## CITY OF NEWTON, MASSACHUSETTS PURCHASING DEPARTMENT

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February 24, 2023

## ADDENDUM #2 REQUEST FOR QUALIFICATIONS #23-69

## HEALTH INSURANCE ADMINISTRATION AND RELATED SERVICES

## THIS ADDENDUM IS TO: ANSWER THE FOLLOWING QUESTIONS:

- Q1. Is the surety bond required of the main contract holder, the TPA handling claims, or every subcontractor involved. We anticipate involving collaborations with several functions including but not limited to: enrollment support, benefit administration, claims TPA, health assessment, dependent audit and decision support.
- A1. Section II(f) of the City Contractor Agreement states, "surety bonds, <u>if any</u>." No bonds are required for this contract.
- Q2. May we make the case for using a benefit administration system other than MUNIS if we can prove we can exchange payroll information with MUNIS, the vendor we assume you are using for payroll. We have successfully exchanged data with MUNIS previously. In any event, if you are using MUNIS for payroll and or other legacy systems (ACA, COBRA, FSA, payroll), we need technical information and contact information to assure we can get data to every required party (Harvard, Tufts, BCBS, etc.)
  - A2. Benefits administration is not in the scope of services for this RFQ. This is a future initiative for the City.
- Q3. May we substitute Microsoft Team or Zoom meetings in lieu of face to face meetings? It is far less expensive and more flexible (cancellations due to Covid, weather, etc.)
- A3. The City is willing to negotiate how and when in-person and virtual meetings are acceptable for both plan sponsor and employee meetings with the City.
- Q4. Are you considering related services such as ACA reporting, COBRA notifications, FSA and HSA integrated into the online enrollment?
  - A4. Yes.
- Q5. Are other products such as non-contributory life, supplemental life, disability, etc. to be incorporated into the online enrollment experience? If so, is there information (plan design, rate schedules, applications, underwriting limits (guarantee issue, simplified issue or full underwriting) available per product.
  - **A5.** No.
- Q6. Will the City guarantee uncontested invoices will be paid in full within 30 days instead of stating "best efforts". If Best Efforts is necessary, then can the City guarantee full payment will be completed within 45 days.
  - A6. The City is willing to negotiate payment timing of invoices with the bidder of choice.
- Q7. Is the City of Newton able to provide a report breaking out Inpatient and Outpatient Medical spend by facility by carrier?

- A7. These reports have been provided through each bidder's secure site provided by the City's consultant. Please email <a href="mailto:jacqueline.scherer@lockton.com">jacqueline.scherer@lockton.com</a> and <a href="matt.mccarthy@lockton.com">matt.mccarthy@lockton.com</a> if you are unable to access the information in the secure site.
- Q8. Can the City provide us with a copy of Attachment B and associated forms, as referenced in the RFP regarding Required Certifications?
  - A8. Attachment B was issued in Addendum #1.
- Q9. If a Carrier is submitting both the Medical and Pharmacy SOQs, can you confirm that one set of Attachment B Certification Forms, completed by the Carrier is sufficient?
  - A9. The Attachment B Certification Forms need to be provided with the Medical SOQ only.
- Q10. If a Carrier is submitting both the Medical and Pharmacy SOQs, can you confirm that one set of credits, completed by the Carrier is sufficient?
- A10. Credits should be submitted with both Medical Cost Proposal Form (Exhibit 2) and Pharmacy Ouestionnaire. If there is overlap, please note that in your responses.
- Q11. Can the City confirm the effective date for the Retiree Plans?
- A11. A5. Tufts Medicare Complement plan has an effective date of July 1<sup>st</sup> with the plan year running July 1<sup>st</sup> through June 30<sup>th</sup>. The Tufts Medicare Preferred and BCBS HMO Medicare Blue plans have a January 1<sup>st</sup> effective with the plan year running January 1<sup>st</sup> through December 31<sup>st</sup>.
- Q12. Could the City specify which codes or range of codes (CPT/HCPCS), modifiers, and/or sites of care (places of service) are to be considered as "office consults"?
  - A12. These are being compiled and will be shared through the secure site.
- Q13. Regarding question 6.2 in Exhibit 1 Is the comparison to be restricted to professional claims only, or it is to include institutional claims as well?
  - A13. The comparison should include both professional and institutional claims.
- Q14. Please confirm that Exhibit 2, Medical Cost Proposal Form, is the document referred to as Appendix B in the RFQ.
  - A14. References to Appendix B were in error and should be Exhibit 2, Medical Cost Proposal Form.
- Q15. Question 4.2 references Appendix A: "Confirm that you have provided plan cost increments and decrements in Appendix A, for plan design changes to match the GIC benchmark plan." Can you provide a copy of Appendix A as it was not included previously.
- A15. References to Appendix B were in error and should be Exhibit 2, Medical Cost Proposal Form. Bidders should provide the decrement to the current plan as compared to the GIC benchmark plan.

Q16. The instructions tab refers to Appendix D in which the "total proposed cost" is to be entered. Please provide Appendix D.

A16. The reference to Appendix D was in error. All costs should be entered in Exhibit 2, Medical Cost Proposal Form.

All other terms and conditions of this bid remain unchanged.

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PLEASE ENSURE THAT YOU ACKNOWLEDGE ALL ADDENDA ON YOUR BID FORM OR SEPARATE EMAIL. FAILURE TO ACKNOWLEDGE ALL ADDENDA COULD RESULT IN REJECTION OF YOUR BID AS NONRESPONSIVE.

Thank you.

Nicholas Read

Chief Procurement Officer