

**ARLINGTON COUNTY, VIRGINIA
OFFICE OF THE PURCHASING AGENT
REQUEST FOR PROPOSALS NO. 22-DMF-RFP-505**

ADDENDUM NO. 1

Arlington County Request for Proposals No. **22-DMF-RFP-505** for Dependent Eligibility Audit services is amended as follows:

1. Section V. Proposal Requirements, number 1., General is **deleted** in its entirety and **replaced** with the following to remove the page limitations requirement:

“GENERAL

FAILURE TO SUBMIT A PROPOSAL WITH A FULLY COMPLETED PROPOSAL FORM USING THE PROPOSAL FORM PROVIDED IN THIS SOLICITATION MAY BE CAUSE FOR REJECTION OF THE PROPOSAL. THE PROPOSAL FORM MUST BE SIGNED BY A PERSON LEGALLY AUTHORIZED TO BIND THE OFFEROR. The Offeror’s proposal must address the Proposal Submittal Elements below, in the order listed.

Proposals and all documents related to this solicitation become the property of the County upon receipt.”

2. Section V. Proposal Requirements, Proposal Submittal Elements number 4 is **deleted** in its entirety and **replaced** with the following to revise the third bullet.

“EXPERIENCE AND QUALIFICATION OF FIRM AND PROJECT TEAM

The Offeror should demonstrate that it has the resources and capability to provide the services as described herein. At a minimum, Offerors should include the following information:

- Executive Summary: why your firm is the most qualified for this scope of work.
- Number of years your firm has performed the services stated in this scope of work.
- **At least two organizations for which your firm completed a similar scope of work with comparable volume to the chart referenced on page 9 of the RFP.** Include the following information for each agency/facility:
 - Entity Name
 - Entity Size
 - Point of contact name, phone number and email address
 - Description of services provided
 - Proposed number of days for completion and actual number of days for completion, including reason(s) for variances between the proposed schedule and actual schedule
- Management and project governance structure for this project. This should include the methods to ensure quality assurance and oversight for the project.
- Project Team Details:
 - Identify the project manager who will serve as the day-to-day lead throughout the duration of the implementation. Submit a detailed resume for this team member and describe why he or she is qualified to serve in this capacity. Provide representative resumes of sample personnel who will be assigned to the

project team and provide qualifications, area of expertise, and responsibilities in performing the scope of work.

- An organizational chart detailing the division of responsibility among the members of the team and subcontractors, if applicable.
- Assumptions for estimating the Offeror and County staff resources necessary to meet the needs of the project, including County staff and any subcontractor staff and hours.
- Format and fields needed to be provided by the County for the subscriber and dependent data.”

3. Section IV. Scope of Services, letter A. Qualifications, number 2. is deleted in its entirety and replaced with the following to revise the experience requirement:

“2. The Contractor should have experience providing dependent eligibility auditing services for at least two (2) employers with enrollment **of comparable volume to the chart referenced on page 9 of the RFP.**”

The following are answers to the questions received in response to the above-referenced RFP:

1. **Question:** Can you clarify whether the Contractor needs experience providing dependent eligibility verification auditing services to 2 or 3 employers with 10,000 – 20,000 insured dependents? 2. Is the County willing to entertain a reasonable cap on direct damages and a waiver of consequential damages in the Services Contract? 3. Is the County willing to limit its indemnity to third party claims? 4. Is the County willing to disclaim implicit warranties that do not apply to services (e.g., merchantability and fitness for a particular purpose)?

Answer: 1. Please refer to amendment no. 2 above. 2. Yes, the County will entertain a reasonable cap on direct damages and a waiver of consequential damages. 3. No, the County will not entertain limits to indemnity to third-party claims. 4. Yes, the County is willing to disclaim implicit warranties that do not apply to services.

2. **Question:** Section V. Proposal Requirements 1. General: The County states that our proposal “must not exceed the stated page limitations” - What are the specific page limitations for our proposal?

Answer: There are no page limitations for proposals, please reference amendment no. 1 above

3. **Question:** For the purposes of providing a savings and ROI estimate, would Arlington County be willing to provide its average annual cost per dependent?

Answer: This data is not available for all plans.

4. **Question:** For the medical and dental plans, what is the number of employees for each type of plan that are carrying one or more dependents on the plan?

Answer: Please review the chart below.

Plan Type	Subscribers with 1 or more dependents
Active employees	
Dental	1863
Medical	1690
Retirees	
Dental	921
Medical (Pre-65)	209
Medical (Medicare)*	524

5. **Question:** Does Arlington County want a redacted copy? Or just one copy that is not redacted and we note the proprietary and confidential information on the Proposal Form?

Answer: Please mark the proposal proprietary and confidential where applicable.

6. **Question:** Can the rest of the forms (outside of the Conflict of Interest Statement) be signed with an e-signature?

Answer: Yes.

7. **Question:** The conflict of interest form asks to be notarized. With this being electronic submission, does the signature need to be wet and notarized? Or do we just need to provide an e-signature?

Answer: The form should be notarized, and an e-signature will suffice.

8. **Question:** We have reviewed the RFP and are in the process of responding to it. Our team had some additional questions to respond accurately: Number of total enrolled Dependents How many employees have one or more dependents enrolled in health coverage? Number of new dependents on a monthly basis. Number of new dependents during OE

Answer: This data is not readily available. 2004. This data is not readily available. This data is not readily available.

9. **Question:** Are you considering adding a spousal carve out or surcharge?

Answer: No.

10. **Question:** Do you have a spousal carve out or surcharge?

Answer: No

11. **Question:** How do you conduct your open enrollment (Percentage of employees using web, and paper)?

Answer: 100% electronic.

12. **Question:** Average annual medial cost per dependent? (Typically, \$2,000 to \$5,000)?

Answer: This data is not readily available for all plans.

13. Question: Estimated percent of employees who speak Spanish?

Answer: This data is not available.

14. Question: Estimated percent of employees with web access

Answer: This data is unknown, but the County healthcare program is administered 100% electronic.

15. Question: Are retirees with dependents included in the audit?

Answer: The audit will include the dependents of the retirees.

16. Question: What are the total number of dependents that will be included in this audit?

Answer: The number of dependents for Dental, Medical and Retirees are included in the chart provided in the RFP. The same dependent may be included in the Dental and Medical and Retiree categories. We do not have the data readily available for the unique number of dependents.

17. Question: Are eligibility rules uniform across medical, dental, Medical (pre-65), Medical (Medicare), Cigna, kaiser, United Healthcare? (if not, please summarize the differences.)?

Answer: Eligibility for active employees and their dependents is the same for all plans (Cigna, Kaiser, Delta Dental). To be eligible for retiree coverage, the individual must begin receiving their pension benefits immediately following their retirement. Retirees who retired from the County before July 1, 2008 and did not continue their medical or dental insurance coverage at the time of retirement are not eligible to enroll themselves or their dependents in the County's plans.

18. Question: What is the number (single number) of employees with a covered dependent that will be included in this audit? This includes Medical, dental medical pre- 65 and medical (Medicare)?

Answer: Approximately 2,915. (2004 employee, 911 retirees) Yes.

19. Question: Will this audit include verifying the eligibility of dependents who have dental coverage, but do not also have medical coverage? • Will the audit include verifying the eligibility of the dependents covered in the fully-insured Kaiser medical plan and the two fully-insured Medicare Advantage Plans? • Will the audit include verifying the eligibility of all retirees who are covering at least one dependent? Or, does Arlington County only want the project to include those retirees with dependents under the age of 65 and not Medicare primary? • Based on the responses to the questions above, how many employees/retirees are covering at least one dependent (non-single contracts) and will be included in the project?

Answer: Yes. The audit will include those dependents covered by the fully-insured Kaiser plan. The audit will include only dependents of the Medicare Advantage Plans that are covered by one of the Medical or Dental plans. The audit will only cover the dependents of the retirees. The audit will cover all dependents covered by either the Dental or Medical plans. Please refer to answer number 18 above.

The balance of the solicitation remains unchanged.

Arlington County, Virginia

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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:** _____