

**ARLINGTON COUNTY, VIRGINIA  
OFFICE OF THE PURCHASING AGENT**

**ADDENDUM NO. 1**

Arlington County RFP No. 22-HRD-RFP-338 for Comprehensive Medical, Dental, Prescription Drug Benefits, and Onsite Clinic for County Employees is amended as follows:

- ***THE COUNTY HAS RECEIVED THE FOLLOWING QUESTIONS IN RESPONSE TO THIS RFP. QUESTIONS AND RESPONSES ARE INCLUDED BELOW.***
1. Multiple Questions Received: Can you provide unlocked versions (or a password) for the AON technical response files, so that we can cut and paste the actual questions? In Attachment A, questions 3 & 4, 7-9, 11-14 in Section I “General Plan Information” are locked; questions 1-6 and 20-23 in Section VII “Renewal and Runout” are locked. Can we be provided an unlocked workbook? Some of the cells in the Excel documents (see below) are frozen or the pages are protected. Can you resend them in an unlocked format so that we can provide our responses in the correct rows? Attachment A, Questionnaire tab: Rows 9-15, 20-22, 25-37, 130-134, 163-16 Attachment A, Mandatory Requirements tab: Rows 12, 15, 20-22 Attachment F: Standard and Premium Plan Design sheets locked. We have encountered numerous cells in the workbooks that prevent us from entering answers. These problems affect our ability to access drop down lists and/or provide a text response/explanation. Would the County please provide workbooks without this strict level of protection? The issue is widespread in the Attachments A and F, and we fear we will encounter it in the other workbooks as our RFP response work progresses. Please provide unlocked versions of the medical and dental technical workbooks. Multiple explanation tabs and plan design tabs are entirely locked, and we are not able to complete the questions.  
**Response: See updated file attachments A and F**
  2. Question: In Task 6: Customer Services, are offerors expected to provide live customer service from 7:00 am to 7:00 pm in Hawaii and Alaska?  
**Response: Offer what extended hours you can for members in these locations**
  3. Question: In Task 4: Reporting/Analysis, can you please clarify what is meant by on-line reporting system? Additionally, what types of ad hoc reporting would the group be expecting to request?  
**Response: For on-line reporting we mean Real time access via an employer portal. We cannot define ad hoc at this time**
  4. Question: Can utilization of network Delta PPO, Delta Premier, and Non-Delta providers be provided by plan?  
**Response: Not available, base your proposal on the data provided**
  5. Question: Can updated claims experience through June 2021 by plan be provided?  
**Response: Please base your proposal on the data provided**

6. Question: Would Arlington County be interested in a comprehensive, fee-schedule based plan to save costs for its membership in addition to the two PPO plans?  
**Response: Not at this time**
7. Question: Can you confirm the current out of network reimbursement level? Attachment F, row 30 indicates MAC – is the Delta PPO or Delta Premier MAC? Line 57 indicates current Out of Network reimbursement is 85th percentile of UCR. Can you confirm current reimbursement for both plans?  
**Response: Current OON is MAC. We are asking for both MAC and 80th Percentile of UCR. The 85th percentile was an error.**
8. Question: Can claims dollars/utilization amounts be included on the dental provider disruption file? Please confirm the current dental ASO Fee and Budget Rates.  
**Response: No; please base your proposal on the data provided**
9. Question: Can you confirm current ASO fees / premium equivalent rates?  
**Response: No; please base your proposal on the data provided**
10. Question: Can a dental claim reprice file be provided? This enables a more accurate projections of discount and more aggressive guarantees.  
**Response: No; please base your proposal on the data provided**
11. Question: Can you confirm that the pharmacy claims file (discussed in the last tab of the Pharmacy Technical Workbook) is only provided for reference, and bidders do not have to provide a repricing on this file?  
**Response: The claims file provided is to support the bidder's underwriting. We are requesting estimated cost projections on the "RX-Pricing Projections" tab of the questionnaire, but not a formal repricing.**
12. Question: Please clarify if Dental OON reimbursement is based on MAC or the 85th Percentile UCR – There is conflicting information on this in the workbooks?  
**Response: Current OON is MAC. We are asking for both MAC and 80th Percentile of UCR. The 85th percentile was an error.**
13. Question: Can Offerors add supplemental pages to the Proposal Form if they need additional room for information in the "Trade Secrets or Proprietary Information" section?  
**Response: Yes; only if necessary.**
14. Question: Can you confirm that the single pdf file asked for in item 8 of the V. Proposal Requirements section only needs to consist of the 1. Executed Forms; 2. Mandatory Requirement response; and 3. Exceptions to the County's Non-Mandatory Contract terms and conditions, and that any supplemental files asked for in the workbooks (for example, the sample reporting package) should be included as separate files within a zipped file (and all uploaded to the County Vendor Registry)?  
**Response: Yes; that is correct. If you are including samples of 10 reports, that should be one file, not 10 separate files. If you are including samples of 12 communication flyers, those should be one file, not 12 separate files. Please use good sense in trying to limit the number of files while balancing file size and our need to be able identify samples and data.**

15. Question: Do the pharmacy formulary disruption, network disruption and Geo Access result files asked for in the Pharmacy Technical Workbook need to be returned only to the AON Contact (Blake Edwards) or do they need to be uploaded to the County Vendor Registry site?

**Response: Yes, please provide to Aon only**

16. Question: Can you please confirm that the dental disruption and geos access request result files (separate tabs in the Dental Technical Workbook) only need to be returned to hnapdmbx@aon.com mailbox, and do not need to be uploaded with our proposal response to the County Vendor Registry site?

**Response: Yes, please provide to Aon only**

17. Question: Regarding Attachment A – General Questions, if we are only bidding on the on-site clinic proposal, are we still required to answer all questions in the “Questionnaire” tab? a. If we are not required to answer all questions, for any questions that do not apply to us, should we leave the response cell blank? b. If we are required to answer all questions, for the questions that do not apply to us, is “Not applicable” an acceptable answer?

**Response: Yes, answer all questions to the best of your ability. If some do not apply to the clinic only quote indicate “not applicable to clinic” in the explanation column**

18. Question: In Attachment H on the “Clinic Operating Costs” tab, it lists 24 hours in the staffing section for APP and CMA. Please clarify whether you would like to decrease hours to 24 hours, or if this should actually say 32 hours instead of 24. 3. In the “Clinic Implementation Cost” Section and in the RFP- it is requested that the vendors quote a 32 hour a week health center. In the “Clinic Operating Costs” section it states 24 hours per week. Can you please confirm if we should quote, 24, 32 or 40 hours per week? In the “Clinic Implementation Cost” Section and in the RFP- it is requested that the vendors quote a 32 hour a week health center. In the “Clinic Operating Costs” section it states 24 hours per week. Can you please confirm if we should quote, 24, 32 or 40 hours per week?

**Response: The Clinic is open 32 hours; every aspect of operations and cost for the clinic should be based 32 hours.**

19. Question: What is the County’s pain points with the current health center program?

**Response: None.**

20. Question: Please provide details on the County’s Living Wage policy, including details on the required quarterly reporting to confirm compliance with the policy.

**Response: Please review the Standard Contract Terms, Exhibits E and F (beginning on page 56 of the RFP); You may also view the Living Wage FAQ on this webpage:**

**<https://budget.arlingtonva.us/purchasing>**

21. Question: Is the current staff expected to remain in place?

**Response: No.**

22. Question: Do the current staff have non-compete agreements in place?

**Response: Unknown; the County is not the employer.**

23. Question: Please provide an overview of the compensation and benefits package for the current staff, broken out by staff member.

**Response: Unknown, the County is not the employer.**

24. Question: Please provide a census file, including plan designations.  
**Response: Census file should be requested from Aon ([blake.edwards@aon.com](mailto:blake.edwards@aon.com)) as outlined in RFP**
25. Question: How many benefits-eligible employees are on the Kaiser plan? Of the Kaiser-benefits-eligible employees, what is the utilization of the health center?  
**Response: Kaiser is not part of this solicitation. Utilization by Kaiser members of the onsite clinic is not known.**
26. Question: Can you confirm the current out of network reimbursement levels for the standard and premium dental plans?  
**Response: Current OON is MAC. The County is requesting both MAC and 80th Percentile of UCR. The 85th percentile was an error.**
27. What out of network reimbursement levels should be included in the quote?  
**Response: Current OON is MAC. The County is requesting both MAC and 80th Percentile of UCR. The 85th percentile was an error.**
28. Question: Allergy Injections – Please confirm if “post vaccination monitoring” means that the first couple of rounds are completed at a specialist office then all remaining are completed at the health center?  
**Response: Post-vaccination monitoring means the patient remains in the clinic for 15-20 minutes after receiving allergy injections to make sure they don't have an adverse reaction.**
29. Question: Biometric Screening Events – Should this be quoted as a mass onsite event or through the health center?  
**Response: Through the onsite clinic; interested employees would be required to make a brief appointment during specific days to participate in a biometric screening event.**
30. Question: What is the current hourly rate of the NP and MA?  
**Response: Unknown, the County is not the employer.**
31. Question: In regard to the question below, can you confirm what the type of fraud that is of concern? Describe your organization's fraud management operations. Include information on how fraudulent activities are reported back to County and the frequency.  
**Response: The County is interested in all types of fraud as it relates to data security**
32. Question: Are you able to provide the most recent 12 months of medical claims with the following data elements? • Provider Tax ID • Provider Zip Code • Service Type (Inpatient/Outpatient/Professional) • Provider Name • Eligible Amount • Member Zip Code. Are you able to provide monthly medical claims for April, May, and June of 2021?  
**Response: Additional data elements are not available. Base your proposal on data provided**
33. Question: Are you able to provide your current plan service fees and credit amounts?  
**Response: Not available.**

34. Question: please confirm the following? RFP states mandatory requirement for clinic, experience with 8 employer organizations with 3500 employees each needed. Attachment A, Mandatory Requirements tab #4 states 5 employer organizations. #1) Can you please confirm the number (8 or 5) and please confirm #2) does each of the organizations have to have 3500 employees using that clinic? Example, ABC company employs 10,000. One of their onsite clinic locations has 2,000 employees using it. Does the clinic location with 2000 employees count towards the mandatory requirement?  
**Response: Please use Attachment A Mandatory Requirements for Clinic Experience. 5 employers. For #2) above, the organization does not need to have 3,500 employees using the clinic. In the example above, the clinic with 2,000 employees using it does count.**
35. Question: Please confirm that the disruption and GEO access files that the RFP requests be sent directly to the AON email address HNAPDMBX@AON.com do not also need to be included in the proposal uploaded to Vendor Registry.  
**Response: Yes, please provide to Aon only**
36. Question: Are there limits for file size or format when uploading the proposal to Vendor Registry?  
**Response: Yes, 800 megabytes.**
37. Question: It's our understanding that an RFP for the same services was issued on September 29, 2020. It was RFP # 21-HRD-RFP-141. What was the outcome of that RFP process? Why has the County released another RFP for the same services so soon? • What RFP requirements have changed between this current RFP (22-HRD-RFP-338) and the previous RFP (# 21-HRD-RFP-141)?  
**Response: That RFP process was cancelled. The significant change to the RFP is the ability to offer an onsite clinic on a stand-alone basis under a separate contract. In this RFP, onsite clinic services are not required to be bundled with medical plan services.**
38. Question: Can you please confirm that dental benefit services will commence on July 1, 2022? The main RFP document contains a few references to services commencing on July 1, 2021.  
**Response: All benefits in this RFP commence on July 1, 2022.**
39. Question: How are Dental claims funded today?  
**Response: Dental claims are funded on a monthly basis via ACH payment to the vendor.**
40. Question: Does the County fund an account for claims payment with an imprest balance?  
**Response: For dental claims, the County funds an imprest account. For medical claims, also funded on a monthly basis, the vendor funds the imprest account.**
41. Question: What channels does the County typically use to communicate benefits information with employees (email, portal, print, etc.)?  
**Response: The County's intranet; email; Jellyvision's benefits selection platform.**
42. Question: Are there any communication or benefit education challenges they would like to address?  
**Response: None.**

43. Question: How does the County handle enrollment – online? telephonic? paper?  
**Response: The County uses its HRIS system, which has an online self-service function for enrollment. Retiree enrollment changes are accomplished via mail and email.**
44. Question: What is the technology platform used for employee enrollment in Dental benefits? Will employees have the opportunity to enroll in these benefits at the same time and on the same platform as Medical?  
**Response: The County's HRIS is used for medical and dental enrollment; enrollment for both medical and dental occurs during our Open Enrollment period in May.**
45. Will enrollment be a mandatory and active process (employees required to actively elect or decline benefits in order to have benefits the following year)?  
**Response: No. If the County changes plans, we will determine what the new equivalent plan is for each existing plan; the new equivalent plan will be the default enrollment for any enrolled employee who did not actively make a selection during Open Enrollment.**
46. Question: Are there any expected changes to your onsite event strategy in light of the COVID-19 pandemic?  
**Response: Open Enrollment events are done virtually; with virtual Q&A and webinars. While the pandemic continues onsite events will be limited and precautions will be made. However, this is potentially a ten-year contract; we expect onsite events to resume in the future.**
47. The questionnaire references ID cards. Do county employees currently receive ID cards for dental? If so, we would like to understand the current ID card fulfillment process. • Is the distribution of hard copy (paper) Member Identification Cards required for Dental benefits, or is an electronic version acceptable?  
**Response: Yes; member receive hard copy ID cards for dental typically within 10 business days of enrollment. Hard copy ID cards are required.**
48. With respect to Item 7 of the Contract Terms and Conditions, Item 14.E of the Contract Terms and Conditions and Item 16(iv) of the Contract Terms and Conditions, will the County agree to define subcontractors as those subcontractors hired exclusively to perform services related to the County's self-funded dental coverage?  
**Response: The County will not accept changes to Item 7 of its contract.**
49. Please provide updated monthly claims and enrollment through July 2021. Please provide the current ASO fee. What is the utilization by network tier? o % of the claims from PPO providers o % of claims from Premier providers o % of claims from Out of Network providers? We are seeking data for the most recent plan year as well as 5-year average.  
**Response: Please base your proposal on data provided**
50. Attachment F, Section IV, Question #12 states that the current out of network reimbursement level is the 85th percentile. In all other RFP files (such as Attachment G), it states that out of network claims are reimbursed as a MAC. Which is correct? Will you correct question #12? •  
**Response: Current OON is MAC. We are asking for both MAC and 80th Percentile of UCR. The 85th percentile was an error. Question #12 has been corrected in the updated file attachment**
51. Attachment F, Section VIII, Question #9 (a & b), requests funding for audits. It is not industry standard for Dental claims administered to reimburse all audit costs and not include in them in

the retention. Nor is it standard for Dental claims administrator to pay separately to cover travel costs for auditors. Is it your intent for an administrator of only Dental services to fund an implementation audit (one time), bi-annual audit (ongoing) and cover all travel costs? • Furthermore, Attachment G includes a request for Communication and Wellness credits. What is the County's priority: Audits, Communication or Wellness credits? Does the current Dental claims administrator provide all of these credits on an ongoing basis? •

**Response: Indicate the maximum level of credits or funding you will provide in all requested categories**

52. Attachment F, Section VIII, Question #9 (i), states the Dental claims administrator is responsible for 100% overpayments uncovered by an audit, plus interest. Section 32 (Audit) of the Contract Terms & Conditions makes a similar statement. Is this a requirement of the current contract with your current Dental claim's administrator? Under a self-funded arrangement, Dental plan benefits are the liability of the plan sponsor in a self-funded arrangement. • With respect to Item 36 of the Contract Terms and Conditions, it is our understanding that this provision does not apply to disputes specific to plan benefits (dental claims). Dental plan benefits are the liability of the plan sponsor in a self-funded arrangement. Does the County agree? •

**Response: Claims administrator should be responsible for 100% of the overpayments resulting from an error/oversight of the administrator. Arlington County does not accept revisions to Item 36 of its Standard Contract Terms and Conditions.**

53. Given the current national health and safety concerns around the COVID 19 virus, our workforce transitioned working from home. Are you willing to waive notary requirements on all required RFP forms/documents?

**Response: No; Notary requirements have not been waived.**

54. Attachment A, Questionnaire Tab – several of the cells are locked for editing and some drop downs are not working. Examples are lines 9-14, 20-22, 25-37, 130-134 and 163-166. • Attachment A, Mandatory Requirements Tab – several of the cells are locked for editing and some drop downs are not working. Examples are lines 12, 20,21, 24, 24 and 27-30. • Attachment F, Plan Design Tabs – both the Standard and Premium Plan Design tabs are locked for editing.

**Response: See updated file attachments A and F**

55. The RFP states that proposals must include all services related to delivering pre-Medicare medical benefits, prescription drug benefits, and vision benefits, as a bundle. Would you consider a proposal from an administrator of only Vision benefits and having a separate contract with a Vision benefits provider? The County could then “bundle” the benefits when employees enroll.

**Response: No, the vision is bundled with the medical**

The balance of the solicitation remains unchanged.

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**RETURN THIS PAGE, FULLY COMPLETED AND SIGNED, WITH YOUR PROPOSAL:**

**OFFEROR ACKNOWLEDGES RECEIPT OF ADDENDUM NUMBER 1.**

**FIRM NAME:** \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_