closure efforts* Organization, appearance, and file maintenance	100% 100% 100% 100% 100% 100% 100% 100% 100%
Direction of Special Issues and Control of Vendors Litigation direction and management* Rehabilitation/SJDB direction and management Investigation and subrosa activity* Subrogation identification and management Excess insurance identification and management Excess insurance identification and reporting	100% 100% 100% 100% 86% 86%
Financial Accountability Reserve adequacy and accuracy* Medical payment processing Indemnity payments processed accurately* File information equals computer data* Reconciling or "balancing" the claim file Medicare Set Aside identification/handling	93% 100% 100% 90% 100% 100%

**Aggregate Scoring – Weighted**

The overall score achieved by ICS is 98.8%. This score applies additional significance to categories marked with an asterisk (\*) (weighted averaging). Those marked categories compose 75% of the scoring impact.