

General Questions

Motivation for RFP

FCPS has been operating under United HealthCare for 3 years. Per the contract cycle, it is mandatory that they go to market for the July 1, 2018 plan year. Additionally, this RFP serves the purpose of gaging market interest and assessing market pricing and fees.

Extensions

Extensions will <u>not</u> be granted. Vendor responses will only be considered if received on or before the requested due date and time.

Additional Data Requests

We will <u>not</u> be providing any additional experience data at the request of bidding vendors. All necessary data attachments are linked within the Medical/Vision RFP Excel document. We are unable to acquire any additional data to any greater level of detail at this time.

Standalone Vision Proposals

FCPS is actively seeking vendors who are able to bundle medical and vision coverage. Standalone vision plans will be accepted and considered, but not given preference to. Additionally, all vision proposals whether integrated in the medical or standalone should mirror the current plan descriptions. Points will be deducted for a vendor's inability to mirror the exact design (e.g. vision proposals should include the pediatric benefit since it is currently included in the vision benefits).

Plan Offerings

For purposes of this RFP, FCPS is asking for medical/vision ASO proposals only. Fully-insured proposals (medical and/or vision) will <u>not</u> be considered. Additionally, we will only entertain proposals that include both non-Medicare and Medicare plans under one carrier. Please quote the current plan offering only, there will be no changes to the current offerings in the July 1, 2018 plan year (i.e. no need to quote HSA, HRA options).

Scoring Criteria

Reponses will be scored based on completeness. Vendor responses to each question within the questionnaires will count towards a vendor's overall score in each of the categories (I-V) regardless of how the questions are arranged.

RFP Excel Spreadsheet Password Protection

A revised version of the Medical/Vision RFP Excel file has been posted here: <u>https://apps.fcps.org/fullbids/</u>

Separate Technical and Cost Proposals

Answer all questionnaire questions in the order they appear and complete fee proposals in the appropriate section. No need to provide separate files.



COBRA Administration

All COBRA administration is done in-house. Carriers are <u>not</u> asked to provide COBRA administrative services in their proposals.

Expected New Hires

FCPS had approximately 500 new hires in the past year, including turnover.

Enrollment

Medical and vision benefits are bundled together for enrollment. Employees who enroll in medical automatically have coverage for vision. Employees <u>cannot</u> obtain vision separately.

Communications

FCPS uses PeopleSoft to enroll employees for their medical/vision/prescription drug, life, and dental benefits. FCPS sends these file directly to vendors.

Section 125 Plan

FCPS is a pre-tax section 125 plan. Open enrollment, new hire, or qualifying events are when employees can make changes.

Other Benefit Considerations

At this time FCPS is <u>not</u> considering bids for lines of coverage aside from medical and vision coverage. All proposals submitted under 18MISC6 for benefits other than medical and vision (e.g. hearing benefits, prescription drug benefits, etc.) will not be considered.

Eligibility Requirements

Refer to page 3 of the non-Medicare SPD and page 3 of the Medicare SPD for eligibility requirements.

Summary of Benefits & Coverage (SBCs) / Vision Formulary Documents

Current SBCs can be found on the FCPS website. Please follow the pathways below to download and view the SBCs.

- Medical Plan: <u>http://www.fcps.org/benefits/health-plan</u> see link titled "FY 18 UHC Summary of Benefits & Coverage (SBC)" at bottom of webpage
- Vision Plan: <u>http://www.fcps.org/benefits/vision-plan</u> see link titled "UHC Vision Plan Summary" near bottom of webpage. Also see "Contact Lens Formulary List" link at bottom of webpage for formulary information.

Historical Plan Changes

Historical data for vision benefits can be found in the benefit open enrollment summaries that are provided to FCPS employees.

Financial Questions

Census Data

- Part-time versus full-time employees: employees are broken out based on benefit-eligible and benefit-ineligible regardless of full or part-time status.
- Medicare Retiree Counts: **1,681** (as of December 2017 per census file) versus **1,695** (as of November 2017 per UHC medical membership file)
- Medicare Retirees are in UHC Non-Differential PPO (PP1 plan). Census file indicates Benefit Plans "RET 01-04". 'RET 01-04" in the census are for internal labeling purposes only and do not represent separate plan offerings, all Medicare retirees are on the Non-Differential PPO (PP1 plan).
- POS Med Counts: 5,068 active and/or COBRA employees and 385 non-Medicare retirees (as of December 2017 per census file) amounts to 5,453 total POS Med enrolled versus 5,568 (as of November 2017 per UHC medical membership file).
- Benefit Eligible Employees: **8,503** medical/vision eligible employees/retirees (as of December 2017 per census file)
- Coverage Tier definitions:
 - "Employee + 1 Dependent" rates and contributions are set on a 3-tier rating basis, therefore dependent is either a Spouse or a Child.
 - "Family FCPS Spouse" represents a family tier where both the employee and the spouse are FCPS employees eligible for medical/vision coverage.
 - "Retiree < 25 years of service" and "Retiree =>25 years of service" can be single retirees or retirees + dependents. The years of service indicator does not dictate the coverage tier, however it has an impact on retiree contributions (see Retiree Contributions table below). Refer to the "COVERAGE TIER" field in the census data to determine single versus retiree + dependent.
- Vision Census—same as medical census since the medical and vision benefits are bundled together. No separate field/indicator for vision benefits is available in the census data.

Employee Contributions

FCPS currently bundles medical and vision benefits together, therefore vision contributions are included in an employee's medical contributions. FCPS's current medical contribution structure is as follows:

Emp Category	Coverage Tier	Employee Per Pay	Employer Per Pay
10 Month Rates	Emp Only	\$ 20.89	\$ 394.32
	Emp + 1 Dependent	\$ 157.36	\$ 746.98
	Employee + Family	\$ 208.02	\$ 746.98
	Employee + Family (Both Parents Employed by FCPS)	\$ 42.97	\$ 912.03
Emp Category	Coverage Tier	Employee Per Pay	Employer Per Pay
11 Month Rates	Emp Only	\$ 18.99	\$ 358.47
	Emp + 1 Dependent	\$ 143.06	\$ 679.07
	Employee + Family	\$ 189.11	\$ 679.07
	Employee + Family (Both Parents Employed by FCPS)	\$ 39.06	\$ 829.12
Emp Category	Coverage Tier	Employee Per Pay	Employer Per Pay
12 Month Rates	Emp Only	\$ 17.41	\$ 328.60
	Emp + 1 Dependent	\$ 131.14	\$ 622.48
	Employee + Family	\$ 173.35	\$ 622.48
	Employee + Family (Both Parents Employed by FCPS)	\$ 35.81	\$ 760.03

Retiree Contributions 7/1/2017 – 6/30/2018

RETIREE'S SHARE OF THE COST	Tier 2 10-24 YEARS SERVICE (35%)	Tier 1 25+ YEARS SERVICE (20%)
Employee Health Cost	Cost Per Month	Cost Per Month
Retiree - Medicare Eligible (Options PPO)	\$175.84	\$100.48
Retiree - Non Medicare Eligible (UnitedHealthcare Choice Plus)	\$242.22	\$138.41

Commissions

Brokers are paid net of commissions. All quotes should be submitted net of commissions.

Current ASO Fees in effect 7/1/2017 - 6/30/2018

- Medical: **\$36.65** per employee per month (PEPM); renewal fee is unavailable
- Vision: **\$0.36** per employee per month (PEPM); renewal fee is unavailable

Appendix: "Trion Cost Template Data."

Please ignore this reference on the RFP located on Line 315 of Medical General Questionnaire Tab. No response necessary for this question.

Medical General Questionnaire Tab: Row 274, Question I16

Provide most recent data available.

Vision General Questionnaire Tab: Question H3

Indicate not applicable for Funds Summary reporting capability if not applicable.

GeoAccess Specification on Enrolled Employees

Confirmed: filter Column I and check off Medical and remove the blanks in column J to get the exact enrollees for Medical. Confirmed: do the same for Vision.

ASO Fee Worksheet

- Vendors may add additional line items for capitations or any other applicable costs not currently listed on the worksheet tab. All line items added by vendors will be taken into consideration.
- Member Health Partnership: additional fee for partnering members with partner providers to assist in patient management goals.

Account Structure: Question C2

We request, at a minimum, that the current level of reporting by subgroup be provided for medical and vision benefits as broken out in the experience attachments to the RFP.

Self-Reported Discount Review

Discount review for Medicare retiree population only. All three plan types are required in response (HMO/PPO/POS) for Inpatient Hospital, Outpatient Hospital, Physician, and Other Services.