



Response to Questions

Health and Welfare Benefits Management Services #1004

1. **RE:** Service Provider Requirements question 7, “What is the monetary value of the work: completed in the past 12 months? Now under contract?”

QUESTION: Are you asking, what is the total revenue associated with all project work or brokerage fees/commissions received in the last 12 months throughout the entire organization or strictly the team that would be servicing the City? As well as current expected future revenue from all active contracts (again for the entire organization or strictly the City’s anticipated service team)? If something else entirely, please explain what you are looking for here.

ANSWER: “What is the monetary value of the firm’s work: completed in the past 12 months? Now under contract?”

2. **RE:** Service Provider Requirements question 8, “What is the number of clients: serviced in the past 12 months? Now under contract?”

QUESTION: Are you looking for the total number of clients serviced in the last 12 months throughout the entire organization or strictly the team that would be servicing the City? As well as a count of clients currently under contract throughout the entire organization or simply with the team who would be managing the City’s account? If something else entirely, please explain what you are looking for here.

ANSWER: “What is the number of clients in your firm: serviced in the past 12 months? Now under contract?”

3. **RE:** In regards to the submission process please let me know if you see any differences between my submission outline (below) and what is expected by the City. I want to make sure I am following your submission policy precisely.

QUESTION: _____ will provide two original hard copies of the RFP on 8.5 by 11 paper which is not bound or utilizing things like tabs. 1 hard copy shall be submitted in a sealed envelope and identified with the enclosed label for the Project Manager. Another hard copy shall be submitted in a sealed envelope and identified with the enclosed label for the Procurement team. Lastly a digital (USB) copy of the RFP will be submitted in a sealed envelope for procurement and identified with the solicitation # and project name. All RFP submissions will be delivered in person. Please let me know if I missed anything.

CLARIFICATION:

- 6) Submit **all of the below in one** sealed envelope identified with the enclosed label:
- i. 1 original for Procurement
 - ii. 1 original for Project Manager
 - iii. 1 file copy via USB Flashdrive for Procurement identified with solicitation # and project name.
 - iv. If your proposal includes confidential information as defined by FOIA (5 ILCS 140/7) (From Ch. 116, par. 207) Sec. 7 provide
 1. 1 redacted original identified as REDACTED ORIGINAL
 2. 1 file copy on the same above USB Flashdrive, identifying file as REDACTED ORIGINAL

CLARIFICATION: Sealed Submittals may be delivered via mail, messenger, in person or any other means. They must be received any time prior to the due date and time.

4. **RE:** Your current vision plan



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QUESTION: Can you please send me the following?

- 1.) Current plan benefit summary.
- 2.) Current/renewal rates.
- 3.) Is this plan voluntary or does the group pay for a portion of the vision premium?
- 4.) Census with zip codes for employees (not necessary, but if you have it please send it along).

ANSWER: Your questions are not applicable to this solicitation. The city is soliciting proposals from insurance consultants to provide consulting services. The successful consultant will review current plans and make recommendations.

5. **QUESTION:** Why are the services out to bid at this time?

ANSWER: The current service provider's contract will expire and the City Council requested we go out to bid.

6. **QUESTION:** Please provide a breakdown of the premium and contribution rates by line of coverage.

ANSWER: The city does not view sharing this amount of detailed information as necessary for responding to this RFP. If your firm believes this breakdown is prudent, please prepare your proposal based on stated assumptions based on other cities of similar size and scope. Include an explanation (formula or narrative) explaining how proposed numbers would change once this detailed breakdown is provided. The successful consultant will be able to review current plans and make recommendations.

7. **QUESTION:** Are the dental plan and the vision plan fully insured or self-insured?

ANSWER: The dental plan is self-insured. The vision plan is fully insured.

8. **QUESTION:** Does the City have any retirees covered under its medical plans?

ANSWER: Yes, retirees are on our medical, dental and vision plans.

9. **QUESTION:** Please describe the City's current wellness program(s)/initiatives, including whether the City administers the program(s) internally or uses an external vendor.

ANSWER: We offer a full spectrum of wellness programs that incorporate the employee's physical, nutritional, financial, and emotional well-being. We administer these programs internally.

10. **QUESTION:** Does the City have an established set of other organizations against which it benchmarks the health plan? When was the last time a benchmark analysis was conducted?

ANSWER: We look at national as well as local benchmark data. We are currently surveying comparable communities to gather this information to use as a benchmark.

11. **RE: Question 7 of Service Provider Requirements**

QUESTION: What is meant by value of the work completed in the past 12 months? Is this specifically for the work we --- have done for CSC in the last 12 months? And then for "now under contract", are you looking for the current 1 year contract value with --- from 5/1/18 – 4/30/19?

ANSWER: "What is the monetary value of the firm's work: completed in the past 12 months? Now under contract?"



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12. **RE: Question 8 of Service Provider Requirements**

QUESTION: For the number of clients serviced in the last 12 months, is this across all of---? Or just in the Midwest? We have clients in every state.

ANSWER: see response for #11

13. **RE: Question 12 of Service Provider Requirements**

QUESTION: ---has business that is fee based, commission based, as well as other types of compensation arrangements. As the current vendor, may we answer specifically to the current arrangement with the City?

ANSWER: No

14. **RE: the Response Price Proposal Page**

QUESTION: Is the question regarding the projected number of hours to service account required? We currently do not track hours and will not bill for hours that may go above any type of estimate as long as services provided are in scope.

ANSWER: Yes