

ADDENDUM NO. __1__

BID NUMBER: ____305127____

BID TITLE: ____Stop Loss Insurances____

DEPARTMENT: ____Human Resources____

COMMODITY: ____Insurance____

DATE OF ADDENDUM: ____May 25, 2018____

BID DUE DATE: ____May 31, 2018____

BID DUE TIME: ____2:00 p.m., e.s.t.____

REASON: ANSWERS TO QUESTIONS

(SIGNED): _____(DATE): _____

(COMPANY): _____

Please sign one (1) copy of this page and return it with your bid to the Purchasing Department, Attn: D Keylon, 101 E. 11th Street, Suite G-13, Chattanooga, TN 37402.

Retain a copy for your file.

ADDENDUM NO. __1__

Bid 305127, Stop Loss Insurance

QUESTIONS AND ANSWERS:

Can you please provide the below?

- Census that includes cobra and retirees

Please see census key (obtained by request email to dmkeylon@chattanooga.gov as specified in bid) to filter needed groups from the BCBST Membership report. COBRA = 99 and retiree groups = 50 - 55 and UNTO.

- Percentage of police/fire employees covered under the medical plan

(Using Excel file obtained by request email to dmkeylon@chattanooga.gov as specified in bid) Please use key to filter these departments. They are 10 and 20.

- Confirmation of why renewal is showing 2911 lives but enrolled lives based on reports and census provided with the rfp are averaging 2127?

(Using report obtained by request email to dmkeylon@chattanooga.gov as specified in bid)

The BCBST membership listing report is complete. The membership by month report that was sent with the bid request did not include retiree groups. Please see update report which includes all retiree groups. (This report was available by e-mail request.)

END