



## GENESEE COUNTY PURCHASING DEPARTMENT

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April 20, 2009

### **ADDENDUM #1**

#### **REQUEST FOR PROPOSALS (RFP) #09-011 HEALTHCARE BENEFITS CONSULTING SERVICES**

1. In RFP #09-011, Section 8.2.K., page 15, 1<sup>st</sup> paragraph, should read as follows:

“cost (rate) per unit of service and not to exceed total price for each of the requested services/projects as outlined under Immediate and Long-term Projects (see Section 7. Scope of Services), and (2) as an all encompassing not to exceed per-contract-per-month fee for all services/projects associated with this solicitation.”

2. In RFP #09-011, Section 8.2.K.6., page 16, should read as follows:

“Not to Exceed Fee (Agent of Record Quote) for performing all services/projects as identified in Section 7 – Scope of Services. The provision of all services/projects shall be an Agent of Record Quote based on the number of contracts under medical/hospital insurance (currently, 880 contracts for actives and 800 for retirees). The fee under the Agent of Record methodology should be reported as a not to exceed per-contract-per-month fee for all services/projects listed in Section 7.”

3. In RFP #09-011, Attachment B – Proposer Information Form, page 31, item I., should read as follows:

Provide business name, contact and telephone numbers of three (3) customers that have purchased services in the past year.

4. Please see the attached questions and answers submitted in response to the above mentioned RFP.

**Indicate on the exterior of the envelope containing your proposal:**

**“ADDENDUM #1 RECEIVED”**

**ALL PROPOSALS MUST BE RECEIVED AT:  
GENESEE COUNTY PURCHASING DEPARTMENT  
1101 BEACH STREET, ROOM 200  
FLINT, MI 48502**

*Eric F. Hopson*

Eric F. Hopson, Purchasing Director

G:/bid2/2009/09-011add1

**RFP #09-011**  
**HEALTHCARE BENEFITS CONSULTING SERVICES**

**QUESTIONS & ANSWERS**

- Q1. In the RFP in various sections, the County requests financial statements and/or audits to demonstrate the firm’s “financial stability”. As a corporate practice, we do not provide financial statements to any outside party(s). Would the County consider our proposal as “unresponsive” or would the County deduct evaluation points if we did not submit our company’s propriety financial information with our response?**
- A1.** Since we have to be able to gage whether a company is financially stable, as is requested under the minimum qualifications, an omission would be considered “non-responsive.” In addition, the County would have no way of confirming that a firm would meet the minimum qualifications for contract award.
- Q2. I am wondering if you are considering proposals from vendors who do not have a “Premier Agent” status with BCBS of Michigan or are not on the BCBSM Agent Advisory Committee and/or are outside of Michigan.**
- A2.** Concerning the question of “Premier Agent Status/BCBS Agent Advisory Committee,” this was not a minimum requirement. Therefore, firms should submit proposals that do not have “Premier Agent” status with BCBS of Michigan or are not on the BCBSM Agent Advisory Committee. As for the location of the agency (being outside of Michigan), this may make it difficult for the agent to be available in person on short notice. Also, this could interfere with the “Capability and capacity of the proposer to perform the desired services”. (20 points) However, it is not required that a prospective proposer be located in Michigan.
- Q3. Can you please confirm the number of eligible employees and enrolled employees in the County’s medical plans?**
- A3.** We have 1,124 eligible employees and 880 are enrolled in the medical plans.
- Q4. Can you please provide the County’s current enrollment count by Employee Only and Employee + Dependent(s)?**
- A4.** The county for Employees Only is 236. Employee + Dependent(s) is 544 for our medical plans.
- Q5. How many vendor marketings (RFPs) are expected over the three (3) years, and for what coverages?**
- A5.** We anticipate that a maximum of seven RFP’s could be issued over the three year period. The coverages would likely be Life, Disability, Dental, Vision, Medical and Prescription as required by PA106 for the County. In addition, hospital care services for inmates of the Genesee County Jail could be competitively bid.

- Q6. Will vendor marketings be dispersed across the three years of the contract (versus concentrated in first year).**
- A6.** Disability and Life will not be marketed until 2010. The others should be done prior to 2010.
- Q7. How many renewals are expected to take place? (or what is the anniversary date for each line of coverage).**
- A7.** Medical and hospital renews June 1<sup>st</sup>. Dental and vision renews May 1<sup>st</sup>. Life and disability has a January 1<sup>st</sup> anniversary date. Pharmacy is self-insured. Coverage for inmates of the Genesee County Jail renews March 1<sup>st</sup>.
- Q8. Are all union contracts expiring between Sept. 30, 2009 and June 30, 2012?**
- A8.** Yes.
- Q9. Do any unions bargain together? If so, how many total negotiations are expected to take place?**
- A9.** There will be 11 separate negotiations.
- Q10. How many Medical/Rx plan designs are available to County non-bargained employees?**
- A10.** Non-union employees have the same benefits as union employees (BCBS -Trad. and PPO; and HealthPlus / Express Scripts PBM)
- Q11. How many Medical/Rx plan designs are available to County bargained employees?**
- A11.** The same number as non-union employees.
- Q12. Please expand on Immediate Term Project #2. What specific projects and deliverables is the County referring to in this question?**
- A12.** We need to review all of our plans to see if there are administrative changes we can make that would achieve cost savings but would not interfere with current CBAs (some examples: self insurer, dependent audit, etc.)
- Q13. Is Long term Project # 7 the same thing as Immediate Term Project #2, just in years two and three? If not, please expand on Long term Project #7.**
- A13.** Short-term project #2: assist with immediate cost savings by reviewing current health and welfare plans and possibly make administrative changes without interfering with current CBAs. Long-term project #7- As we negotiate new contracts we need assistance with appropriate plan changes and implementation of those changes to achieve substantial cost savings.
- Q14. Are “employee communications” outlined in the RFP just Open Enrollment materials, or is it an on-going campaign (monthly, quarterly)?**
- A14.** Employee communications are sent out several times a year depending on the situation. Open Enrollment materials are sent out at the end of March for an April

Open Enrollment. In November we send out dependent verification letters. Other insurance related information may be sent out through company newsletters.

**Q15. In attachment B, Question I., is the question asking for 5 or 3 customer contacts.**

**A15.** Please provide the requested information for three customers that have purchased services in the past year.

**Q16. Regarding Not to Exceed Rates, can RFP work be priced separately as a list of menu items based on the type of RFP?**

**A16.** There should be two separate pricings. First, an all encompassing plan, which would include all services; the cost should be reported as a not to exceed monthly fee per medical contract (Currently, a total of 880 contracts for actives and 800 for retirees). Second, each individual project should be priced separately as a not to exceed price for each project.

**Q17. Does the County currently use a consultant/broker? If so, what is the name of the current consultant/broker?**

**A17.** No, the County does not have a consultant/broker.