Queinsty Commissioners

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Regular Session March 28, 2023

The Board of County Commissioners, Guernsey County, Ohio, met in regular session on the above date with the following members in attendance: David L. Wilson, Ernest R. Gardner, Jr., and Jackson L. Marlin.

A motion was made by Commissioner Gardner, duly seconded by Commissioner Marlin, to advertise the following:

## **INVITATION TO BID**

Sealed proposal for **REQUEST FOR QUOTE (RFQ) FOR BENEFIT PLAN CONSULTING SERVICES**, Guernsey County, Ohio, will be received by the Guernsey County Commissioners, 627 Wheeling Ave., Suite 300, Cambridge, Ohio, 43725 until 9:00 a.m. local time, April 13<sup>th</sup>, 2023, and then publicly opened and read. The content specifications for the RFQ are on file at The Guernsey County Auditor's Office, Attention Kathy Doutt, 627 Wheeling Ave., Suite 203, Cambridge, Ohio, 43725 or may be downloaded from the Guernsey County web page: Guernseycounty.org

The Guernsey County Commissioners reserve the right to waive any formalities or to reject any and all bids.

Advertisement dates to be March 31st and April 7th, 2023.

All vote yea.

Board of County Commissioners

Guernsey County, Ohio

David L. Wilson, President

ckson L. Martin, Vice President

Ernest R. Gardner, Jr., Commissioner

Approved by

Lindsey Donehue-Angler

Prosecuting Attorney

# **Guernsey County Health Plan**

Request for Quote (RFQ) for Health Insurance Consulting Services

Issued: March 28, 2023

Response Due: April 13, 2023

#### **Objective**

- 4.

The purpose of this Request for Quote (RFQ) is to select a health insurance consultant to develop The Guernsey County Health Insurance Plan (hereinafter referred to as The Employer) from a market bid through implementation and evaluation, commencing on or about July 1, 2023. The goal is for the Employer's Health Insurance Committee to recommend the most qualified firm to the Guernsey County Board of Commissioners for approval.

#### Response Submission Information

Five (5) copies of your submittal must be received by 9:00 AM, April 13, 2023, at:

Guernsey County Commissioners Michele Long, Clerk 627 Wheeling Avenue, Suite 300 Cambridge, Ohio 43725-2251 Phone Number: 740-432-9201 Fax Number: 740-432-9359

Email: mlong@guemseycounty.org

Email: kdoutt@guemseycounty.org

#### **General Notes**

A. Questions will not be answered over the phone or in person. Responding firms must submit all questions in writing to:

Guernsey County Auditor Bookkeeping Dept. Kathy Doutt, Insurance Clerk 627 Wheeling Avenue, Suite 203 Cambridge, Ohio 43725-2251 Phone Number: (740) 432-9224 Fax Number: (740) 439-6265

Fax or e-mail is acceptable. Questions received before (April 10, 2023) will be answered and distributed via e-mail to all invited to submit a proposal.

- B. The Employer's Health Insurance Committee reserves the right to recommend to the Guernsey County Commissioners to waive any informality, irregularity or failure to conform to the instructions contained in this request.
- C. The Employer's Health Insurance Committee at its sole discretion may request additional information, site visits or interviews.
- D. Agent of Record letters will be issued as necessary to the successful respondent.
- E. The Employer's Health Insurance Committee reserves the right to recommend to the Guernsey County Commissioners to reject all responses to the Request for Quotes.

- F. The Employer's Health Insurance Committee reserves the right to request replacement of servicing representative at any time.
- G. Proposals must contain fixed amounts for all services, (e.g., \$2,500, etc...). All fee proposals shall be fixed for three (3) years from the date of the award or July 1, 2023, whichever is later, and may not be changed or withdrawn except by permission of the Guernsey County Commissioners.
- H. The Employer will only do business with a health insurance consultant that complies with all local, state and federal requirements regarding non-discriminatory hiring, fair employment practices and wage and hour standards. Moreover, the health insurance consultant must comply with all local, state, and federal laws, rules, and regulations applicable to the subject matter of this contract, and any contract proposed by a health insurance consultant must in all respects comply with such laws, rules, and regulations.
- I. Any contract entered into between the Employer and the successful respondent is subject to all local, state and federal laws, rules and regulations now in effect or hereinafter enacted, and if any of these at any time require the termination of the contract, the contract shall terminate and each party shall be left in the position it then occupies, retaining any benefit it has received prior to the time of such termination.

#### **Current Policy Information**

The following is a summary of the Employer's current insurance policies.

| Policy                          | Carrier   | Limits       | Deductible /<br>Retention | Expiration<br>Date |
|---------------------------------|---|--------------|---------------------------|--------------------|
| Medical                         | Self-Insured, Administered by Medical Benefits (MedBen) | See attached | See Attached              | 12/31/2023         |
| Dental                          | Self-Insured<br>Administered by<br>Delta Dental         | See attached | See attached              | 12/31/2024         |
| Vision                          | VSP   | See attached | See attached              | 12/31/2026         |
| Life & Long-<br>Term Disability | The Standard Life<br>Insurance<br>Company               | See attached | See attached              | 6/30/2024          |

It is expected that the need for all these types of coverage will continue and that the Employer will engage a single health insurance consultant to secure and manage all of these policies.

## **Expected Services**

#### 1. Renewal Services

- A. Licensed Agents must meet monthly with the Employer's Health Insurance Committee and staff.
- B. Market, manage and negotiate annual renewal of coverage from carriers for Medical, Prescription Drug, Dental, Life and Vision coverage. Preparation of all necessary bid specifications, evaluation of bids, coverage and premium analysis, and recommendation of stop loss carriers. It is the Employer's expectation that all policies will be secured through an open and competitive process.
- C. Conduct analysis of and make recommendations to the Employer's Health Insurance Committee regarding the Employer's insurance programs. The goal of these analyses and recommendations is to provide the highest value benefit plan at the most reasonable cost.
- D. Provide an annual review of each policy 60 days before the renewal date. At a minimum this review should consider coverage levels, gaps in coverage, health risk abstention and reduction programs, deductible and retention levels, and market conditions.

- E. Thoroughly review the carrier-provided policies and endorsements for accuracy and conformance with specifications and negotiated coverage. Secure any needed changes and provide a complete corrected copy of the policy within 30 days of inception.
- F. Provide certificates of insurance within 24 hours of the request.
- G. Provide loss control recommendations and assistance in implementation of those recommendations for each policy.
- H. Shall provide a working budget sheet complete with premium calculations for each employee/dependent. This includes establishing the premium to be charged and communicating to employees.
- I. Shall conduct employee meetings for each Department to review renewal and changes.
- J. Shall ensure all Federally required employee notifications, employee booklets with Summary Benefit Descriptions are provided.
- K. Shall obtain IBNR figures in accordance with Standard Society of Actuaries and/or American Academy of Actuaries.

#### 2. Account Services

- A. Provide two (2) dedicated Life and Health Insurance Agents with each having at least 20 years' experience (10 of those years serving self-insured clients). Must be available to all covered employees to assist with claim issues, benefit plan inquiries, interpretation of Explanation of Benefit (EOB) forms, etc...
- B. Shall provide dedicated account service representative with a minimum of 10 years of experience working with self-funded employer plans in the public sector. Must have experience in working directly with carriers and providers on claim matters.
- C. Prepare monthly meeting reports and review with the Health Insurance Committee Plan expenditures, participants, services provided, claims and utilization. Organize monthly meetings and set the printed agenda. Provide and distribute meeting minutes to insurance committee members.
- D. Shall coordinate and facilitate annual open enrollment meetings to ensure employees understand the benefit plans offered and shall prepare communication materials and review enrollment materials with members.
- E. Keep the Employer appraised of and in compliance with industry changes, practices, costs and trends at the local, regional, and national levels and the impact on the public and private sectors, including but not limited to the Patient Protection and Affordable Care Act (ACA), (HIPAA), Consolidated Omnibus Budget Reconciliation Act (COBRA) and other federal or state laws.

- F. Shall work diligently with the Employer to participate in collective bargaining for negotiation of employee benefits.
- G. Shall assist in the reconciliation of the monthly bills to ensure that the employees are on the correct plan, the premium for each employee is correct, the employee additions and changes are being billed properly and terminated employees are removed from the bill.
- H. Must maintain and have access to five (5) years employer's health insurance files and/or data.

## 3. Wellness Program

Assist in the development, implementation, and on-going management of an Employee Wellness Program. The program goal shall be to create a culture of health and wellness by educating employees to consciously make healthy lifestyle choices that will reduce healthcare costs, improve morale and productivity, while decreasing absenteeism and turnover.

## Submittal Requirements

Submittals should be bound and organized in accordance with paragraphs A-H below. The information requested in each paragraph should be clearly delineated within the proposal.

- A. Identify the organizational structure of the team that will be providing services to the Employer.
  - a. Identify each individual's specific role and reporting relationships.
  - b. Provide information on the background and relevant experience of each team member.
- B. Provide data on the Agency providing service.
  - a. History of the Agency, licensed agents and account service representatives.
  - b. Scope of services provided.
  - c. Number of employees.
- C. Provide five (5) examples of similar public sector engagements. For each example provide:
  - a. Client name.

- b. Client information; contact name, phone, fax and e-mail.
- c. Summary of services provided. Provide information regarding how the client's insurance and budgetary needs were met.
- d. Team members who are assigned to service the referenced client.
- D. Provide evidence of a minimum of \$1,000,000 in Error and Omissions Insurance.
- E. Describe in detail the Agency's approach to servicing the Employer's Health Insurance Committee.
  - a. Process for assessing the Employer's insurance needs.
  - b. Process for solving those needs.
  - c. Process for on-going management and servicing, including the integration of loss control and health insurance company services.
  - d. Quality control for all services provided.
- F. Fees to be charged for the expected services above.
- G. Certification that the marketing done on behalf of the Employer will be done in an open, honest, and competitive manner.
- H. Responses to Questionnaire.

#### **Evaluation Process and Criteria**

- A. The responses received by 9:00 AM, Thursday, April 13, 2023, will be opened at that time and later reviewed and ranked by the Guernsey County Commissioners and/or the Health Insurance Committee. The top two (2) or three (3) ranking firms will then be interviewed. If an agreement cannot be reached with the top-ranked firm, the Employer may, at its option, either enter into negotiations with the second-ranked firm or reject all responses and pursue other available options.
- B. Each submittal will be ranked for each of the six (6) topics using a 1 to 5 scale with 1 being the lowest score and 5 being the highest.

| Topic                               | Weight | Minimum<br>Possible | Maximum<br>Possible |
|-------------------------------------|--------|---------------------|---------------------|
| Team and Individual Qualifications  | 25     | 1                   | 5                   |
| Company Data                        | 5      | 1                   | 5                   |
| Similar Public Employer Engagements | 15     | 1                   | 5                   |
| Project Approach                    | 15     | 1                   | 5                   |
| Fees-for-Services                   | 15     | 1                   | 5                   |
| Responses to Questionnaire          | 25     | 1                   | 5                   |
| TOTALS                              | 100    | 6                   | 30                  |

### Interview Guidelines

- A. Interviews will be 30 minutes in length, with 20 minutes for the firm's presentation and 10 minutes reserved for questions.
- B. The day-to-day personnel who will be providing services should be an integral part of the presentation.
- C. Presentations should include the items identified in the submittal requirements with the greatest emphasis given to past similar engagements and processes for performing the work.

## Request for Qualifications Questionnaire

- 1.) Please describe the process your company uses to obtain competitive bids. Do you market to every carrier, or only a specific pool you have found competitive in the past?
- 2.) Does your company wait for renewal rates to go to market, or are you pro-active in searching for better plans/rates?
- 3.) Please describe the process by which your company negotiates with health care providers to provide the best coverage possible at the best price possible.
- 4.) Provide a list of the insurance providers with whom your company negotiates. Describe your working relationship with these providers?
- 5.) How will you ensure that the County will be provided continual, timely service and information beyond the initial honeymoon period? Will the County get the services that we are paying for over an extended time period?
- 6.) How will you and your staff communicate the reasons for increased costs to all persons (County Commissioners, Department Heads, Hourly Employees) covered by our insurance policies?
- 7.) Please describe what makes your company unique in consulting and providing health care coverage. What is it about your company that would be reason for us to contract with you?

The bid specifications contained within this document have been approved by the Guernsey County Board of Commissioners.