Request for Proposals
RFP-20-021-VF
Selected Third Party Administration of Employee Benefits

ADDENDUM NO. 3
Questions and Answers

QUESTIONS AND ANSWERS:

Q1: Whether companies from Outside USA can apply for this? (like, from India or Canada)

A1: No.

Q2: Whether we need to come over there for meetings?

A2: For the pre-proposal meetings proposers do not have to be physically present and can attend via Zoom. Details of the meeting can be found within the solicitation and/or addendum.

During the course of a contract, meetings with the M-DCPS Risk/ Benefits team are usually a mix of in-person and conference calls, depending on the topics and timing. Note this typical approach has been impacted by COVID and meetings are now largely occurring remotely and expect to continue so until the current situation returns to a more normal operational status.

Q3: Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)

A3: No.

Q4: Can we submit the proposals via email?

A4: Refer to Section 6 – Submission Requirements of the solicitation for complete submission details. E-mailed responses are not allowed and will not be considered for award.

Q5: I'm unable to download the excel files - site temporarily down?

A5: Please contact the purchasing agent at M-DCPS Procurement department for further information.

Q6: Is there a consultant working with you on this?

A6: Yes, our health & benefits consultant Aon is assisting us with the review and analysis of all submitted proposals. Their team is comprised of Florida-based generalist consultants, supported by their national resources who specialize in benefit administration solutions and voluntary benefits.

Q7: Can you please confirm if there is a broker consulting with you on your RFP and if so, who that is and where they are located?

A7: See response to Q6.

Q8: I am also unable to open the Voluntary Benefit Biweekly Payroll File and the Voluntary Benefit Weekly Changes spreadsheets. Can you please resend these?

A8: See response to Q5.

Q9a: Could you tell me who is currently administering your COBRA?

A9a: COBRA is currently administered in house by M-DCPS personnel.

Q9b: In addition could you share your current pricing for FSA and COBRA?

A9b: FSA administration fees are currently $3.75 per participant per month. Per response to Q9a, COBRA administration has no outside vendor fee.

Q10: We are unable to open both Excel Files shown in the File Layouts for Active Employee Payroll Deductions shown in Attachment B, Voluntary Benefits Questionnaire, Tab 15-File Layout (Titled "Voluntary Benefit Biweekly Payroll File and Voluntary Benefiti Weekly Changes). Given this, would it be possible to have these re-sent as they are pivotal to the overall underwriting review process?

A10: See response to Q5.

Q11: For the active participation the scope states you want on-site staff to utilize the SAP system. Our question is would Miami Dade consider utilizing a 3rd party benefits administration system that integrates with your SAP system via ongoing file interfaces?

A11: Miami-Dade County Public Schools would not consider utilizing a TPA Benefits Administration system to integrate with our SAP system.

Q12: Can the district please provide a census in excel format with the following information so we can provide a competitive bid.

1. Employee Gender
2. Employee Date of Birth
3. Employee Date of Hire
4. Employee Occupation with the district
5. Employee Annual Salary with the district
6. Employee Hours worked per week

A12: Included with this addendum is an Excel census file labeled "FT Q&A". This file contains above data (except for data of hire, which is not available at this time) on all full-time and part-time employees eligible for District medical. This represents the vast majority of staff who would be **eligible to enroll in the voluntary benefit plans**. Note:

- Those not captured in this file who would also be able to enroll in voluntary benefit plans are a small number of part-time employees – see response to Q66 for more information on this group.
- Employee/ retiree enrollment in the current voluntary benefit plans was provided in the 2 tabs in original census file issued with this RFP.

Q13: There is mention of providing year-round onsite staff. Can you confirm the requirement is 4 onsite.

A13: Yes, the onsite staff that is being requested is to provide onsite services all year-round. Note the initial estimate is 4 such staff, but as part of this process the District may decide to increase this amount (to no more than 9).

Q14: As to the management of leave billing, dependent eligibility review. Are you asking for pricing for leave billing (Direct Bill) and Dependent Verification services to be provided by the benefits administration company? Our team can collect the documents via an image upload process via our mobile application and then our team will verify the document and approve or decline. For LOA, Retirees, out team can direct bill those policies, similar to Cobra.

A14: These two services are to be included in the pricing being seek through his RFP for both active and retiree administration.

Q15: Please provide additional details on what is required for retiree administration.
a. Pre-65 Retirees – what benefits are they eligible for? Is Direct Bill in scope from the benefits administration firm.

b. Post-65 Retirees – what benefits are they eligible for and will Direct Bill be in scope

A15: a. Yes, we are seeking direct billing for all benefits being offered. Refer to the "Current State" Tab 2 of the Benefits Administration attachment for more information on the benefits for which all participant groups are eligible.
b. Post-65 retirees are eligible for the Medicare offerings thru the School Board and yes, direct billing would be included in the scope of service.

Q16: What is required with the integration with the Florida Retirement system? Do they require a census or enrollment data?

A16: The retiree administration includes the setting up of the FRS Deduction slot, the administration of the deductions and the forwarding of the premium to the District vendors.

Q17: Regarding the HIS Program:
a. Is the Benefits Administration company being asked to calculate the amount based on years of "credible service"?
b. Will this data be sent to the benefits administration provider?
c. Is the BA provider required to calculate this amount and apply subsidy to the direct billed invoices?

A17: a. No
b. The District will work with the provider to ensure all participation information is submitted to the State.
c. No

Q18: What is the desired frequency of an inbound demographics file?

A18: Cannot provide a response without further explanation of what file the question is making reference to.

Q19: Is there flexibility around the required call center hours? Currently the request is for a 12 hour day 7-7EST.

A19: The preference is to maintain the current hours to assure that individuals have access to receiving information pre-&-post working hours.

Q20: If the site is not able to be converted to Haitian Creole, is that an immediate knock out?

A20: Miami-Dade County Public Schools strives to communicate to all employees in the language they feel more conformable to communicate in. Note only certain portions of website is in Haitian Creole.

Q21: Regarding the list of communications on tab 5A – are all of those communications in scope to be printed and mailed?

A21: There is a column in the document that indicates next to each communication item indicating if its printed or electronically provided.

Q22: Regarding the 3 Voluntary Products – if the benefits administration provider provides a proposal for those policies…we want to confirm that the expectation is that 100% of the commissions will be leveraged to offset the cost of the technology platform. This question is brought up because in another section of the RFP, it states that 100% of the commission will be paid to an agent of M-DCPS's choosing. Please confirm how you expect the commissions to be treated if the Benefits Administration firm is procuring and presenting quotes on those 3 policies.

A22: It is the intent for that all voluntary benefits commissions will be assigned to licensed agents at benefit administration providers as an offset to the Active and Retiree benefit administration fees. If a benefits administration firm is also submitting proposals for voluntary benefits, then it would be acceptable for this entity to retain commissions as an offset to its benefit administration fees.

Q23: Section 6 notes that bidders can submit electronically via Periscope S2G or DemandStar OR a paper proposal, mailed (which also must be accompanied by an electronic submission).

a. There are numerous requirements throughout the RFP for wet signatures and notarization, which conflict with the instruction outlined above that we have the option to submit the response solely electronically. Is a paper proposal mandatory for all bidders (as the signature and notarization requirements imply), or may we disregard the requirements for wet signatures and notarization when submitting solely electronically?

b. If a solely electronic submission is permissible, please share any requirements for electronic signatures. Please also confirm that notarization is not applicable in this scenario.

c. If a solely electronic submission is permissible, please confirm we only have to submit our response in one of the listed systems, not both.

A23: Proposers have the option to submit electronically through Periscope or DemandStar or deliver a hard copy proposal to the address as listed on the solicitation. If proposers are submitting electronically, electronic copies of the notarized documents are required. These can be notarized and scanned then uploaded to Periscope or DemandStar. In addition, it is not required to submit on both Periscope and DemandStar, please choose one of the two websites.

Q24: By what date can we expect to receive responses to any clarifying questions we submit?

A24: February 22 is the date for release of this bidders Q&A.

Q25: Due to the timeline shifting, would you consider extending the RFP deadline?

A25: No.

Q26: RFP Submission – On page 17 the RFP states, "The entire proposal packet must be submitted either: (1) electronically via the e-bidding platforms Periscope S2G (previously known as BidSync) or DemandStar, OR (2) an unbound original proposal in a main sealed envelope or container (box), along with an electronic submittal via Periscope S2G or DemandStar." However, the RFP requires notaries. If submitting electronically only, are electronic copies of these documents acceptable or does the bidder still need to provide hard copies of these documents?

A26: See response to Q23.

Q27: Regarding COBRA, does M-DCPS ever subsidize all or a portion of the members COBRA premium?

a. If so, is it a percentage, flat rate or does it vary?

A27: No.

Q28: Regarding COBRA does M-DCPS report new hire and qualifying events electronically today?

a. If yes, do they report via a proprietary file layout per M-DCPS specifications or to the vendor file layout specifications?

b. If there is a requirement that vendor accepts M-DCPS file specifications, can those be shared so we can evaluate our ability to support the data feed?

A28: a. No, currently this is a manual process.
b.There is no data exchange with respect to COBRA.

Q29: Who is the current COBRA administrator?

A29: Miami-Dade County Public Schools is their own benefits administrator.

Q30: What is the current pricing for both COBRA and FSA?

A30: See response to Q9b.

Q31: The minimum requirements for FSA and COBRA do not state that an onsite benefit specialist is required. However, on Tab 4f, Line 153, Question 104, the Questionnaire states the following "Confirm that if you are providing FSA administration services, whether your firm can provide one full-time dedicated onsite benefits specialist beginning first business day after 1/1/2022. Individual will work at M-DCPS' Benefits office in downtown Miami. This individual would also be expected to assist M-DCPS Benefits team with other day-to-day plan management activities and participate in benefits educational sessions conducted in a group setting.' Please confirm that this is not a requirement to bid on the FSA/COBRA services.

A31: Confirmed, this is a request and not a requirement.

Q32: How does MDCPS currently fund the FSA plan for payment of claims? (please share as much detail as possible). Are there any funding changes you are looking to make with a new administrator?

A32: Payroll deductions are collected from employees via M-DCPS SAP system and these funds are sent to current administrator TASC for use in providing employee reimbursement.

Q33: In Tab 4f, Banking section, Line 159, Question 109, it states "Can M-DCPS choose an alternate bank, if your firm's chosen bank does not meet M-DCPS' requirements. Can you please explain M-DCPS' banking requirements so we can ensure our bank meets those standards?

A33: M-DCPS currently partners with Wells Fargo. Please provide banking situation for any alternative arrangements.

Q34: Can you provide more detail around the retiree population and billing (E.G., tracking, benefits offered, do split enrollments need to be supported, retirees coming on and off benefits, etc.)?

A34: The information has been included in the RFP and additional information can be found by clicking on the benefits links at www.dadeschools.net

Q35: Anything unique to leave billing requirements?

A35: The requirement is to follow Miami- Dade County Public Schools eligibility rules/guidelines and payments cycles.

Q36: Regarding requirement for onsite enrollment support year-round for active enrollment—is this referring to employee contact center support? Is physical onsite support a requirement? Can you elaborate?

A36: Yes, physical onsite support – in addition to offsite customer service center – is being requested to provide service to individuals visiting the Office of Risk and Benefits Management.

Q37: Are we able to respond to the active population ben admin only or are retiree and active populations needing a dual response? Can you confirm what components of the RFP can be quoted on stand-alone vs. what pieces are linked?

A37: As stated in the RFP, organizations may submit a proposal for any combination of: Active, Retiree, FSA and/or COBRA administrative services.

Q38: Can you provide detail around volume expectations—call center, Cobra, etc.

A38: The number of participants enrolled and mail-outs has been provided in the RFP Attachment A. Please estimate your own volumes based on these amounts.

Q39: Can you provide a breakdown of active, PT, retirees, Cobra participants, etc. (E.G. 37K+ employees)?

A39: See Tab 2 “Current State” of Benefit Administration Attachment A for current counts of enrollees and/or eligibles by various participant groups. The pricing tabs of this workbook also contain current enrollment assumptions and, in some cases such as COBRA, historical enrollment or FSA active open accounts. Census files are also available, with current enrollment and election data.

Q40: Who is M-DCPS’s current benefits administration technology vendor?

A40: M-DCPS utilizes our own SAP system and seeking thru this solicitation the opportunity of offering a technology platform for retirees/part time employees.

Q41: What are the primary areas of dissatisfaction with M-DCPS’s current technology vendor?

A41: There are not areas of dissatisfaction, seeking thru this solicitation the opportunity of improving our current services.

Q42: What is most important to M-DCPS in terms of selecting a new benefits administration vendor?

A42: The most important areas to M-DCPS in terms of selecting a new administrator are reflected in both the minimum qualifications as well as the selection criteria, both of which are contained in the RFP. For the retirees a platform that supports all our business rules.

Q43: Please detail the consolidated billing requirements associated with this RFP.

A43: The consolidated billing indicated in this RFP is referring to the retiree administration. The billing requirement is to support the current three ways retirees can make payment, via FRS, Direct Billing or ACH. Additionally, to collect premium for all benefits, post and remit to the vendors.

Q44: What frequency would be required for consolidated billing e.g. bi-weekly, monthly?

A44: The consolidated billing indicated in this RFP is referring to the retiree administration. The premiums and payments are monthly.

Q45: How many total coverages would be billed for?

A45: For retirees we have 8,600 and leave billing for approximately 620 employees.

Q46: Are there any credits involved with the billing?

A46: Yes, for the active employees in the AFSME Union there is a credit called the Flex Credit that is automatically applied to the premium owed, then employees are billed for the balance.

Q47: Is ACA Compliance reporting in the scope of this RFP?

A47: No.

Q48: Please confirm the paper enrollment kit requirements e.g. number of kits, number of pages, mailing requirements, etc.

A48: Yes, paper enrollment packages will be required for specific groups and open to a discussion for others. See bottom of Tabs 5a and 5b of the Benefits Administration Attachment A for this information.

Q49: Please confirm any other printing and fulfillment requirements associated with this RFP.

A49: See response to Q48.

Q50: Please confirm that SAP is M-DCPS’s HRIS and payroll system.

A50: Yes.

Q51: How many current COBRA participants does M-DCPS have? How many COBRA participants does M-DCPS average monthly?

A51: 200 Qualified Beneficiaries are currently participating and monthly 210 packages are mailed. See data on bottom of Tab 5d "COBRA Pricing" of the Benefits Administration Attachment A for experience over 2019/20.

Q52: How many current retirees does M-DCPS have?

A52: 8,600. See Tab 2 "Current State" and Tab 5b "Retiree Pricing" of this Benefits Administration Attachment A for this information. Detailed retiree census file is also available from M-DCPS Procurement.

Q53: Do pre-65 and post-65 coverage have separate rates?

A53: Yes.

Q54: How many FSA participants does M-DCPS have?

A54: 3,400. See Tab 2 "Current State" and Tab 5c "FSA Pricing" of this Benefits Administration Attachment A for this information.

Q55: Is M-DCPS willing to replace their current Voluntary Benefit carriers/vendors?

A55: M-DCPS is willing to entertain any competitive proposal and will be choosing the offering that are best aligned with our employees' needs.

Q56: Please provide your current VB premium/participation volumes by product for the products currently offered?

A56: See Tabs 4a and 4b of the Voluntary Benefits Attachment B for this information. Also see responses to Q223 and Q224.

Q57: How were the VB products enrolled previously--self-service or active enrollment with benefit counselors?

A57: Benefits Counselors assist with this enrollment.

Q58: Can you detail any technical requirements for integration with VB carriers, specifically any technical requirements related to the Universal Life product?

A58: The goal is to have the UL product residencially hosted on the ben admin platform, to include enrollment and billing.

Q59: Direct Bill is requested for retirees, COBRA participants, Part-Time employees, and LOA Employees- Similar to the above questions, is the intent to allow Active employees that then move into these categories to port coverage, or is the request to allow employees that are already on direct bill with other carriers to move to Aetna and begin direct bill with us from the start our policy effective date?

A59: Existing policyholders will have the opportunity to elect new coverage via the group plans on a payroll deduction basis or port existing policies on a direct bill basis.

Q60: I see that Retirees are eligible for Hospital Indemnity (which is not requested to be quoted), but I wanted to confirm if Retirees are requested to be eligible for Accident and CI/

- **Attachment B on the Read Me First Tab states: Row 40- "Retirees (i.e., actives upon retirement can port coverage) / Enrollment tracked by carrier / Premium is direct bill from carrier"**

- **Does this mean that employees are eligible to retain coverage as they retire and then they must port coverage? Or does this mean that employees that are already retired will have the ability to purchase coverage for Accident and Critical Illness?**
- **If coverage is requested for already retired individuals, can we receive a census with a breakout between active, retired, COBRA participants, part-time employees, and LOA absence employees?**

A60: For voluntary benefits, it is required that these benefits be continued for active employees when they first enter a retiree status, and continue over retirement as long as they pay premium. Note if an active employee had no such coverage upon retirement, then he/she is not allowed to enroll in these plans at a later date. Also if a retiree has other M-DCPS benefits but had no voluntary benefit coverage at retirement, then he/she is not allowed to later enroll in voluntary benefits.

Please note that for all three proposed plans – CI, Accident and UL – each should include the ability for enrollees to port their coverage in the future, on an individual basis, even if the master policy is terminated.

Census files with the information noted above is available from M-DCPS Procurement.

Q61: Please confirm if we are required to quote on the Retiree population

A61: Retiree benefit administration is a distinct set of services being sought separate from Active, FSA and COBRA administration. Therefore, you may choose to bid on these administrative services or not.

For voluntary benefits, see response to Q60.

Q62: Please confirm the Part-Time Employees Eligibility definition, including hours per week

A62: M-DCPS offers different groups of part-timer different benefits driven by the eligibility indicated in each Labor Contract.

Q63: Are any of the Part-Time Employees retirees?

A63: Yes, and based on each group's eligibility, an individual can be eligible for both benefits.

Q64: Please confirm commissions.

A64: Future levels of commissions for the voluntary benefit plans are outlined in the Voluntary Benefits workbook Tabs 8b, 9b and 10b. These are target levels; if your organization has different levels filed in its plans, this is acceptable, we ask that you simply note in the pricing tabs what these levels are.

Note we request premium rates to remain level over the contract period, regardless of commission structure.

Finally, see responses to Q223 and Q224 for current product commissions paid.

Q65: Census - Can you confirm that Part Time employees must remain direct billed for Accident and Critical Illness coverage, or are we able to move them to payroll deduction?

A65: Yes, part time employees must remain in direct billing.

Q66: Census - The provided census does not appear to have Part-Time employees listed. Is that information available?

A66: See new attached file "PT Q&A". This file contains enrollment of part-time employees, in Flex benefit plans (i.e., non medical), for which direct bills would need to be issued. Note:

- There are a handful of part-time employees who are direct billed for Family medical coverage – the vast majority of part-time employees who are enrolled in medical receive a Board subsidy and are billed via M-DCPS SAP payroll
- A portion of part-time employees are also enrolled in voluntary benefit plans and would need to be direct billed. This list/ count is not available at this time.

Q67: Plan Design - The ACC Plan Design (Tab 8a) lists some benefits as having a higher benefit on the low plan than the high plan. Can you please confirm that this is the intent for these items?

a. Emergency Room Care Benefit
b. Skin Graft Benefit
c. General Emergency Dental Work
d. Appliance Benefit
e. Transportation Benefit
f. Lodging Benefit
g. Blood/Plasma/Platelet Benefit
h. Major Diagnostic Exam Benefit
i. X-Ray Benefit
j. Laceration Benefit

A67: For the proposed Accident plans, M-DCPS is seeking proposals for two options – a "high" plan design v. "low". At this time, the intent would be to offer only one of these, not both. The decision whether to offer a "high" v. a "low"-type option will be decided by the Selection Committee as part of this process.

Q68: Plan Design - There appears to be 2 Critical Illness policies being offered (and Individual plan with Trustmark and a group plan with Voya). Will our quoted group Critical Illness plan be replacing both of these plans?

A68: Yes, it is the intent to offer 1 Critical Illness, 1 Accident and 1 Universal Life plan effective 1/1/22. Enrollees in the current voluntary benefit plans will have the option to port their current coverages on a direct pay basis with incumbent carriers or join the new M-DCPS-sponsored group plans effective 1/1/22.

Q69: Plan Design - Will employees currently in the individual Accident and Critical Illness policies be allowed to continue coverage with Trustmark if those plans are no longer offered?

A69: See response to Q68.

Q70: Plan Design - For Critical Illness, are you looking for us to grandfather in the original employee issue ages? Or will all employees enter our Critical Illness plan based on the age at time of enrollment?

A70: Employees will enter new plans at the age at time of enrollment for the upcoming plan year. No need to grandfather old plans

Q71: Plan Design - The current Trustmark CI/Cancer policies provide employees with benefit amounts that do not fall into the 10K, 20K, 30K, 40K buckets we are being asked to quote. Will the current benefit amount outside these buckets need to be grandfathered?

A71: Employees will have the option to retain their existing coverage on a direct bill basis or elect into the new plan at the offered volume amounts. No need to grandfather old plans / designs.

Q72: On the Voluntary Benefits Questionnaire.xlsx. Tab 6, row 172 states that M-DCPS is requesting a 3-year rate guarantee. However, on Tab 1, row 52, it states a 5-year contract is requested. Can you please confirm the rate guarantee period required?

A72: M-DCPS is requesting a 5-year contract, with the option for two 1-year renewals. It would be preferred if rates would be guaranteed for the first 5 years (beginning 1/1/22).

Q73: Is any historical experience information (paid premium and paid claims) available?

A73: Tabs 4a and 4b of Attachment B contain recent enrollment and paid premium for the current voluntary benefit plans. Paid claim data is not available. Also see responses to Q223 and Q224 for further information.

Q74: Is there a percentage goal for the Small/Micro, Minority/Women-Owned, and Veteran Business Enterprise Programs requirement?

A74: Yes, 5%. See scorecards within RFP cover memo.

Q75: Please clarify mailing instructions. Section 6.1 explains the entire proposal packet can be submitted either on the e-bidding site Perisope, DemandStar or in a sealed envelope. Exhibit 18 indicates that sealed proposals and via an e-bidding site is required.

A75: See response to Q4 and Q23.

Q76: Our organization takes COVID-19 seriously and our associates are working remotely and following social distancing guidelines as directed by the CDC. We will submit the proposal via one of the e-bidding sites for M-DCPS, but is it still mandatory to submit hard copies of the RFP submission?

A76: See response to Q4.

Q77: Why is M-DCPS looking to change benefit administration vendors?

A77: The current contract is scheduled to terminate this year and the benefits administration platform has continued to change, so seeking the opportunity of exploring how we can improve our services.

Q78: Why is M-DCPS looking to voluntary carriers?

A78: Beside the current contracts being up for renewal, M-DCPS is seeking competitive products to complement its overall benefits offerings.

Q79: For retiree direct billing component, what percentage of the employees are funding their benefits through their pension and would not need the direct billing service to collect premiums?

A79: 90%.

Q80: For direct billing, how many are ACH versus collecting physical checks?

A80: 7% direct billing and 3% ACH.

Q81: For the retiree population, do you currently have electronic communication mediums that help stay in contact with retires such as emails, etc.. If not, what percentage of the employee population do you not have email addresses for?

A81: Yes, we communicate via email and 89% of retiree have email addresses.

Q82: Can a grid be provided documenting the benefit classifications and differences between all the different benefits. (Employee cost variances, pay frequencies, life and disability benefit classes/differences, etc)

A82: The information can be found at https://mdcps.fbmcbenefits.com/

Q83: Do multiple payroll systems have to be integrated with, or is their one central system/application?

A83: No, there is not payroll integration, but we can discuss the uploading of an excel spreadsheet.

Q84: Within the RFP,. It mentions having someone on site to key-in/type in information, into the County's payroll/HRIS application. Does the payroll application have the ability to support both outgoing and incoming datafiles? Effectively eliminating the need to key data into the system?

A84: The system supports outgoing and incoming datafiles, but data entry continues to be needed.

Q85: If a integration with SAP can be established, does M-DCPS still need a person on-site to key information into the HRIS application?

A85: No, there is not payroll integration, but we can discuss the uploading of an excel spreadsheet.

Q86: How critical is it that FSA administration is included as a component of the benefit administration platform?

A86: This is a standalone service that is being considered as part of this RFP process. Therefore, any bidder may choose to submit a proposal for only these services, these services as part of a broader set of services, or no proposal at all for these services.

Q87: Will you provide copies of the benefit guides utilized today?

A87: The information can be found at https://mdcps.fbmcbenefits.com/

Q88: What payroll/HRIS system does M-DCPS utilize?

A88: SAP.

Q89: Does the benefit administration platform need to manage all benefits (medical, dental vision, etc.) or just the voluntary benefits?

A89: Yes.

Q90: Can the benefit documents for all benefits, including medical, dental, vision, L&D, etc.. be provided?

A90: See response to Q87.

Q91: Do retires stay within their own, unique benefit classifications for dental, vision and other benefits (rates, cost, etc.) that they were in pre-retirement?

A91: This limitation is only applicable to three benefits, Life, AD&D and Hospital Income.

Q92: Is the total cost for medical plans the same across all benefit classes/employee groups? If not, can you please grid be provided detailing who receives what?

A92: No, the cost is driven by salary bands, tiers, pay cycle and selected plan.

Q93: Is the total cost for vision plans the same across all benefit classes/employee groups? If not, can you please grid be provided detailing who receives what?

A93: Yes, the monthly premium is the same the difference is that is converted into the three pay cycles for active employees and monthly for retirees/part timers.

Q94: Is the total cost for dental plans the same across all benefit classes/employee groups? If not, can you please grid be provided detailing who receives what?

A94: Yes, the monthly premium is the same the difference is that is converted into the three pay cycles for active employees and monthly for retirees/part timers.

Q95: Does the employee cost for medical change for different classifications of employees? Can a grid please be provided detailing the differences?

A95: The information can be found at https://mdcps.fbmcbenefits.com/

Q96: Does M-DCPS utilize educational videos/content to communicate benefits information during open enrollment? Is this content created in-house or by an external vendor?

A96: Yes and is created in collaboration between the Risk Management staff and the current Third Party Administrator.

Q97: Is all demographic data maintained in a single system across M-DPCS? Or will multiple, ongoing, inbound demographic files be required?

A97: No, we currently maintain demographic for active in SAP and retirees/part timers in the current TPA system.

Q98: Does M-DCPS want the vendor to manage electronic communications? Or give them the tools to use for electronic communications to its employees?

A98: The Third Party Administrator would work with staff from Risk Management to manage all communication strategies.

Q99: Anticipated total number of carrier files?

A99: All the carrier files are outlined in the RFP as attachments.

Q100: If payroll is not automated today, have you tried previously? Were there specific issues preventing this?

A100: Today payroll is automated for active employees.

Q101: If a union employee "straddles" multiple agencies, what are the implications? Are they dual employed?

A101: Employees are never dual employed for benefits purposes, their union identifier determines the eligibility.

Q102: Unions – If not identified in the separate class matrix, are bargaining periods aligned with the plan year? How often should we expect off cycle enrollment periods?

A102: The healthcare benefit we offer and eligibility is driven by the Labor Contracts.

Q103: Estimated annual turnover %?

A103: This question is not clear.

Q104: How many different contribution structures exist across the entire group?

A104: This information can be found online at https://mdcpsdev.fbmcbenefits.com/home-fte/fte/full-time-rates/

Q105: How many 1095's were produced for 2020 (2019 count is fine if you don't have the 2020 number yet)

A105: This RFP does not solicit this service.

Q106: What can the current benefit administration application not manage/administer on behalf of M-DCPS, that M-DCPS would like the new benefit administration to manage?

A106: For Active employees the current Third Party Administrator does not manage the application. The change in the healthcare and benefits administration provides the opportunity of seeking additional services to those currently being provided.

Q107: What are the top five challenges What are the top five challenges M-DCPS experiences today in relation to benefits administration?

A107: The change in the healthcare and benefits administration provides the opportunity of seeking additional services to those currently being provided.

Q108: Could you please clarify a question regarding pricing in Attachment A, Tab 5d, #7. Ongoing Administrative Fee Per Enrolled Participant Per Month - Can you define enrolled? Is this enrolled in medical and/or any COBRA eligible benefit, or do you mean enrolled in COBRA? Any/all detail will be helpful.

A108: M-DCPS is seeking COBRA administration pricing on a per COBRA event/ COBRA participant basis. The purpose of Line 7 is to capture any ongoing administrative charges, per COBRA participant, for full COBRA administration, if such charges would be assessed per member on COBRA. Lines 8 – 10 allow for you to input any other charges, if they happen to be on some other basis not listed on lines 5 – 7.

Q109: Based on conversation today during the pre-proposal call I want to confirm that it will be acceptable to charge the 2% admin fee and retain it in our fees as mentioned in Attachment A, Tab 5d #25. "Will your firm remit the 2% Admin Fee (in COBRA rates) back to M-DCPS?"

A109: If this is part of your preferred pricing approach for COBRA administrative services, then M-DCPS will consider this approach. Alternatively, if your firm returns the 2% and prices for its services in some other manner, then the District will consider this too.

Q110: Can you provide Plan Documents and SPDs for the Section 125 Cafeteria Plan and Flexible Spending Account?

A110: See response to Q34.

Q111: Can you provide the RFP PDF as a Word document? If no, can you provide Exhibit 17 – Proposed Contract Agreement Draft as a Word document for our review?

A111: Please refer to RFP Word document included with this addendum. Exhibit 17 is not available in Word form. It is important to also note that any deviations to the agreement should be clearly noted on either Attachment A and/or B, as applicable.

Q112: What specifically is important to the County in a long-term FSA and COBRA partner?

A112: As with every contract, the most important factor is to make sure we are compliant and are proactive in communicating changes, opportunities to our employees.

Q113: Can you elaborate on how the current FSA administration is going with TASC? Are there any current pain points we should be aware of?

A113: We have a long-standing relationship with our current FSA Administrator and we are in the last year of our current contract.

Q114: What enhancements is the County looking for as it relates to their current FSA administrative services?

A114: We are always seeking the opportunity of improving our services and ways of communicating, engaging our employees in their options.

Q115: Can you elaborate on how the current in-house COBRA administration is going? Are there any current pain points we should be aware of?

A115: The current administration is being handled in collaboration between staff from the Risk Management Office and the current ASO Healthcare provider.

Q116: What enhancements is the County looking for as it relates to their current COBRA administrative services?

A116: We are seeking a vendor that would fully support this administration.

Q117: Are you willing to share what the County is currently paying for FSA administration?

A117: The District is unable to share incumbent vendor fees.

Q118: Direct Billing services are mentioned within the RFP Questionnaire tab 4b - can you provide the number of employees and/or retirees we would potentially be billing for premiums on a monthly basis?

A118: 8,600.

Q119: Is the vendor required to meet the County's current payroll and master data file layouts or is the County open to using the awarded vendors preferred file specifications for this purpose?

A119: The vendor must meet our current data file layouts, which were provided as part of Attachment A.

Q120: Does the County currently have any substantiation files in place between their FSA vendor and their carriers today to aid in substantiation?

A120: Yes, we currently have vendor files setup with the current FSA Administrator.

Q121: Does M-DCPS want the COBRA vendor to provide premium remittance back to the District or back to the carriers?

A121: Ideally directly to the carriers.

Q122: Reviewing the COBRA Excel Questionnaire is Direct Bill included in the scope with the COBRA administration?

A122: Yes.

Q123: Can responders submit multiple submissions? For example, a standalone Benefit Administration carve-out response and separately, a combined Benefit Administration combo Voluntary Benefits total solution?

A123: Yes.

Q124: How many Initial Notification of COBRA Rights or New Hires does the County typically expect, annually?

A124: COBRA 2,530 and New Hire enroll online via the SAP system. See bottom of Tab 5d of Attachment A for most recent COBRA activity.

Q125: In the COBRA Questionnaire, a line item in the pricing section is dependent verification of coverage. Is this applicable to COBRA administration? Note - COBRA participants need to be treated the same as current employees, so if M-DCPS performs dependent verification on every COBRA participant, then the belief is also that M-DCPS would have to perform dependent verification on each Active account and Retiree "annually" which may cause employee frustration

with the frequency. Is it the intent of M-DCPS to have the COBRA vendor performing dependent verification?

A125: The dependent verification under COBRA is when a QB experience a qualifying event and add a newly eligible dependent.

Q126: Is Leave of Absence processing in scope?

A126: Yes.

Q127: Is Retiree Billing in scope?

A127: Yes for the coverages in which they enroll. See response to Q118.

Q128: Item 10 on p. 22 indicates all 20 exhibits in Section 10 must be signed and returned, but some of those exhibits are informational only (12, 18, 19) and others seem moot for electronic submissions (9, 15). Also, Exhibit 4 seems to only be necessary if the vendor is claiming local business eligibility, and Exhibit 16 is only for vendors not planning to respond. Also, Exhibit 17 is a proposed agreement to be executed upon award. Please clarify exactly which exhibits should be signed and returned.

A128: The following are exhibits that must be submitted with your firm's response, please note Exhibit 4 and 16 shall only be submitted, if applicable:

Exhibit 1 Cover Page for Proposal

Exhibit 2 Affidavit Identifying Authorized Representative(s) for Selection Committee Proceedings (RFP Process)

Exhibit 3 Acknowledgment of Amendments

Exhibit 4 Local Business Affidavit of Eligibility (if applicable)

Exhibit 5 Florida Statutes on Public Entity Crimes

Exhibit 6 Proposer Experience

Exhibit 7 Anti-Collusion Statement

Exhibit 8 Disclosure of Employment of Former School Board Employees/Conflict of Interest

Exhibit 10 Submitted Proposal Document Verification Form

Exhibit 11 Debarment

Exhibit 13 Proposer's Preference

Exhibit 14 Drug-Free Workplace

Exhibit 16 Statement of No Response (If applicable)

Exhibit 20 Attachment A – Benefits Administration Questionnaire and Attachment B – Voluntary Benefits Questionnaire

The following exhibits are for informational purposes and do not need to be submitted with your firm's response:

Exhibit 12 Instructions for Certification

Exhibit 17 Proposed Contract Agreement

Exhibit 18 Bid Opening Instructions

Exhibit 19 Registration Instructions for Periscope S2G and DemandStar

The following exhibits must be submitted if your firm submits a hard copy response; if submitting electronically please do not need to submit the following exhibits:

Exhibit 9 Proposal Submittal Receipt Form (attached to the outside of your firm's proposal response)

Exhibit 15 Mailing Label

Q129: Please confirm, are hard copy documents required for submittal to the District, or can submissions be provided electronically only?

A129: See response to Q23.

Q130: In the RFP, Section 1, Part II.B.., states that, "When filling out the proposal form, Proposers are required to complete proposal in ink." Does this mean that all forms must be filled out in "wet" handwritten ink, or can answers be typed? Does only the signature need to be in "wet" ink?

A130: Documents may be typed and/or completed in ink. Any signature submitted can be scanned and uploaded to Periscope or DemandStar, as applicable. In addition, electronic signatures are also accepted.

Q131: For Proposers bidding on combined Benefits Administration services (active, retiree, FSA, Cobra) and Voluntary Benefits (accident, critical illness, and universal life) solution, should the requested RFP Exhibits be completed by the benefits administrator, the carrier, or both? During these times of "social distancing" due to the pandemic, should documents be notarized prior to submitting the proposal, or can they be notarized upon finalist selection?

A131: **A response to this question will be provided in a future Addendum.**

Q132: Must Exhibit 17, "Proposed Contract Agreement Draft," be completed at time of proposal submission, or is it a draft to be completed at a later date? If it is required to be signed and submitted at time of proposal submission, can M-DCPS provide the actual completed document for review and signature? Are proposers expected to fill out the blank portions of the contract, or will M-DCPS?

A132: The Proposed Contract Agreement Draft is an M-DCPS standard agreement and does not have to be executed at the time of proposal submission. Proposers should clearly state with specificity any contract provisions which they propose to deviate on Attachment A and/or Attachment B, as applicable.

Q133: Of the eight Unions involved with District personnel, will they continue to sell Voluntary Benefit plans independently of those provided by the District during future open enrollment and year-round instances?

A133: Yes.

Q134: Will Union-related benefits be allowed through payroll deduction? If "Yes", is it expected that these benefits be illustrated in communication materials, educational sessions, or technology platforms managed under Benefits Administration services?

A134: Yes, but these benefits are separate to the ones included in this RFP. Note we always strive to educate our employees in all offerings.

Q135: Does M-DCPS intend to continue or discontinue the payroll deductions for the current Voluntary Benefit plans offered if new carrier(s)/plans are chosen as a part of this RFP process?

A135: The goal is to discontinue deductions for the current plans and let current enrollees port their coverage or enroll on a group basis, with payroll deduction, into the new plans effective 1/1/22.

Q136: For group insurance products that M-DCPS offers to its employees (medical, dental, vision, group term life, legal, hospital indemnity), is there currently any compensation available from these products to assist with the cost of providing Benefit Administration or Voluntary Benefit Enrollment services? If "No", is it possible that during anytime of this contract that the selected vendor of this RFP can receive any form of compensation from these group products?

A136: No commissions are (or will be) available within the ASO or Flex group plans since rates for these plans are set for the next several years. However, commissions embedded in the future voluntary benefit plans may be used as an offset to fees to provide benefits administration or voluntary benefit enrollment services.

Q137: The RFP states M-DCPS is seeking proposals for three Voluntary Benefits: Accident, Critical Illness (single option), and Universal Life Insurance (single option). Is M-DCPS also seeking a sole carrier to provide/insure these Voluntary Benefits?

A137: M-DCPS will consider proposals from carriers for 1, 2 or all 3 of the three requested plans. A sole carrier for all 3 plans is not required.

Q138: To streamline education, billing, and administration, does M-DCPS intend to migrate and consolidate Voluntary (worksite) Benefits offering to a single carrier?

A138: M-DCPS is open to such an approach if products and rates are competitive, but also willing to "split" coverage (per Q137).

Q139: Taking into consideration the specified 1/1/2022 contract effective date, is it anticipated that the Voluntary Benefit enrollment will occur during fall 2021, and what types of enrollment (field, call center, self-enrollment) does M-DCPS anticipate for that enrollment?

A139: Yes and would discuss best option with the vendor awarded the contract to assure that all employees have the same educational and enrollment opportunity.

Q140: What is the expectation for future enrollment methods around on-site face-to-face sessions, self-service through technology platform, call center, or virtual opportunities?

A140: The School Board will continue to seek different ways of communication and education, while supporting some methods more than other for specific groups of employees.

Q141: In the event on-site face-to-face enrollment is anticipated, what locations would the vendor have access to for employee interactions? What has been the % of eligible active employees seen in the prior two Voluntary Benefit enrollment windows?

A141: The School Board would jointly discuss and determine with the vendor. However, we would like to make sure that our decision does provide maximum opportunity to our employees of engaging in enrollment.

Q142: Please clarify whether the District expects separate or combined communication campaigns for Attachment A and Attachment B.

A142: Largely separate given the range of plans, participants and timing.

Q143: The current contract requires 10 on-site personnel to support the District's active employee and retiree population; the RFP is requesting 4 with a possibility of increasing to 9. When would the District provide final numbers on staffing requirements to support services outlined in the RFP?

A143: This will be determined as part of the proposal review process in April, with final Board approval expected in June. As requested, please base your core pricing on 4 onsite personnel with the ability (and itemized pricing) to flex up to 9. The final number will be dependent on the final set of services that are ultimately selected.

Q144: Would MDCPS accept a proposal for on COBRA Administration?

A144: All proposal will be accepted and reviewed.

Q145: Would MDCPS require proposing COBRA vendors to have onsite employees? Are you asking for an iTEDIUM employee to input qualifying events into our system?

A145: No.

Q146: Is the county willing make a file to send to a COBRA vendor?

A146: M-DCPS expects to submit to the COBRA vendor those who become eligible for COBRA and then expects the vendor to fully administer this group (i.e., issue notices, collect payments, etc.).

Q147: Would MDCPS require proposing COBRA vendors to store claims information in their system?

A147: Enrollment and payment information is expected to be stored in the COBRA vendor system, but not claim data.

Q148: Can you explain the size of the employee dishonesty coverage? What is the reason for the $10 Million limit? Is the City open to other solutions such as setting up collections to City controlled bank/trust account?

A148: **A response to this question will be provided in a future Addendum.**

Q149: Would the City be open to lowering the amount of coverage to a more reasonable level of coverage? If so, what level?

A149: **A response to this question will be provided in a future Addendum.**

Q150: If MDCPS does not provide COBRA files to its current administrator then how are the qualifying event information communicated?

A150: Current administration is conducted in-house. For the new 2021 approach, M-DCPs will submit reports to the new COBRA administrator.

Q151: How many HR locations are responsible for COBRA Administration?

A151: One, the Office of Risk and Benefits Management.

Q152: What is the estimated number of administrative users or HR contacts?

A152: The number of users will depend on the services provided. We expect it could range 7 – 10.

Q153: What was the number of insured employees in 1/1/19 & 1/1/12?

A153: All available enrollment data and census files (with demographic and enrollment data) was provided as part of the RFP attachments. This information is provided in numerous spots. For example, in Tab 2 of Attachment A, as well as Tab 5a, b, c and d of this same attachment.

Q154: How many COBRA pending participants are there currently?

A154: 196 participants

Q155: What is the average number of COBRA qualifying events per month?

A155: 200, this fluctuates at the end of the school year and calendar year.

Q156: What is the average number of new hires per month?

A156: Average of 80/month and it fluctuates at the end and beginning of the school year.

Q157: How many qualifying events have been processed in 2020 so far?

A157: See bottom of Tab 5d in Attachment A.

Q158: How many qualifying events have been processed in the prior year?

A158: 1,089

Q159: Are there any plans for downsizing?

A159: No.

Q161: What are the current Leave of Absence statistics?

A161: 620 employees are currently being billed.

Q162: Is your current provider able to export history to a new system?

A162: No.

Q163: Who is the current COBRA administrator?

A163: M-DCPS and collaboration with the current ASO Healthcare vendor.

Q164: Who is the current Benefits administrator?

A164: Fringe Benefits Management Company or “FBMC”.

Q165: What is the current pricing for administrative services?

A165: $3.86 PEPM which is (i) separate from the FSA administrative fee (see response to Q9b) and (ii) in addition to commissions paid by voluntary benefit plans.

Q166: Who does iTEDIUM remit collected COBRA premium funds to?

A166: This question is not applicable to M-DCPS current situation.

Q167: Why is the MDCPS going out to market? Are there specific pain points that need be addressed?

A167: We are always seeking the opportunity of improving our services and ways of communicating, engaging our employees in their options.

Q168: Will detailed evaluation feedback and scoring be released after the award has been made?

A168: M-DCPS will follow all guidelines pursuant to Florida Statutes, Chapter 119 Public Records.

Q169: Please provide the insurance requirement for this opportunity.

A169: See M-DCPS RFP cover memo.

Q170: Does MDCPS want both an electronic and physical proposal submission?

A170: See response to Q129.

Q171: Please provide the following additional dates to your RFP timeline.
a. Supplier questions deadline
b. Fiscal year start & end dates

A171: 2/16/21 and 7/1 – 6/30

Q172: Please confirm for retiree administration how retiree records and information will be transmitted to us? Does the TPA have the ability to send us retiree files? And are we expected to send back deductions files to the TPA?

A172: The current TPA fully maintains and manages retiree files for the Flex benefit plans. They also submit adds, terms, etc. data directly to the vendors. In the future, M-DCPS would expect new retiree plan administrator to send FRS deduction data and retiree premium back to the District for early retirees in the Cigna ASO plan, but directly pay Medicare carriers their insured premium.

Q173: During the pre-proposal conference – it sounded like active employees may continue to enroll on SAP even with the introduction of a new benefits administration vendor. Can you please confirm whether this is the case?

A173: Yes, active employees will continue to enroll via the SAP enrollment platform.

Q174: What is the expected integration level and use cases for the benefits administration platform to SAP (e.g. EDI)?

A174: No integration with SAP is expected.

Q175: During the pre-proposal conference it was said that employees currently enrolled in accident, critical illness, and universal life will be able to move to direct bill. Can you confirm all payroll deductions will cease for these plans? If so, is the new vendor responsible for communicating anything around this?

A175: Yes, payroll deductions for existing plans will cease and subscribers will have the option to port their existing coverage or enroll in new plans – on a payroll deduction basis – effective 1/1/22. M-DCPS will communicate this change to affected enrollees.

Q176: Do plans need to be HSA compliant?

A176: No.

Q177: Will the incumbent voluntary benefits continue to be payroll deducted or will they be removed from payroll?

A177: See response to Q175.

Q178: Can you clarify who is eligible for VB? There is some confusing language in the RFP on whether retirees are required to be covered.

A178: See response to Q60.

Q179: Is the new VB carrier intended to take over the current retiree VB coverage or will they remain with their current vendors?

A179: See response to Q60.

Q180: Are performance guarantees required or a high % of the evaluation?

A180: Performance guarantees are a component of proposal evaluations per the scorecard outlined in the M-DCPS RFP cover document.

Q181: Is the 20% initial and ongoing commissions listed in the products tabs meant for the chosen benefits administration provider?

A181: Yes, commissions embedded within the voluntary benefit plans will be assigned to the benefit administrators (assuming they have an on staff licensed agent and are willing/ able to receive such amounts) in order to offset their administrative fees.

Q182: What will the $25,000 annual communication allowance be used for?

A182: Develop materials to enhance awareness and enrollment in voluntary benefit plans.

Q183: Does the account use a TPA for premium remittance for part time employees?

A183: Yes.

Q184: Are the current coverages for Trustmark and Voya group or individual polices?
a. If they are group contracts, can we obtain the experience?

A184: See Tab 3 of Attachment B for group v. individual plan status. Also, Tab 4a and b contain enrollment and premium statistics. Claim data is not available.

Q185: Would the School Board be interested in seeing any value-added programs?

A185: Please submit proposals for only those coverages requested.

Q186: Are portions of the Attachment B needing to be split between the sections listed on page 18 and 19 of the RFP or are these asking for items separate from the full excel exhibit?

A186: If you are submitting proposals for voluntary benefits, then you need to complete and return the workbooks within Attachment B that are outlined in the instructions of Tab 1 of this same attachment.

Q187: Under "Price Proposal" on page it says to include a signature but what are we supposed to sign? The excel pricing page?

A187: See response to Q130.

Q188: Can you please confirm how Miami-Dade County Public Schools wants to be enrolled (i.e. takeover, face to face, which is what has been done in the past by an enrollment firm)?

A188: The School Board will continue to seek different ways of communication and education, while supporting some methods more than other for specific groups of employees.

Q189: Is the intent to replace the current Trustmark and Voya offerings or offer in addition to those offerings?

A189: See response to Q175.

Q190: Will you consider bids for active employees only?

A190: As it relates to voluntary benefits, No retiree coverage is expected as outlined in response to Q60.

For benefit administration services, Yes your organization can submit a proposal for this group alone.

Q191: Can you please provide details on the flat 20% commissions? Who is this payable to?

A191: See response to Q181.

Q192: Will attained age rates be acceptable?

A192: Yes.

Q193: Will the selected plans replace the existing provider products? Or will the current provider products remain on payroll deduction?

A193: See response to Q175.

Q194: If the current provider products remain on payroll deduction, will they continue to be sold in conjunction with selected provider products?

A194: See response to Q175.

Q195: Does your current provider require waivers to be signed to track face to face (or virtual) meetings?

A195: We are currently not meeting with employees virtually, this will discuss when we launch our next opening phase of our department.

Q196: Does your current provider offer modified guaranteed issue underwriting?

A196: Current products are guaranteed issue on an evergreen basis. We expect future products to operate on the same basis.

Q197: Are retirees covered under your current provider plans?

A197: See response to Q60.

Q198: On the provided census, what is the difference in coverage between the following tabs:

- **VOL LIFE**
- **VOL BEN**
- **VOL BEN 2**

A198: Vol Life is current MetLife supplemental life plan. This is NOT out for bid; this is purely informational only for prospective benefit administrators.

Vol Ben = elections on current Trustmark plans

Vol Ben 2 = elections on current Voya plans

Q199: Are these the same products/provider but on different tabs? Does each tab represent a different provider?

A199: See response to Q198.

Q200: On page 7 under Patents, Copyrights, and Royalties, can you provide clarification on what constitutes as "materials suitable for copyright or patent." Specifically, who would own all the advertising and marketing materials that a provide creates or develops for any insurance products – the provide or the District?

A200: This may be negotiated post award. If the creation is made on behalf of the District, the District will own the works created.

Q201: On pg. 9 item E under Insurance Requirements, is the District requiring coverage of $10 million per occurrence?

A201: **A response to this question will be provided in a future Addendum.**

Q202: On page 15, item g. under Section 5 – Minimum Qualifications Requirements, are you looking for the provider to pay for a District hired onsite staff? Or would you prefer the provider to provide the onsite staff?

A202: M-DCPS is seeking for the vendor to identify, hire and pay for the onsite staff.

Q203: On page 16, item p. under Section 5 – Minimum Qualification Requirements, can you please explain in detail what you mean by paying 100% of product commission to licensed insurance agent(s)? How are these agent(s) determined?

A203: See response to Q181.

Q204: Do you have a sample of past/current performance guarantees you could share?

A204: See Tab 4c of Attachment A and Section IV Tab 6 of Attachment B for the performance guarantees that are being requested as part of these future services / products.

Q205: In Attachment B, Tab 10a, in the cell labeled "Employee previously eligible (aka late entrants)", if Washington National was to win this bid, would any M-DCPS employee who applied for previous coverage with Trustmark or Voya, be considered as a late entrant or would this only apply to employees who have been offered Washington National initially and then enrolled later?

A205: There should be no late entrants on new product offerings – brand new open enrollment to all eligible.

Q206: How will the voluntary products be enrolled? On the selected provider enrollment platform? If not, can you please provide details of how the products are expected to be enrolled?

A206: Primary enrollment method will be self-service. If the current pandemic situation subsides, then M-DCPS may consider additional enrollment methods.

Q207: Requirement d. below asks for three reference letters. Are these letters to be submitted as separate documents, in addition to filling out the Exhibit 6, Proposer Experience Forms?
From RFP:
d) Three (3) reference letters from organizations; Three (3) must be of comparable size and complexity to M-DCPS as indicated in Attachment A, Tab 5a Section II, Question 18 and Attachment B, Tab 7, Section I, Question 22. This must be documented on Exhibit 6, Proposer Experience Form, whereby each Proposer uses one form per reference. DO NOT include work/services performed for M-DCPS or M-DCPS employees as reference.

A207: As stated in the RFP solicitation, reference letters must be documented on Exhibit 6, Proposer Experience Form, whereby each Proposer uses one form per reference. Separate reference letters are not required.

Q208: For the Benefits Administration/Enrollment component, please confirm this RFP is for full benefits administration and enrollment for all products that Miami-Dade County School provides in the Flex Benefits plan, including Medical, Dental, Life, Disability etc., as well as the products quoted in this RFP, Accident, Critical Illness and Universal Life and that it applies to all Actives and Retirees.

A208: Confirm.

Q209: For the Voluntary Benefits component of this RFP please confirm that this RFP is for Accident, Critical Illness and Universal Life for all Actives and Retirees.

A209: Yes, but see response to Q60 for further information on coverage for retirees.

Q210: Please confirm that all existing enrollments of the Accident, Critical Illness and Universal Life programs will transfer to the winning carrier(s) and all existing carriers will cease future quoting and access to all Actives and Retirees.

A210: See response to Q175.

Q211: The RFP questionnaires request that proposers review and provide a redline of the Sample Agreement. The Questionnaires also include a separate "Agreement Tab" in which carriers are asked to review the attached Agreement, state whether we agree on a section-by-section basis and, where we are not in agreement, provide any proposed revisions. Given these requirements in the "Agreement Tab", can you confirm that proposers are not required to also separately redline the Sample Agreement? Alternately, if you would also like proposers to redline the Sample Agreement, can you provide it in an editable Word format so that we can easily provide any redlines?

A211: Proposers are not required to redline the Sample Agreement. Proposers should clearly state with specificity any contract provisions which they propose to deviate on Attachment A and/or Attachment B, as applicable.

Q212: Regarding Exhibit 17, if awarded the business, we would not have access to student records and would not be providing web-based programs for educational purposes. Can you confirm your understanding that sections 5, regarding FERPA, and 6, regarding COPPA, would not be applicable?

A212: If student records are not shared and students are not utilizing web-based programs then the portion of Section 5 FERPA pertaining to student information is not applicable and Section 6 COPPA would not apply. The last two sentences of Section 5 apply if any data is shared.

Q213: Regarding question 45j. on the Tab 6 of Attachment B, can M-DCPS explain how it understands the terms Parent Company, Subsidiary, and the term "financial responsibility?"

A213: **A response to this question will be provided in a future Addendum.**

Q214: Does SECTION 7.8 - SMALL/MICRO, MINORITY/WOMEN-OWNED, AND VETERAN BUSINESS ENTERPRISE PROGRAMS apply only to respondents who are certified as one of the diverse classifications?

A214: Yes, as certified through M-DCPS Office of Economic Opportunity. http://oeo.dadeschools.net/#!/fullWidth/273

Q215: Please confirm this entire proposal packet can be submitted electronically based on Section 6.1, and that physical copies are not required.

A215: See response to Q23.

Q216: Given the current national health and safety concerns around the COVID 19 virus, our workforce transitioned working from home. Are you willing to accept electronic signatures and waive the notary requirement?

A216: See response to Q23.

Q217: There is a large difference in the enrollment for some of the Critical Age/Cancer products outlined in Attachment B – Table 4a as compared to the census file. Why is there a large difference in enrollment in Attachment B – Table 4a as compared to the census file? Which enrollment information is accurate – Table 4a in Attachment B or the census file? If the enrollment in Attachment B - Table 4a is more accurate, please update the census file based on actual number of plan participants for Critical Health Events, Critical Illness, Critical Illness with Cancer, Cancer.

	Attachment B – Table 4a	Census file
Critical Health Events	**1782**	**1852**
Critical Illness	**6633 Trustmark, 458 Voya**	**508 (Critical Illness only)**
Critical Illness with Cancer	**not indicated**	**2895**
Cancer	**1621**	**1210**
Total	**10,494**	**6465**

A217: In the original Table 4a, the 6,633 Trustmark number was labeled as subscribers / households enrolled when, in fact, it represents members enrolled. (Other data in this table is correct.) The census files that were enclosed with the RFP are the latest subscriber enrollments from the current carriers and should be used for subscriber enrollment.

Q218: If at all possible, please add zip code and gender information to the Vol Ben census tab.

A218: We are unable at this time to collect and provide this information. However, see response to Q12 which describes the new census that is being provided on all eligibles. We expect that bidders may be able to utilize this new data to assist with addressing this specific request.

Q219: Are we being asked to save original issue age for current Critical Illness issue age product?

A219: No, operating on new issue age, no grandfathering.

Q220: The current Critical Illness and Cancer plan products with Trustmark are issue age while the current Critical Illness plan with Voya is Attained Age. Is the intent of this RFP to replace both the current Trustmark plans and current Voya plan with just one Critical Illness Issue Age product?

A220: M-DCPS is seeking 1 Critical Illness plan with cancer coverage embedded. Rates should be based on attained ages not original issue ages.

Q221: There are currently four different Critical Illness rate schedules for the current Trustmark Critical Illness & Cancer coverage plans (ie Critical Health Events, Critical Illness, Critical Illness with Cancer, Cancer only). Please confirm if the intent of this RFP to quote one set of rates for a single Critical Illness plan that includes cancer coverage as outlined in Attachment B – Table 9a & 9b, and eliminate the current Cancer only, Critical Illness only plans?

A221: Yes, 1 new Critical Illness plan with cancer coverage included.

Q222: If possible, please provide the last 3 to 5 years of experience for each of the current Accident and Critical Illness plans:

- **Average number of lives by year**

- **Earned premium by year**
- **Paid and incurred claims by year**
- **Historical claim count by year**
- **Have there been any changes to rates in past 3 to 5 years? If so, please advise when rates last changed and by what percent the rates changed**

A222: See census files and Tabs 4a and 4b for above information that is available. Claim data is not available at this time.

Q223: To ensure an effective Underwriting process, please provide the commission percentages for each of the products that are currently in-force with Trustmark:

- **Accident**
- **Critical Illness**
- **Critical Illness with Cancer**
- **Critical Health Events**
- **Cancer**

A223: The below information was provided as part of the original RFP and has now been updated to include commissions paid in 2019 and through Nov 9, 2020:

Premium/Commissions		2019	2019	2020 to date	2020 to date
PRODUCT	PROVIDER	Premium	Commission	Premium	Amount
LIFE	Trustmark	5,796,705.94	629,038.79	4,374,402.30	384,454.81
Accident	Trustmark	2,969,918.41	261,384.91	2,240,940.95	151,588.68
CRIT ILL/CANCER/COMBO	Trustmark	2,064,134.05	567,339.95	1,518,990.86	62,234.07
CRITICAL HEALTHEVENTS	Trustmark	973,465.02		773,738.45	
		11,804,223.42	1,457,763.65	8,908,072.56	598,277.56

Q224: To ensure an effective Underwriting process, please provide the commission percentages for each of the products that are currently in-force with Voya:

- **Critical Illness**
- **UL**

A224: The below information was provided as part of the original RFP and has now been updated to include commissions paid in 2019 and through Nov 9, 2020:

Premium/Commissions		2019	2019	2020 to date	2020 to date
PRODUCT	PROVIDER	Premium	Commission	Premium	Amount
Universal Life	Voya	962,201.10	53,115.95	1,081,608.84	43,123.10
Critical Illness w/o Cancer	Voya	23,723.48	2,401.56	22,796.16	1,959.98
Critical Illness with Cancer C	Voya	190,567.04	19,382.89	154,035.00	16,551.43
		1,176,491.62	74,900.40	1,258,440.00	61,634.51

Q225: Do any Unions within M-DCPS have the discretionary authority to modify RFP decisions made by the Insurance Evaluation Committee and School Board? If so, please provide details.

A225: No.

Q226: In reference to the enrollment process information included in Attachment B, Voluntary Benefits Questionnaire, line 45 (copy and paste below) ---please provide additional clarity around how this process works?

- **Please confirm if only the winning benefit admin vendor will be providing onsite benefit counselors and not counselors from another vendor. If this is not correct, please describe in more detail how this will work, how they will be paid, etc.?**
- **Can the employee enroll via the call center, on-line?**

A226: The vendors for the Voluntary Benefits would be handling the counselors.
The employees can enroll for the Voluntary Benefits via a call center or on-line.

Q227: How is the enrollment conducted today? Counselors (field/call center), Electronic etc.? Onsite enrollment counselors who are employed by Ben Admin provider - it is the expectation that this practice will continue. Note Ben Admin RFP is running concurrent with this RFP

A227: The School Board will continue to seek different ways of communication and education, while supporting some methods more than other for specific groups of employees.

Q228: Who is the current vendor?

A228: Depends on service, but Fringe Benefits Management (FBMC) is primary benefits administration provider and TASC provides FSA administration.

Q229: How long has the incumbent vendor been providing services?

A229: Since 1985 for FBMC.

Q230: What is the role of the current vendor (TASC and FBMC) in the County's benefits administration?

A230: The current role is to support the services included in this RFP.

Q231: How many fulltime onsite staff does the County have to provide benefits services?

A231: The services included in this RFP are not provided by School Board employees.

Q232: Are the names listed in https://mdcps.fbmcbenefits.com/home-fte/benefits-team-fte (Alma Martinez, Pooshpa Doobay, Diany Dulcio, Lorna Gray, Carmen Losada and Audrey Toste) currently working full-time onsite to provide these services?

A232: Onsite.

Q233: Can you disclose these staffs' annual compensation, so we have a better understanding of the cost to provide these services?

A233: The School Board does not have this information.

Q234: What is the reason for the issuance of this RFP, in lieu of providing a contract extension to continue using the incumbent consulting firm?

A234: The School Board is always seeking the opportunity of improving our services and evaluating the opportunity in the market, so releasing a RFP provides this opportunity.

Q235: Will the incumbent vendors (TASC and FBMC) be eligible to bid for this RFP?

A235: Yes.

Q236: Can you please provide a description of the services provided by the SAP HRIS system?

A236: These are internal processes not being included in this RFP.

Q237: Upon review of RFP Exhibit 10 page 42, section G:
Is this how the current program is being administered today?
a. If yes, who is performing data entry?
b. Is data entry a manual process? "data entry in the M-DCPS SAP HRIS system"
c. Would county accept and consider a technology solution to interface directly with M-DCPS SAP HRIS system?

A237: a: Onsite staff provided by FBMC
b: Manual
c: No

Q238: What has been the current activity with respect to onsite communication and benefit fairs for the employees during COVID?

A238: As a result of the pandemic, the School Board is currently conducting educational sessions via the different available virtual tools.

Q239: For Post COVID in person meetings/benefits fairs chosen vendor to attend,
a. Please provide the number of meetings and frequency per year.
b. Please provide anticipated dates of meetings in 2022.
c. Please provide us details on number of locations and details of the locations where the meetings are expected to be held.

A239: a. Minimum six a year but not limited.
b.Not yet determined.
c.Not yet determined.

Q240: Are there any prominent secondary languages that may be helpful regarding the communication capacity of benefits to all eligible employees?

A240: Spanish and Haitian Kreyol

Q241: What specific languages does the County expect the onsite staff to be fluent in?

A241: English, preference is bilingual Spanish and/or Haitian Kreyol.

Q242: Is there any EBO company participating in the current contract? If yes, please provide the name, brief description of services, and percentage or dollar amount of their annual fee?

A242: The current awarded vendors are not certified minority vendors.

Q243: To help facilitate EBO participation, could you provide us a list of attendees that participated in the pre-proposal conference on 2/16?

A243: Please refer to attached Pre-Proposal Attendee list.

Q244: Can we can contact the County's OEO department to learn more about the MBE contacting goals, while observing the "Cone of Silence" mentioned in Section 1, Page 3 of the RFP?

A244: Yes, please contact M-DCPS Office of Economic Opportunity:
http://oeo.dadeschools.net/#!/fullWidth/273. The Cone of Silence applies to information discussed regarding the RFP solicitation and not a proposer's eligibility as an MBE/SBE business.

Q245: How is the County handling benefits enrollment today with your employees? Is a technology solution currently being used?

A245: For active benefits eligible employees they enroll online via the SAP enrollment application.

Q246: Is the County currently using an outside source for your payroll system? If so, which vendor?

A246: No.

Q247: Is it possible for you to provide the employee census (Gender, Date of Birth, Salary, occupation, and zip-code) information and participation products for the plan-holders?

A247: See two voluntary benefit census files (reference Q198) that were included with this RFP for the demographic data that is available. Although all the data requested here may not be included in the voluntary benefit census tabs, we suggest you refer to the new files "FT Q&A" and "PT Q&A" for such data on the broader eligible population. See responses to Q12 and Q66 for further information.

Q248: For the inforce carriers in place, could you provide us a copy of

a. All product and carrier names,
b. Summary plan description (SPDs)/certificate of coverage for each,
c. benefit booklets for each of the plans,
d. participation in each plan.
e. Original Effective date of each plan/product

A248: The majority of this information is contained in Attachment B, in appropriately labeled tabs.

Q249: On M-DCPS website (https://mdcps.fbmcbenefits.com/home-fte/benefits-team-fte), we noticed duplication of products, like, Metlife and ARAG for Legal and Delta Dental and United Healthcare for Dental. To help provide maximum efficiency for the County and the opportunity to offset Benefits Administration system cost, would the County be willing to assign all broker of records commissions to successful vendors?

A249: The offering of these benefits are not included in this RFP.

Q250: Can you please identify any existing coverages the County would like to retain in the new contract and the percentage commission each product is generating?

A250: See responses to Q175 and Q181.

Q251: In RFP Exhibit 10, page 43, requirements section P, it states, "Agree to pay 100% of product commissions to licensed insurance agent(s) designated by M-DCPS"

a. Can you describe how this is being implemented currently?
b. Can you please provide the names of the entities receiving this commission?
c. Does the County have specific agents working now, and is it expected successful vendor will need to retain and pay those agents?
d. If yes, can you disclose name of agents and commission % payment arrangement?

A251: Today M-DCPS' benefit administrator has also placed voluntary benefits and is retaining commissions as an offset to their administration fees. See response to Q181 for description as to how M-DCPS wishes to structure this arrangement in the future.

Q252: We typically retain 100% of commissions to pay our enrollment personnel either a salary or per diem fee. Is this arrangement acceptable?

A252: See response to Q181.

Q253: What forms of communication are currently provided to the employees and retirees (Print, email, IVR, intranet/internet, employee self-service)?

A253: The forms currently being provided are included in the Attachment A posted as part of this RFP.

Q254: What is the future expectation of frequency and type of communications to participants moving forward?

A254: The School Board will continue with the current communication strategy, but always willing to discuss additional communication strategies.

Q255: Have any surveys been conducted to obtain feedback on the lines of coverage? If yes, please provide a summary of the feedback received.

A255: Yes.

Q256: What has been the Pre-COVID activity with respect to onsite communication and benefit fairs for the employees?

A256: As a result of the pandemic, the School Board is currently conducting educational sessions via the different available virtual tools.

Q257: Instruction to Proposers, Section II.B. states: "When filling out the proposal form, Proposers are required to complete proposal in ink." Is the "proposal form" the same as the Proposal Acknowledgement? Does the reference to ink mean that you require an original signature on form?

A257: See response to Q23. In addition, the "proposal form" refers to any document submitted in relation to this RFP as such: 1. The use of pencil is prohibited and 2. All changes must be crossed out and initialed in ink.

Q258: Is any Performance Security going to be required? If so, what form will it take?

A258: No.

Q259: The Instruction to Proposers indicate that Level 2 background screening requirements will apply if Proposer has access to or control of school funds. Do you expect that the Proposer will be required to meet Level 2 background screening requirements?

A259: **A response to this question will be provided in a future Addendum.**

Q260: The Instruction to Proposers seems to indicate the Proposer will be subject to Board policies, which may be accessed at: http://www.neola.com/miamidade-fl/. This link does not appear to work. Please provide a correct link.

A260: The correct link is: https://go.boarddocs.com/fl/sbmd/Board.nsf/goto?open&id=BK6KU84FFE01

Q261: Instruction to Proposers, Section XXVII states in part: "By submitting a Response, the Proposer agrees to be bound to and execute the corresponding Agreement for this solicitation. The Proposer may request clarification and submit comments concerning the corresponding Agreement for Board's consideration. Only comments and proposed revisions included within the Response will be considered by the Board. This does not constitute an agreement to proposed revisions." The RFP also makes it clear in several places that a proposal cannot be withdrawn within 120 days from the date due. Question: If the Board does not agree to a proposed revision to the corresponding Agreement, will the Proposer be permitted to withdraw its proposal under those circumstances?

A261: The Board will be presented with a recommendation from the Selection Committee to move forward with contract negotiations. After Board approval, contract negotiations will commence, at which point

proposed contract revisions, deviations and/or exceptions will be negotiated. Should negotiations be unsuccessful, an agreement will not be executed between M-DCPS and the awarded firm.

Q262: The Requirements for FSA and COBRA Call Centers includes the ability to support multiple languages. Please expand upon the actual languages that are required.

A262: English, Spanish and Haitian Kreyol, at minimum.

Q263: Section 6 – Submission Requirements indicates that the Proposer must complete, sign and submit Exhibits 1 through 20. Exhibit 17 (Proposed Contract Agreement Draft) contains blanks and is not "signature ready" to be executed as a final binding agreement. Please clarify whether or not Proposer is required to sign and submit the Proposed Contract Agreement Draft with its Proposal.

A263: See response to Q132.

Q264: For FSA and COBRA services, are there any required goals regarding the use of subcontractors who are Small/Micro, Minority/Women and Veteran Enterprises?

A264: See M-DCPS RFP cover memo which describes request in this regard, as well as scorecard weighting for inclusion of such providers in proposed services.

Q265: Will requested revisions to the Insurance Requirements be considered if submitted as part of a Proposal?

A265: **A response to this question will be provided in a future Addendum.**

Q266: Proposer will not be retaining any new subcontractors specifically for this contract. All subcontractors are already in place and service Proposer's entire client base. These specific subcontractors will be required in order to perform certain aspects of the services, and it is not practical for individual clients to have input into which subcontractors we use. Will the School Board consider removing the requirement that any subcontractor must first be approved by the Board? Would it be acceptable to modify that requirement so that the Proposer only has the obligation to inform the Board of all subcontractors who are used and/or replaced, along with relevant information about those subcontractors?

A266: **A response to this question will be provided in a future Addendum.**

Q267: It appears the Board is seeking an indemnity for all claims resulting from or incidental to the Awarded Proposer's performance under the Agreement. Will the Board consider adding clarifying language that the indemnity will only apply to the extent that the Awarded Proposer was negligent, failed to comply with applicable law, breached or failed to comply with obligations under the agreement, etc.? The intent of this clarification would be to clarify that the Awarded Proposer would not be liable merely for performing the services.

A267: **A response to this question will be provided in a future Addendum.**

Q268: 4a.57 Your firm's staff must complete annual/semi annual HIPAA compliance certification courses and provide proof of completion to M-DCPS. Please clarify whether this means training that is to be taken by all our staff who have access to, and handles, PHI? Or are these specific courses designed to be taken by IT staff who are responsible for our Information Security and Privacy policies and systems?

A268: Yes.

Q269: 4a.68-73 MDCPS may seek to conduct system verifications. Please explain what is meant by "conduct system verifications." Will review of screen shots be sufficient or will actual access to the bidder's systems be required?

A269: Screen shots and supporting documentation will suffice for such a review.

Q270: Does M-DPSS plan to continue the process of paper enrollment election forms? How many paper forms were completed in 2020?

A270: The School Board will continue to offer online enrollment via the SAP application for active full time employee and seeking the opportunity of offering alternative enrollment platforms for our retirees.

Q271: Some years there may be a separate annual enrollment in the Spring for Voluntary Benefits of Accident, Critical Illness and Universal Life. Does M-DPSS plan to combine these Annual Enrollment windows if the selected vendor can support that process?

A271: The School Board is always seeking the best way of providing our employees the enrollment opportunity, so further discussion could occur.

Q272: How many system administrators from Miami Dade would need training and access to the selected vendor's system?

A272: Minimum ten School Board staffer will need vendor system training.

Q273: How many Dependent Verification events occurred in 2020? Please confirm for which of the populations this would be in scope.

A273: We aligned our dependent verification initiative to our annual open enrollment but have an ongoing initiative with every encounter.

Q274: What SSO connections are in place today that would need to be supported by the selected vendor?

A274: **A response to this question will be provided in a future Addendum.**

Q275: How many union employees will be included in the selected vendor's system?

A275: None.

Q276: Will ongoing communication with Miami Dade be with a centralized team, or decentralized across the individual schools/districts?

A276: The communication is to be disseminated throughout our District to all employees but the team is centralized in the Office of Risk and Benefits Management.

Q277: Are statistics available for what the volume looked like for member questions in 2020?

- **Annual Call Total:**
- **Total Annual Minutes:**
- **Annual Enrollment Call Total & Minutes:**

A277: These stats are not available at this time.

Q278: How many different Annual Enrollment windows were hosted in 2020? When did these occur?

A278: One, November 2, 2020- December 8, 2020

Q279: Please confirm the support needed for ACA Compliance; which populations are considered in scope for this RFP from an ACA 1095 form generation and IRS Transmittal? Are there any variable-hour employees that need status tracking? Will the selected vendor need to complete this reporting for the 2021 plan year, or would these services start as of 1/1/22? How many FEINs are used for reporting purposes?

A279: ACA support services are not part of this RFP.

Q280: If Active Employees are not being stored in the selected vendor's system, but COBRA is in scope, please detail the data flow process so the selected vendor is able to manage that service. In addition, if ACA is in scope for this population, will Miami Dade send the needed data to the selected vendor to properly complete ACA Reporting?

A280: See response to Q279 for ACA support. For COBRA, M-DCPS will pass data on those initially eligible and then expect COBRA vendor to maintain data/ eligibility moving forward, as well as premium collection and remittance to M-DCPS and/or plan carriers.

Q281: How many 1095 forms were produced in 2020?

A281: N/A – see response to Q279.

Q282: Please confirm all benefits that require Evidence of Insurability.

A282: Disability, and life insurance purchase outside the initial eligibility period.

Q283: Do you have any employees that are enrolled in both Active and Retiree benefits? If so, please describe where this record will be stored if Actives and Retirees are housed in different platforms.

A283: If an employee return to an active status from retirement, they may maintain some active benefits as a retiree until their benefits become active under the active status.

Q284: Can you provide a benefits guide?

A284: The information can be found at https://mdcps.fbmcbenefits.com/

Q285: Please provide samples for all printed materials. Are you open to our best practices on delivering these letters?

A285: See Attachment A, bottom of Tabs 5a and 5b for descriptions of materials needed. Samples are unavailable at this time.

Q286: Please provide instructions for supplying exceptions to Exhibit 17.

A286: See response to Q132.

Q287: Attachment A includes a request for "standard forms;" please confirm the definition of "standard forms."

A287: This refers to "off-the-shelf" examples of what M-DCPS could expect to receive for such items as management reports, enrollment forms, etc.

Q288: It is noted within Tab 1 - Read Me First that support for the production of Active/Leave enrollment kits is requested >= 2022 from the new administrator however benefits administration will continue in SAP. Please describe your strategic goal for the separation of these services as opposed to benefits administration and fulfillment services being delivered from one service provider.

A288: Active and Leave data will remain in M-DCPS SAP system. Benefit administration provider will assist in other areas outlined in RFP, including onsite staff and production and distribution of plan information and enrollment material.

Q289: Please describe the factors driving the request to administer part-time employees separately from the remainder of the active population. What is your desired employee experience for employees with changes in eligibility (e.g., full time to part time or part time to full time)?

A289: Data for part-time employees is not housed in M-DCPS SAP system, therefore administration of this population is handled (and will continue so) on a separate system/ process.

Q290: Is M-DCPS open to best practice recommendations for the transition of services for Retirees and Part-Time employees as it relates to the incumbent provider conducting AE in the current system and transferring elections to the new system for 1/1/2022. With the timing described, please confirm the intended use for the new system beginning 10/1/2021 and also confirm the first direct billing cycle to be supported from the new system (e.g., October 2021 or January 2022).

A290: Yes , M-DCPS is open to discussing new practices for this population. Goal is to have enrollment system built and tested by 10/1/21 to support open enrollment in the Fall of 2021 for 2022 benefits.

Q291: Please supply the census files referenced in Tab 2 - Current State.

A291: Census files are available from M-DCPS Procurement - please contact vflores@dadeschools.net for these files

Q292: Please confirm where documentation can be located related specific to the Retiree Incentive Plan (including eligibility requirements, plan design and method of payment).

A292: The eligibility is determined by MDCPS, stored in SAP and in the current TPA Retiree system.

Q293: Please describe the Prescription Drug coverage provided to Post 65 retirees. Do you file for Retiree Drug Subsidy and/or have an Employer Group Waiver Plan.

A293: The information can be found at https://mdcps.fbmcbenefits.com/

Q294: Specific to QMCSO, are you seeking support for the administration of previously qualified orders or order qualification as well? If the latter, please confirm the typical number of orders qualified monthly.

A294: No these are administered internally.

Q295: Support is requested for the administration of Direct Billing for active employees on leave. Please describe your desired employee experience understanding benefits administration support for this population is excluded from scope (e.g., how would coverage changes, deduction amounts, changes in status (i.e., return to work) occur).

A295: Benefits administration support for leave employees is in scope.

Q296: Carrier Premium Remittance services are requested for Active employees on leave. Please describe the integrations that would support this process understanding benefits administration will continue in SAP.

A296: The premium for Active and Leave employees are remitted by SAP therefore these services are not needed from the new TPA.

Q297: Please confirm that "split enrollments and billing" for retirees refers to the administration of families with one or more family members not enrolled in Medicare and one or more family members Medicare enrolled.

A297: Confirmed.

Q298: Please describe how the Health Insurance Subsidy is delivered to retirees (e.g., applied to benefits premiums, separate payments, etc.). Also, please confirm how subsidy is determined for this purpose (e.g., provide on an eligibility file, calculation support requested, other). If calculation support is requested, please describe the data available and formula used to calculate.

A298: The Health Insurance Subsidy is determined by the number of years the employee worked in an eligible position and its communicated to the retiree by the Retirement Office. The file would be to confirm the enrollment.

Q299: Please confirm the populations included on the master data (eligibility) interface and type of data included.

A299: Please review Attachments A and B, Tab 1 of each, to determine the populations included.

Q300: Please confirm the purpose of the bi-weekly payroll interface (stated in Tab 4b as incoming to the administrator rather than from the administrator to the payroll system).

A300: The active employee information is only store in SAP, so MDCPS provides the files to the vendors, and the administrator does not provide the file.

Q301: Employee Support/Contact Center support is requested. Please confirm the populations to be included in this service, specifically as it relates to the active employees with benefits administered in SAP.

A301: Active full- and part-time, plus those on Leave.

Q302: Is M-DCPS open to alternative service delivery models with support delivered virtually? Would a virtual model disqualify a bidder from consideration?

A302: 4 to 9 full-time Benefits Specialists onsite at M-DCPS offices in downtown Miami (final number to be determined as part of this process) have been requested.

Q303: It is noted that M-DCPS does not provide a file for COBRA. Please describe how the COBRA administrator would receive notification of initial enrollment in a COBRA eligible plan and how qualified life events for populations with benefits administration in SAP will be supplied.

A303: See response to Q280.

Q304: The Banking section of the FSACOBRA tab is duplicative of the Retiree and Part-Time tab. Was this intentional, or are revisions to the RFP template required to address questions M-DCPS has specific to COBRA services?

A304: Question 108 on Tab 4f should read What bank(s) does your firm use for spending account and COBRA premium deposits? The bank must be an approved public depository as determined by the Florida Department of Financial Services.

Q305: Please confirm your desired dependent verification support for Active populations understanding benefits administration is to continue in SAP.

A305: The administration is to identify who is pending submission of proof, communicate it to the employee, collect, verify , flag dependent in the system, and if not, terminate the coverage.

Q306: Please describe the closed loop payroll processing support requested as it relates to Retirees and the parties with which integration would be required to support.

A306: The retiree payroll processing is related to the FRS deductions handled by the State and process by the TPA.

Q307: Please confirm if separate and unique resources are required for Actives, Retirees/Part-time employees, FSA, and Voluntary benefits. Can resources support multiple service areas?

A307: How future services are intended to be delivered are fully outlined in Attachment A.

Q308: For the Retiree return-to-work scenario, please confirm that Retiree/employee has a gap in coverage but dependents are eligible for continuous coverage in the retiree benefits until the retiree/employee is eligible for active benefits at which time both parties would transition to active benefits.

A308: Yes.

Q309: It is understood that an integration with FRS is requested for retiree benefit deductions. The Retiree Pricing tab notes M-DCPS is considering how Cigna plans will be treated, please confirm the alternatives being explored (e.g., multiple payment methods for an individual retiree). Why is different treatment being considered for the Cigna plans?

A309: The Cigna Plans are sponsored School Board Plans and these are offered in a self-insured platform, so premium needs to be remitted back to the School Board.

Q310a: Please confirm the party responsible for final Appeals determinations.

A310a: School Board.

A310b: **Please confirm the difference between Part Time BEFL employees (noted as having benefits administered in Benefit Align) from the part-time employees to be administered from the new benefits administration system.**

A310b: They are the same, BEFL are the pay codes identifying the part-time employees.

Q311: Please describe, current and future state, how full-time employee eligibility will be determined including monitoring of part-time employees who may gain eligibility as a full time employee.

A311: The eligibility is determined by the system and driven by the Labor Contract.

Q312: Is support requested for the determination of retirement eligibility? If yes, describe the data elements that will be provided via the HRIS file in support of this calculation. Further, please provide a sample calculation (e.g. age + years of service, no rounding).

A312: Retiree eligibility is determined by the information in the system and identified by the onsite TPA staff when via the report.

Q313: Do you offer subsidy for the purposes of Retiree Contributions? If yes, is the subsidy included in the rates that will be provided to the benefits administrator or is calculation support requested (e.g. application of subsidy based on membership in specific employment status, subsidy cap applies, etc.)?

A313: The subsidy is not included in the rate.

Q314: Please describe your process for determining Medicare Enrollment (e.g. assumed based on age, notification from carrier/individual due to Disability, VDSA, other).

A314: On a monthly basis the current Third Party Administrator identifying individuals turning 65 and a “Happy Birthday” package is mailed.

Q315: Please describe how it is determined that a retiree will pay for benefits via Pension Payroll vs. Direct Bill.

A315: The retiree is provided the choice of payment, and they elect.

Q316: Please provide the current voluntary benefits plan certificates, rates and census as defined in Attachment B.

A316: Please contact the M-DCPS procurement office at vflores@dadeschools.net to obtain copies of these documents.

Q317: Please confirm the total number of lives on which we should base our bid for voluntary plans. Please confirm this by population type as well (Active, Part-Time, Retirees, Dependents).

A317: Please reference Attachment A, especially Tab 5a, b, c and d for assumptions on enrollment for which pricing should be based.

Q318: Please confirm how the M-DCPS File Layout referenced in Attachment B, Tab 15 will be leveraged ongoing.

A318: M-DCPS file layout cannot be changed.

Q319: Section 6 notes that bidders can submit electronically via Periscope S2G or DemandStar -OR- a paper proposal, mailed (which also must be accompanied by an electronic submission).

a. There are numerous requirements throughout the RFP for wet signatures and notarization, which conflict with the instruction outlined above that we have the option to submit the response solely electronically. Is a paper proposal mandatory for all bidders (as the signature and notarization requirements imply), or may we disregard the requirements for wet signatures and notarization when submitting solely electronically?

b. If a solely electronic submission is permissible, please share any requirements for electronic signatures.

c. Please also confirm that notarization is not applicable in this scenario.

d. If a solely electronic submission is permissible, please confirm we only have to submit our response in one of the listed systems, not both.

A319: See response to Q23.

Q320: By what date can we expect to receive responses to any clarifying questions we submit?

A320: See response to Q24.

Q321: Would M-DPSS consider extending the RFP deadline in light of the Q&A timing shifting and inability to access several attachments within the originally issued RFP?

A321: See response to Q25.

Q322: From which system will the vendor receive active employee enrollment and eligibility data?

A322: SAP

Q323: To which systems will we be sending information?

A323: This question is too vague to address.

Q324: Would the voluntary benefits for which you are out to bid apply to just the limited population in play at this time, or would it apply to all 46,000 members?

A324: All 46,000 members.

Q325: Is it M-DCPS's intention to continue the administration of active employee benefits within SAP, not the new benefits administration platform from which Part Time, Retiree, COBRA and FSA will be administered? Please provide a “yes” or “no” response.

A325: Yes.

Q326: For the purposes of active employees, please confirm it is M-DCP's intention that the bidders are supplying support services for the administration of benefits in SAP only, not technology for the administration of active benefits. Please note "confirmed" or "not confirmed." If not confirmed, please elaborate.

A326: The School Board wishes to continue the administration of the benefits for active employee in the SAP system.

Q327: Please confirm how the COBRA administrator will receive employee indicative data, enrollment and dependent information to support the distribution of COBRA Initial Rights notices for active employees and employees on leave of absence.

A327: The COBRA Administrator would receive information from the SAP system.

Q328: Please confirm it is intended that COBRA Initial Rights Notices will be distributed to PT and Retiree populations enrolling in benefits in the new Benefits Administration system.

A328: Confirmed.

Q329: Please confirm how the COBRA administrator will receive employee indicative data, enrollment, dependent and qualifying event data to support qualifying events administration.

A329: The COBRA Administrator would receive information from the SAP system via a report.

Q330: Please confirm the populations that will be included on the FSA Weekly Master Data file.

A330: All Active and Leave employees.

Q331: Please confirm which populations and benefit deductions (potentially FSA only) are to be included on the biweekly payroll file.

A331: All employees that have elected to participate in these accounts.

Q332: Please confirm which populations and benefit deductions are to be included on the monthly admin fee payroll file.

A332: The active and leave employees, plus all deductions for all benefits.

Q333: Please describe how the retiree benefits administration will be notified of employees newly retiring.

A333: The vendor would have access to running reports from the SAP system identifying who has retired and then determine who is eligible for benefits.

Q334: Do you have a plan document (s) that you can share for the FSA Plan?

A334: Source information on this plan is what is contained in the RFP and that which is described on the M-DCPS benefits website (see response to Q34 for this link)

Q335: Do you currently have incoming claim feeds set up with your Medical/RX, Dental, and Vision vendors into the Health Care FSA Account assisting with adjudication or autopayments?

A335: No.

Q336: What is the auto substantiation rate for the FSA Debit Card today?

A336: This information is not available at this time.

Q337: How many participants currently have their card turned off or temporally inactive due to that participant not providing substantiation?

A337: This information is not available at this time.

Q338: Will there be any substantial benefit plan design changes over the next 24 months that could impact enrollments in the FSA? If so, please describe.

A338: No substantial benefit changes are anticipated; however, this can change due to union negotiations at any time.

Q339: How many years have you been offering an FSA plan?

A339: Since 1985.

Q340: Does the current FSA plan with TASC have the Dependent Care FSA purse available on the debit card?

A340: No.

Q341: What was the amount of forfeitures realized in the FSA plan for 2019 and 2020?

A341: This data is not available at this time.

Q342: Please confirm the current FSA funding process. Is this the desired funding process you are looking for with a new FSA vendor?

A342: See response to Q32.

Q343: Are the requested full-time enrollment resources for year-round, or just annual enrollment and other specific dates?

A343: Year round

Q344: Are the RFP terms negotiable (for example termination for convenience, broad indemnity, insurance coverage requirements)? Would the request to negotiate certain requirements or providing redlines eliminate a provider from bidding on the opportunity?

A344: By submitting a Response, the Proposer agrees to be bound to and execute the corresponding Agreement for this solicitation. The Proposer may request clarification and submit comments concerning the corresponding Agreement for Board's consideration. Only comments and proposed revisions included within the Response will be considered by the Board. This does not constitute an agreement to proposed revisions. The Board will be presented with a recommendation from the Selection Committee to move forward with contract negotiations. After Board approval, contract negotiations will commence, at which point proposed contract revisions, deviations and/or exceptions will be negotiated. Should negotiations be unsuccessful, an agreement will not be executed between M-DCPS and the awarded firm.

Q345: Regarding Exhibit 13, how does it apply to this bid? Our understanding is that it would only apply to personal property. Please advise.

A345: Local preference is applied within the RFP process as follows: Upon scoring by the Selection Committee, should scores be equivalent between a local and a non-local vendor the local vendor would obtain an additional 5 points to their total score. Please refer to Board Policy 6320.05 for more information.