

General Questions

P.2, 1.3: In lieu of this RFP being subject to the provisions or rules of purchasing division, are there any other provisions or rules that this RFP is subject to that we need to be aware of? **Yes. Refer to Exhibit I in the RFP.**

P. 9, 2.2: *Existing contracts are between these companies and the Agency, and will not be re-bid until an administrator is chosen through this RFP. They will continue through Plan Year 2018 (June 30, 2018).* **Current contracts will continue through 6/30/2018. Existing and future contracts are between the companies and the Fringe benefits Manager vendor.**

Can you elaborate on this? **Current contracts will continue through 6/30/2018. Existing and future contracts are between the companies and the Fringe benefits Manager vendor.**

Will contracting with carriers be permitted to occur while contracting with the selected vendor is happening or does the vendor contract have to be signed first? Simultaneous contracting is preferred to allow for more efficient implementation timelines. **Simultaneous contracting is preferred to allow for more efficient implementation timelines.**

P. 9, 2.2: *Payroll for employees of State agencies and colleges and universities are handled through the State of West Virginia OASIS*

Please provide more information on OASIS. What does OASIS do for PEIA? **Process Payroll**

Is it a payroll system supporting multiple groups? **Approximately 100 State agencies.**

If so, how many groups? **Approximately 100 State agencies.**

Are all OASIS groups on their own payroll file or separate? **One file**

P. 9, 2.2: *The vendor will be required to interface with all of these systems*

How many agencies will a payroll integration be needed for? **Oasis as well as payroll files from each participating agency.**

Does each agency have it's own payroll file? If not, how many payroll integration files are in scope? **Yes**

Can you provide a list of all the payroll systems (including versions) for which an integration will be necessary? **Not available. Oasis as well as payroll files from each participating agency.**

Many of our current state government customers choose not to pursue payroll integration for agencies under 500 employees. Is payroll integration requested/ required for agencies under 500 employees? **Yes**

Where would contribution files come from for financial benefits like FSA/ HSA/DCFSA (e.g., 1 centralized file or each agency's payroll system) **Oasis as well as payroll files from each participating agency.**

How many contribution files would we expect to receive and from which systems for which agencies? **Oasis as well as payroll files from each participating agency.**

Are all agencies on the same payroll deduction schedule? **No**

What is the current financial arrangement for each benefit? What, if any, changes to the current financial arrangement are being requested? **Not available**

Is it preferred for COBRA Administration to be provided by the carrier for each COBRA eligible benefit type or 1 COBRA Administrator for all COBRA-eligible benefits? **One**

Can we establish an SSO from PEIA's medical enrollment platform to the Benefitfocus platform? **Vendor works with payroll locations.**

Implementation Timeline: the current timeline allows for less than 90 days for implementation. Will PEIA allow adjustments to timeline or Open Enrollment start date to allow for 120 days for implementation? **Contract award is anticipated by January 1, 2017 with the plan year starting July 1, 2017**

Is there ever more than 1 OE period in a calendar year? **NO.**

Scope of Work- Section 3.1

P.10, Section 3.1.a- Receipt of policyholder funds from participating agencies, including the State of West Virginia, universities and colleges, county boards of education and local government agencies.

Can you confirm if the scope of this request is in reference to direct billing to policyholders or in reference to consolidated billing between agencies, PEIA and vendors? **Between agencies and cafeteria plan vendor.**

P. 10, Section 3.2.1.a

Is hard copy enrollment a requirement or is the "must" requirement in this item for online enrollment? Refer to 3.2.1a. **Must offer both.**

How many paper forms were received during the following periods?

Calendar Year	Open Enrollment	Off-Cycle
2015	Not Available	Not Available

2016	Not Available	Not Available
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P.10, Section 3.1.2.c: How many confirmation statements were provided during the following periods?

Calendar Year	Open Enrollment	Off-Cycle
2015	Not Available	Not Available
2016	Not Available	Not Available

P. 12, Section 3.2.3.a: *Prepare a one page flyer for PEIA's Shopper's Guide promoting Mountaineer Flexible Benefit plans and a one page flyer to be included in PEIA's retirement packets.*

Is this the flyer that is currently being used for this purpose?

http://www.peia.wv.gov/news_center/Documents/PEIA%20SUPPLEMENTAL%20Shoppers%20Guide%202016-2017%20for%20web.pdf. **Refer to page 45 in the PEIA's Shopper's Guide on the PEIA website. www.peia.com.**

How many times per year will a flyer like this need to be produced? **Once.**

Will 1 flyer for all populations suffice? If not, how many different versions will be needed?
Yes.

P. 12, Section 3.2.3.b: Can you please provide a copy of the current administrative manual? Will more than 1 version be necessary? **Refer to Exhibit J in the RFP. One for Active employees and one for Retirees.**

P. 12, Section 3.2.3.c: Can you please provide a copy of the current reference manual? Will more than 1 version be necessary? **Refer to Exhibit J in the RFP. One for Active employees and one for Retirees.**

P. 12, In addition to the reference manual for benefit coordinators, will a reference manual for employees also be needed? If so, is this a good example of the current requirement?
<http://www.peia.wv.gov/Partners/Documents/18WV%20Actives%20Final%20Book.pdf>
Refer to Exhibit J in the RFP. One for Active employees and one for Retirees.

P. 12, Section 3.2.3.h: What is the cadence for the benefit coordinator training sessions throughout the plan year? **Approximately 16. There are also 7 Open Enrollment Benefit Fairs.**

P.12, Section 3.2.3: Is year-round on-site representation requested or on-site representation during OE only? **Refer to the RFP section 3.2.9.**

P.14, Section 3.2.5.a: How many bank accounts will there be for CDH accounts and for COBRA (1 account for all agencies or multiple for each agency)? Same questions for consolidated billing bank accounts. **One account**

P. 15, Section 3.2.6.a: Can you please provide a description of the data currently reviewed in the audit? **Not available.**

P.15, Section 3.2.8.a: Prepare and distribute the required certificates of prior creditable coverage pursuant to the Health Insurance Portability and Accountability Act (HIPAA) to individuals terminating participation under any applicable benefit. These certificates are no longer required by law as of 2015. Is this still a requirement? **No.**

Please provide telephonic enrollment counts during the following periods:

Calendar Year	Open Enrollment-Active	Open Enrollment-Retiree	Off-Cycle-Active	Off-Cycle-Retiree
2015	Not Available	Not Available	Not Available	Not Available
2016	Not Available	Not Available	Not Available	Not Available

General Plan Design Questions

Please provide booklets, SPDs, or certificates available describing the current plan designs. Plan documents are necessary to properly understand the current plan provisions and details. **Refer to the referenced web-site in Exhibit J.**

Additionally, please confirm: What, if any, changes to the current plan designs are being requested? **None.**

Have there been any plan design changes over the past 60 months? If so, please provide the details and dates of any change(s). If the rates were impacted, please provide details. **There have been plan benefit changes with the Vendor rebidding the different plans. The current plans and benefits for actives and retirees can be found on the web-site referenced in Exhibit J.**

Census and Population Questions

Please provide the counts for:

Eligible employees across all benefit types, broken out by actives vs retirees

Eligible employees per benefit type, broken out by actives vs retirees

Please provide a depersonalized census file (a file with a row for each enrolled member that does not contain any identifying information on the members) for each benefit type. A single file for all benefits or multiple files for each benefit are both fine. Please notate the "run date" and descriptions of any abbreviations in any of the provided fields (such as "Status", "Coverage Option", etc.) and the below key information.

Gender

Date of birth

Zip code

State of Residence

Work State

Benefit Type

Plan election (*if multiple plans are offered*)

Tier/ Coverage Level (*e.g., Employee Only, Employee +1, Family, etc.*)

Active/Retired status

Salaried/Hourly status

Population identifier *(if distinct groups have distinct rates and/or plan design, e.g. executive, administrative, hourly, etc.)*

Salary

Job Title

Request for the following:

Total number of agencies in PEIA listed by name

Total employees for each individual agency

Total flexible benefit eligible employees at each agency

Of the above agencies, which are participating in flex benefits program today

Provide. **The above information is not available. Refer to the attached Current Enrollment Summary showing the employee, retiree, and dependent participants.**

Rates and Cost Questions

P. 29, 4.1.7: If we change cost calculations, would that be an amendment? For example, if additional benefits were added later, resulting in a change of calculation, is this standard business or amendment? **Benefit changes could result in calculation changes**

Are the current rates on a 12-month billing cycle? If not, what is the billing cycle? **Yes.**

Are the prior years' rates (rate history) available? Are the renewal rates available? **Refer to Exhibit J in the RFP. Current rates are in the Active and Retiree booklets on the referenced web-site.**

What is the current commission level included in the rates? **Provide your best offer.**

What level of commissions should be included in the proposed rates? **Provide your best offer.**

Are there any pass-through or explicit administrative charges included in the current and historical rates? **No.**

Is a recent billing invoice available including the lives and current rates? **No**

If core/buy-up, please describe the billing process. (Disability) **Not Available.**

Does PEIA expect to pay premiums within a 30 day grace period? **If PEIA were to pay premiums, we would expect to make payment within 30 days.**

Dental Experience Questions

Please provide the last 36 months of paid premium and paid claim experience on a monthly basis with the following items split by plan (and by population if applicable):

Premium (or premium equivalents if ASO arrangement)

Paid claim dollars split by PPO, Premier, and Out-of-Network **Not Available.**

Claim counts or EOBs **Not Available.**

Eligible Employee Lives **Not Available.**

Enrolled Employee Lives **Not Available.**

Dependent Lives **Not Available.**

Confirm the percentage of claims paid In-Network (if unable to split actual paid claim amounts by In-Network and Out-of-Network). **Not Available.**

Dental Plan Structure Questions

What is the Out-of-Network percentile or is it based on maximum allowable cost? **Not Available.**

If Out-of-Network claims are paid based on maximum allowable cost, is the maximum allowable cost for Premier network dentists based on the PPO fee schedule or the Premier fee schedule? **Not Available.**

Are fee schedules the same for general practitioners and specialists? **Not Available.**

Are discounts in the Delta Dental PPO and the Delta Dental Premier networks extended to non-covered services? **Not Available.**

Disability Experience Questions

Last 5 years of premium and paid claims experience broken out by class/plan

Premium

Average Monthly Volume

Average Monthly Eligible Lives

Average Monthly Enrolled Lives

Monthly Rates or Administrative Fees

Claims Paid

Claim Count

Paid and Incurred Analysis (LTD)

Open and Closed detailed claim listing for the experience period that includes the following:

Date of Disability

Benefit Start Date

Termination Date

Date of Birth or Age at Disability

Gender

Monthly Gross Benefit

Monthly Net Benefit

Accumulated Benefits Paid (LTD)

Social Security Status (LTD)

Claim Status (active, terminated, pending, etc.) (LTD)

Class/Plan indicator

Reserve For Each Open Claim (LTD)

PERs/STRs offset amounts.

Above information is not available.

Current Enrollment Summary Employee and Dependents

BENEFITS	TYPE	EMPLOYEE PARTICIPANTS				DEPENDENTS		
		ACTIVE	RETIRES	COBRA	ACTIVE	RETIRES	COBRA	
DENTAL		25,102	13,967	85	28,147	6,042	39	
DISABILITY	LONG-TERM	4,426	N/A	N/A				
	SHORT-TERM	3,283	N/A	N/A				
HEARING		1,983	2,822	7	1,857	1,022		
VISION PLAN		24,143	12,961	76	29,034	5,986	42	
FLEXIBLE SPENDING ACCOUNTS	DEPENDENT	433	N/A	0				
	MEDICAL	4,673	N/A	3				
	LIMITED-USE	52	N/A	0				
HEALTH SAVING ACCOUNT		251	N/A	N/A				
LEGAL PLAN		1,345	363	N/A	1,027	212		