The following is additional information regarding Request for Proposal #SDHR-4600, titled Advocacy and Health and Well-Being Portal released on October 25, 2018. **The due date and time for** **responses remains as November 21, 2018 at 2:00 PM** (Pacific). This addendum includes both questions from prospective proposers and the City’s answers, and revisions to the RFP. This addendum is hereby made part of the RFP and therefore, the information contained herein shall be taken into consideration when preparing and submitting a proposal.

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| Item # | Date Received | Date Answered | Vendor’s Question | City’s Answer | RFP Revisions |
| 1 | 10/31/2018 | 11/6/2018 | For Employees in Most Benefits, can you please provide the corresponding total member (i.e. employee + dependent) counts for each segment listed (e.g. Total, Aetna, Kaiser)? | The following are estimates:  Total Members: 23,000  Aetna Members: 17,400  Kaiser Permanente (KP) members: 5,300  Waived Employees: 200 | N/A |
| 2 | 10/31/2018 | 11/6/2018 | Can you please indicate the average age and male/female ratio of members covered under Most Benefits, broken out by Aetna and Kaiser? | The following are estimates:  Total Members: 49% male, 36.3  Total Employee Avg Age: 47.9  Aetna Members: 49% male, 35.7  Aetna Employee Avg Age: 47.7  Kaiser Permanente (KP) members: 50% male, 37.7  KP Employee Avg Age: 48.9  Waived: 49% male, 44.3 | N/A |
| 3 | 10/31/2018 | 11/6/2018 | To support our pricing and development of a formal business case for the City, can you populate the following for the MOST population currently self-insured with Aetna? | We have filled out this spreadsheet for the data that we have available at this time. We do have telemedicine for our Aetna population, but it is newly implemented, and we have not received mid-year numbers yet. We have a COE for Bariatric Surgery that is used by a small number of our population. We have disease management through Aetna, but do not have the specific numbers you asked for. | N/A |
| 4 | 10/31/2018 | 11/6/2018 | Please confirm the current Aetna network name available via the PPO plan. | The City offers the Aetna Open Choice network for both Aetna PPO plans. The Aexcel network is encouraged for selected services through plan design. | N/A |
| 5 | 10/31/2018 | 11/6/2018 | Please confirm whether pharmacy benefits are currently carved-in with Aetna or via a separate PBM. If carved-out, please indicate the name of the PBM. | Aetna pharmacy benefits are carved-in with Aetna | N/A |
| 6 | 10/31/2018 | 11/6/2018 | Please indicate if the City currently offers any clinical/disease management programs to MOST members enrolled in the Aetna PPO and Kaiser HMO plans? If yes, please indicate the name of the program and/or conditions being managed. | Aetna’s In Touch Care Program  Disease management has always been built into the way Kaiser/Group Health delivers care. They provide care management programs for various chronic condition including diabetes, coronary artery disease, depression, HIV/Aids, and heart failure, among others. | N/A |
| 7 | 10/31/2018 | 11/6/2018 | Does the City currently offer case management to MOST members enrolled in the Aetna PPO and Kaiser HMO plans? | Aetna’s In Touch Care Program  Disease management has always been built into the way Kaiser/Group Health delivers care. They provide care management programs for various chronic condition including diabetes, coronary artery disease, depression, HIV/Aids, and heart failure, among others. | N/A |
| 8 | 10/31/2018 | 11/6/2018 | Please clarify if the City utilizes an outside benefits administrator to manage and process eligibility/elections, or if the City processes enrollment internally. | The City manages eligibility/election process internally. An outside vendor verifies dependent eligibility. | N/A |
| 9 | 10/31/2018 | 11/6/2018 | Excel row 4 of the pricing table indicates “Kaiser Permanente HMO Population (Not Evaluated)”. Please clarify if you would like us to quote on advocacy support services for this population. | Yes. The City would like a vendor that can serve as an advocate for its entire “Most” population. Consequently, we ask that all vendors provide a quote on the cost to serve the Kaiser Permanente (KP) HMO population. The City will evaluate these quotes if all bidders who reach round four of the evaluation process provide a quote. However, because serving KP is not a minimum qualification, a bidder may choose not to provide a quote. | N/A |
| 10 | 11/1/2018 | 11/15/2018 | Would our firm be disqualified from consideration if we do not provide the requested audited financial statements? | Your company would not be disqualified. The City will not be evaluating financial statements. The City reserves the right to request them at a later time. | The City is no longer requiring audited financial statements as part of your submittal. Your proposal will not be rejected for failing to submit these documents.  RFP is changed as follows:  Table 3 – Submittal checklist: strike audited financial statements as mandatory from the list.  In the Advocacy CoS Technical and Functional Document, Management Response Tab: Delete row 14 (question 1.9)  In the Portal CoS Technical and Functional Document, Management Response Tab: Delete row 15 (question 1.9) |
| 11 | 11/2/2018 | 11/6/2018 | What is the measurement criteria for a successful bidder in the Advocacy RFP? | Please see Section 11. Evaluation Process (page 21) of the RFP document. | N/A |
| 12 | 11/2/2018 | 11/6/2018 | What is the measurement criteria for a successful bidder in the Health and Wellbeing Portal RFP? | Please see Section 11. Evaluation Process (page 21) of the RFP document. | N/A |
| 13 | 11/2/2018 | 11/6/2018 | What challenges are the City of Seattle Benefits Team faced with that is prompting the RFP process? | Please see information provided in the RFP document. | N/A |
| 14 | 11/2/2018 | 11/6/2018 | Please describe the ideal member experience. | Please see information provided in the RFP document. | N/A |
| 15 | 11/2/2018 | 11/6/2018 | What are the current challenges of the City of Seattle benefits team? | Please see information provided in the RFP document. | N/A |
| 16 | 11/2/2018 | 11/6/2018 | What conditions are most prevalent within the City of Seattle population? | This detail can be provided and discussed once partner vendors have been chosen. | N/A |
| 17 | 11/2/2018 | 11/6/2018 | What have been the cost drivers impacting the City of Seattle over the last three years? | This detail can be provided and discussed once partner vendors have been chosen. | N/A |
| 18 | 11/2/2018 | 11/6/2018 | Please provide 2 years of medical and claims data, broken out by month. | Please see the details provided in previous vendor questions. | N/A |
| 19 | 11/2/2018 | 11/6/2018 | If the bidder is bidding on both the Advocacy and Health and Wellbeing portal RFPs, should a single RFP be submitted? Or separate RFPs for each service? | A bidder should submit both an individual proposal and combined (or partnered) proposal. We would expect each vendor that will partner to respond to a combined advocate and wellbeing portal to also submit an individual proposal. | N/A |
| 20 | 11/5/2018 | 11/6/2018  Updated on 11/7/2018 | Can you provide us with more information on the size of the eligible groups within the “Most” population that do not appear on eligibility files? How does their medical plan enrollment currently get sent to the medical carrier? Why are they on paper and not in City of Seattle’s system? Is the City requesting the same type of service support for this population? | The City enrolls and tracks these employees manually because our system is not set up to allow them to enroll online.  There are about 112 COBRA participants and 586 retirees on the under age 65 plans.  They are not included on eligibility files sent to the carriers Yes, we are requesting the same level of support. | N/A |
| 21 | 11/7/2018 | 11/15/2018 | Can you take a look at the security document? Column F is locked for editing. | Please see the new document with Column F unlocked. |  |
| 22 | 11/7/2018 | 11/15/2018 | As far as providing a redacted copy on USB can we only submit one electronic version? | One electronic copy of the redacted version of the proposal is acceptable. You are not required to submit a physical copy. | N/A |
| 23 | 11/7/2018 | 11/15/2018 | Can you share what the City’s current health and wellbeing benefits are? | The City’s benefits are publicly available on our seattle.gov website:   * <http://www.seattle.gov/personnel/benefits/home.asp> * <http://www.seattle.gov/personnel/benefits/pubs/2018_Benefits_At_A_Glance.pdf> * <http://www.seattle.gov/personnel/benefits/pubs/2018_Employee_Benefits_Guide_MOST_FINAL.pdf> | N/A |
| 24 | 11/7/2018 | 11/15/2018 | There was a request for a particular paper to be used, will that be scored? | No. | N/A |
| 25 | 11/7/2018 | 11/19/2018 | Based on the employee and total member counts that the City has provided, the current calculated member/employee ratios for the Aetna and Kaiser populations are 2.53 and 2.70, respectively.  Can you please confirm that this ratio has been fairly consistent over the past couple of years, and that you do not anticipate any substantial changes to the ratio in the near future? | The 2017 contract size for the Aetna (Most only) and Kaiser (includes SPOG and Local 77) populations are 2.3 and 2.2, respectively. We cannot guarantee that there will be no changes in the future. However, contract size has been very consistent over at least the last five years (+/- 0.1) since we have not made any significant plan changes. It should be noted that adding kids to our plans adds no additional employee premium, so we tend to have many children in our group. | N/A |
| 26 | 11/8/18 | 11/19/2018 | In Section 2. Background, the City notes that they cover approximately 590 under-65 retirees, approximately 140 subscribers under COBRA, and a small number of temporary employees in the active health plans, as well as 1,720 Medicare-eligible retirees in insured Medicare Advantage plans. In addition to the active employee groups, approximately 450 Seattle Housing Authority (SHA) employees are covered under the City’s plans through an inter-local agreement.  Please confirm that under-65 retirees, COBRA, temp employees in active plans, and the 450 SHA ee’s are included in the approximate enrollment counts provided in the table included in that section, and that these populations are considered in-scope for this evaluation.  Please confirm that Medicare-eligible retirees are not considered in-scope for this evaluation. | None of these groups are included in the table; the table represents City Active employees, including Temps (about 328 of the total). The table should not say “including SHA.”   * All 450 SHA employees are in the Most benefits program * the U-65 retirees and COBRA enrollees number also includes SPOG and Local 77 enrollees. Please assume that COBRA and U-65 enrollees in Most are proportional to the general Active population.   All groups listed in the second paragraph are in-scope, unless it turns out that it is administratively too difficult to include them.  Medicare-eligible retirees are not in-scope. | N/A |
| 27 | 11/8/2018 | 11/19/2018 | In response to question #9 in the Addendum, the City indicated that all vendors provide a quote on the cost to serve the Kaiser Permanente (KP) HMO population.  Does the City anticipate and/or received confirmation from KP that they would share a medical/pharmacy analytical claims file with an outside vendor? | The City is self-insured with Kaiser and they send claims information to Truven, our data warehousing vendor. We have had preliminary discussions with them regarding Advocacy and don’t see any specific difficulty in sending information to the Advocate, we do not yet have confirmation about sending a med/Rx claim file. | N/A |
| 28 | 11/9/2018 | 11/19/2018 | Would the City be able to accept the audited financials under NDA and not disclose them as part of the public facing transparent bid process?  Alternatively, would the City be willing to accept audited financials only once we had been named as a finalist?  Finally, we can also set up a call with our CFO to walk you through the financials and allay any concerns. | We are ok with not receiving audited financials at this time. | Please see RFP revision for question #10. |
| 29 | 11/9/2018 | 11/16/2018 | As the City already has a contract with us do we need to read and accept the contract within the RFP or if awarded the business, could we simply amend our existing contract. | Yes you need to read and accept the contract provided within the RFP. We are not able to amend the existing contract. | N/A |
| 30 | 11/12/2018 | 11/19/2018 | Can you please clarify the services you’re defining under pre-certification vs utilization management?  We typically see these terms used interchangeably to define the process of reviewing for medical necessity of Inpatient Admissions and certain Outpatient care. Under the Utilization Management umbrella, we would typically include:  • Medical Necessity review and application of criteria  • Concurrent Review  • Discharge Planning  • Physician Review  • Appeals Support (1st and 2nd level; depending on plan language) | Both pre-certification and utilization management ensures that certain procedures and appropriate.  For our purposes, we are distinguishing them as follows:  Pre-certification:   * Inpatient services * Outpatient services   Utilization management:   * Medical Necessity review and application of criteria * Concurrent Review * Discharge Planning * Physician Review * Appeals Support (1st and 2nd level; depending on plan language | N/A |
| 31 | 11/12/2018 | 11/19/2018 | In order to provide a PEPM for utilization management and pre-determination services, is the CoS willing to provide:    • Admissions/1000  • Outpatient volume (any data here would be helpful)  • Existing plan document and/or precertification requirements | Most Admits/1000 Aetna:  Jun/2017-May/2018 = 55.59  Jun/2016-May/2017 = 53.46  Most Admits/1000 Kaiser Permanente:  Jun/2017-May/2018 = 56.21  Jun/2016-May/2017 = 45.81  Most Outpatient Events Aetna:  Jun/2017-May/2018 = 3,796  Jun/2016-May/2017 = 3,666  Most Outpatient Events Kaiser Permanente:  Jun/2017-May/2018 = 914  Jun/2016-May/2017 = 941 | N/A |
| 32 | 11/12/2018 | 11/19/2018 | Re: the security document provided with the above-mentioned solicitation:   * ***S-31: Solution allows the selection of which fields are included in the audit.***   Can you please provide additional clarification? How is this specifically used in the portal? | S-31 refers to how the system works on the back end for the System and Security admins.  It is expanding on S-30 and asking whether the daily audit reporting is customizable. | N/A |
| 33 | 11/12/2018 | 11/19/2018 | Re: the security document provided with the above-mentioned solicitation:   * ***S-33:The application administrator may select application modules and data fields for which changes are to be logged.***   Can you please provide additional clarification? How is this specifically used in the portal? | S-33 also refers to how the system works on the back end for the System and Security admins.  It is asking whether the admins can control what changes are logged. | N/A |
| 34 | 11/15/2018 | 11/16/2018 | Our general method of shipping documents is via UPS; however, UPS does NOT allow us to ship to a PO Box. Can we ship the proposal contents to the physical address listed in the RFP or is the physical address ONLY for hand delivery/courier? | You can ship to the physical address listed in the RFP. It was put there for courier deliveries such as those from UPS. | N/A |