

ADDENDUM NO: I

RFP 136078: Request for Proposals for Onsite Health Clinic
DEPARTMENT: Human Resources
REASON: Responses to All Questions as of 6/03/2016
DUE DATE: 4:00 p.m. EST 6/24/2016

PLEASE SIGN ONE (1) COPY OF ADDENDUM AND RETURN TO THE PURCHASING DEPARTMENT. RETAIN THE OTHER COPY FOR YOUR FILES.

Name

Company

**CITY OF CHATTANOOGA
PURCHASING DEPARTMENT
SHARON LEA
City Hall Suite G13
CHATTANOOGA, TN 37402
slea@chattanooga.gov**

TEL: (423) 643-7235

FAX: (423) 757-7244

Question Set #1:

1. Will the awarded vendor need to provide the x-ray equipment for the x-ray room as part of the RFP response?

No, the x-ray equipment in the clinic is owned by the company who leases the space and provides the service and this will continue. It is not part of this RFP and is only mentioned as it is a service that is offered to our employees.

Question Set #2:

Blood Draws and Lab Kits for DUI Testing

2. Will the vendor bill the City for the blood draw, lab kit and personnel associated with the 24/7 coverage of this service and then the City bills the TBI; or does the vendor bill the City for the 24/7 coverage of the service and bill the TBI independently for the lab kits and lab work? If the TBI is billed, will a separate contract be required.

The current vendor pays for these services and we are expecting that the cost of this service will be part of the total bid and not as a pass through charge. The TBI has no role in this bid. They provide the lab kits for the staff which are sent back to the TBI for processing. There are no lab charges involved, only the cost for the PRN staff. There are approximately 40 -50 lab draws per month.

3. Where are the after-hours DUI tests currently completed? Is there expectation for after-hours lab draws at the clinic; or will these be conducted at local hospitals?

The draws are performed wherever the CPD needs them to be done. Draws are normally performed at the jail, but may also be performed on the side of the road at a traffic stop, a road block, the hospital or the Police Service Center. They are not performed at the clinic.

Migration of Health Records including Occupational Health Records

4. Will the current vendor provide the new vendor with a standard format such as HL7 to migrate the records?

This will be determined if a new vendor is selected.

5. What format(s) or file types does the current vendor use in PHI record transfer?

This would be determined upon implementation.

6. Cooperation from the current vendor will be required to ensure migration of the data. Is this a reasonable expectation?

Yes.

7. Is the current vendor under a contractual agreement to cooperate with migration of data?

Yes.

8. What is the current vendor's contractual obligation and capability to transfer health data?

The current vendor's contract does require them to transfer health data.

9. Will the City be responsible for the cost to migrate the data from the current system to the new EMR including cost for development of any interfaces or integrations? If not, will the administrative cost of migration be factored into the new vendor fee schedule?

These costs should be factored into your proposal.

10. Will the current vendor provide the vendor respondents with a sample report to ensure the responder can meet the minimum requirements prior to the City issuing the award?

The City would like for the bidders to provide the reports that they are able to offer first. The City will work with the winning bidder on reporting requirements.

11. Can you provide a sample health data migration-mapping document from current vendor of PHI transfer?

This cannot be provided.

Minimum Qualification of FMCSA Medical Examiner

12. Does the City accept the NRCME (National Registry of Certified Medical Examiners) certification in lieu of FMCSA? The NRCME is a nationally recognized certification for DOT examination.

Yes

Staffing

13. Are CVs available for review for the current staff?

Please see position descriptions in Exhibit A.

14. Is the City satisfied with all current staff within the Occupational Medicine division? Yes, Does the City intend for the vendor to retain all Occupational Medicine staff or will changes in positions be expected?

We cannot determine if current staff would wish to change employer's. What provisions will be available in the event the City requests a change in an Occupational Medicine staff member after the staff has been hired? The City always has the right to ask for a change in providers.

15. Who is responsible for paying recruitment and retention fees for staff over the course of the contract? Does the City have a provision for paying the direct costs associated with these expenses?

The vendor is expected to be responsible for this and it should be reflected in your bid and not as a pass through charge. The City will not have a provision for paying any of these costs.

16. How does the City reimburse the vendor in the event a staff member is on leave or FMLA and backfill is required for the position?

The vendor is responsible for these costs.

17. Does the City have any rights to remove staff from the clinic – if so, is there a cure period prior to dismissal of individuals; who incurs the cost of the recruitment and severance in the event the City requests the removal of an individual staff member?

This would be determined on a case by case basis. The vendor is responsible for all personnel costs.

18. How are incremental salary increases handled? Does the City recognize a standard 3% cost of living or performance based raise. Should the vendor project these raises across the life of the contract?

The City does not have a role in how salary is handled. This should be determined by the vendor and considered as part of the proposal fee.

19. Is the vendor required to provide Mental Health Services? If so, what services are currently provided and what is the expectation for the new contract period?

No. This is not a request in the RFP.

20. Is 24/7 “on-call” a required or a preferred service?

It is not required.

21. Do you require an MA or other qualified staff member to accompany employees to Emergency Room visits as a part of the post-accident protocol?

No

Physical Therapy

22. Is there a requirement to provide Physical Therapy on site or at remote locations?

No

23. If so, what are the requirements?

Mental Health Services

24. Is there a requirement to provide mental health services on site or at remote locations?

See answer to question 19.

EMR

25. How many users within the City administrative office will require access to the EMR.

None for primary care.

26. Does the City expect that the vendor will utilize an occupational health EMR that can be accessed by various levels of managers to track the performance metrics? Or does the City prefer that the vendor provide paper reports for tracking of metrics as well as tracking of case management.

The City expects the vendor to maintain an Occ Health EMR which can be used for robust reporting needs.

Equipment

27. What equipment is currently in the occupational health clinic and what equipment will remain?

Please see Exhibit A, Clinic Medical Equipment.

28. Will the vendor be required to provide equipment for the occupational health clinic?

No

29. Is Imaging/X-ray currently available on site? If so, what tests are currently available on site and what is the expectation for onsite imaging with a new vendor?

X-Ray services are managed by another vendor and is not a part of this RFP.

Sleep Testing

30. Is there a requirement for provision of Sleep Tests; if so what is the requirement?

No

Labs, Vaccinations, Titters, Testing

31. Will the current lab provider be retained?

Possibly

32. What company is currently used for drug testing?

LabCorp

33. What panel drug test is used i.e. 5 panel, 10 panel, 12 panel for post offer physicals?

The City uses a 5 panel and 10 panel in the drug testing program. Please see City Employee Information Guide for more details. It was sent with the RFP.

34. Is a standard drug panel utilized or does the City have a custom panel?

See Drug and Alcohol Testing Policy in the Employee Information Guide.

35. Are lab tests, vaccines, titters and other tests expected to be charged at pass through cost?

This is to part of your proposal to the City. The City desires to have very few pass through charges.

Lifestyle Management Programs

36. What off-site programs partner with the City for the various lifestyle management programs.

This varies but some of our current collaborators are Outdoor Chattanooga, Bike Chattanooga, Green Trips, Hamilton County Agricultural Extension, and BCBST.

37. Is there opportunity to add additional partner programs?

Sure.

HR Policies

38. How will the vendor interface with the City Human Resources department in the event employees exhaust IOD benefits or the employee does not comply with IOD policies.

All IOD cases are followed by the Manager of Wellness and Occupational Health.

Question Set #3:

39. Can the City provide the exact number of employees that have access to the clinic? Exact number of retirees?

See Exhibit A.

40. What has been the City's total medical claims cost trend since the onsite clinic was implemented?

See Exhibit B

41. In addition to the staffing costs provided with the RFP materials, can you provide the total onsite clinic costs for 2015 in the following categories?

- Total clinic cost
- Labs
- Supplies
- HRA/wellness spend
- Management/administration fee
- EMR cost

The current contract covers most of these charges under the contract fee. Passthroughs for FY 15 was \$170,000.

42. Can you provide a sample of reports that are provided to the City by the current vendor (utilization, cost/savings, etc.)?

See Exhibit B.

43. On page 4 of the RFP, an "Exhibit B" is referenced that summarizes onsite occupational medical clinic data. We were unable to locate this Exhibit in the RFP materials.

a. Can the City include Exhibit B in an addendum?

Yes.

b. Does Exhibit B include unit costs for each occupational test? If not, can the City provide costs for the following tests?

- Firefighter annual NFPA Physical
- DOT & Safety Sensitive drug screen (Non-Post Offer)
- DOT physical
- Fitness for Duty Exam/Return to Work Exams
- Non-DOT Post Offer Physical & Drug Screen
- Post Offer Physical & Drug Screen (Firefighter & Police Officer)
- Post Offer Physical with DOT Drug Screen
- Vaccinations/TB Tests
- Audiology testing

- Pulmonary Function/Spirometry
- Respiratory Fit Test
- PPI Ratings

These costs cannot be broken out as they are part of the overall payment to the current vendor.

44. What was the total workers' compensation spend in 2015? What was the total number of workers' compensation claims filed in 2015? Total number of lost work days?

The total spend for our Injury on Duty program for 2015 was a little over 2 million. There were 230 claims and the number of lost work days was 1472.

45. What is the current file feed format for third party transfers of data related to clinic services (lab interfaces, health risk assessment data, incentive tracking, WellAdvantage, claims adjudication and workers' compensation, etc.)?

This depends on the needs of the vendor.

46. On page 15 of the RFP, Question #6 reads "Describe in detail your plan for setting up your technology infrastructure. Describe your plan for transferring and initiating all"

a. Can the City provide the rest of this question?

Describe your plan for transferring and initiating all electronic interfaces that need to be setup with third party vendors

47. On page 20, the RFP states, "Proposals shall be submitted only on the forms provided by the City of Chattanooga. The Proposer shall submit two (2) copies signed and sealed, in the envelope provided by the City for that purpose."

a. Where do we obtain the proposal forms and special mailing envelope?

b. This request differs from the submittal instructions listed on page 19 of the RFP (four hard copies and one digital copy). How many copies of the proposal would the City like to receive?

Please disregard these directions, as they are geared towards construction bids.

Question Set #4:

48. Has the City engaged a broker/consultant for assistance in developing and evaluating this RFP? If so, which broker/consultant?

The City uses Russ Blakely and Associates.

49. How is success of the onsite medical clinic currently measured?

The City looks at this in a variety of methods including but not limited to patient satisfaction, quality control, claim cost, patient outcome, and patient engagement levels.

50. Are there certain components of the current onsite medical center operation that City Personnel would maintain? Are there service options that must change?

The City is always looking to improve the services.

51. What is the ROI of the current onsite medical clinic?

The estimated annual ROI is 1.43:1 and is adjusted for large claims.

52. How many patients per day are seen in the occhealth and primary care practices?

Approximate **monthly** visits

Primary - 1100-1200

Labs/Tests/Injections - 800-900

Occ. Health - 70-90

Pre & Post Physicals - 80-100

53. What % of the City's eligible population utilizes the onsite medical clinic currently?

Over 70% of the total eligible population utilize the clinic.

54. Will Exhibit B be provided to respondents?

Exhibit B is being provided with these answers

55. What is the average salary of City employees?

The average salary of for a full time City employee excluding elected officials is \$41, 761.51.

56. Will requested health record data migration include medical surveillance history and compliance?

Yes

57. Is spirometry testing equipment included in the clinic medical equipment?

Yes.

58. What hours are the Chattanooga Diagnostic Group RT's available to perform x rays for the onsite?

The services are available during clinic hours.

59. How many RT's are employed by Chattanooga Diagnostic Group to serve the onsite clinic?

Not available.

60. Do the NFPA Firefighter Physicals encompass all testing recommendations – specifically, stress tests for candidates over 40 years of age?

Those that can be done onsite. Stress tests are referred to a local hospital.

61. If your NFPA Firefighter physicals do encompass stress tests, does the current onsite provider perform these tests or partner with an outside cardiology practice for these services? If an outside practice is utilized, which practice? Is the cost for these services built into the current onsite price or are they billed to the City as a pass through?

If stress tests are required, they are referred to a local hospital to provide. Claims are sent directly to our TPA for payment.

62. Will a subcontracted resource be acceptable for 24/7 Blood Draws related to DUI suspect protocol?

Yes.

63. Are the only components specific to the City's wellness program included in the "WellAdvantage", "Lifestyle Management Programs" and "Incentive Program" sections of the RFP?

Yes, but the program is ever changing.

64. Does the City desire to have the successful bidder to replace the existing wellness program? Not necessarily. Or is it the intent for the successful bidder to collaborate with the existing wellness program?

The City is not necessarily asking the successful bidder to replace the existing wellness program entirely, but we are always open to new ideas for expanding our current wellness program.

65. Are the current physicians board certified in Occ-Health and Family & Internal Medicine?

Yes.

66. Is incumbent staff available for hire?

Yes, but they may not be interested in changing employers.

67. Does the current onsite medical center provide CLIA waived testing? If so, is there a current CLIA certificate?

Yes, our current onsite medical center does provide CLIA waived testing and there is a current CLIA certificate.

68. What is the term period for the proposed onsite medical clinic contract?

This shall be a twelve (12) month contract with two (2) additional twelve (12) month mutually renewable terms.

Question Set #5:

71. In order to provide the most accurate cost savings, could you provide either (a) plan performance reports for the most recent two years, or (b) a breakdown of your annual medical and pharmacy claims and utilization data (i.e. outpatient, inpatient, worker's compensation, etc.)?

Please see Exhibit B that will be sent with these answers.

72. Is the City expecting the vendor to operate the onsite pharmacy?

No, the onsite pharmacy is not included in this RFP.

73. In reference to page 20, "Proposals shall be submitted only on the forms provided by the City of Chattanooga," is there a form for the entire questionnaire, or may we respond using our template, given the questionnaire is provided in a PDF format? Otherwise, could you provide the questionnaire in a Word format?

You may respond to this RFP using any form necessary to submit your best response. Please disregard terms that are geared towards construction projects.

Question Set #6:

74. We offer a comprehensive, fully-integrated wellness solution option in addition to our onsite clinic services. This includes a personal interactive web-based platform, HRA, lifestyle programs, coaching and clinically-based Disease Management. Would the City like us to bid these services as a potential replacement to your current WellAdvantage vendor and Blue Health Rewards web-based incentive platform, or would you just advise that we structure and price our proposal as integrating with those existing services?

The City would want integration only.

Question Set #7:

75. When is preferred clinic launch date? Assuming this plays a role in the timeline, when does your existing contract with the onsite clinic vendor terminate?

If a new vendor is chosen, the City would desire a reasonable timeline for transition but will be determined at a later date.

76. What are some of the challenges you've experienced with the existing primary care and occupational health clinic.

Not available.

Question Set #8:

77. What is the value of this services contract for the most recent year? Please identify the major pass through charges in excess of that contract figure.

The value of this contract is 2.85 million. The major pass through charges are laboratory charges not covered under the general contract, vaccines, and DME with a total of \$170,000.

78. Are on-site clinic furniture, fixtures and equipment owned by the City or the vendor? If by vendor, what in this category stays with the clinic.

The City owns all equipment except for the computer system which is not provided by the City. Please see Exhibit A, Clinic Medical Equipment.

79. Please provide high-level data on the health stratification of the employee population and how this has trended over the past several years.

Patients are screened using a variety of methods of data mining into twenty or more risk factors. The engagement rate of high risk population is 78%. Engagement rate has exceeded 74% over the last four years.

80. What are the most costly chronic conditions currently faced by the City and how is this monetized?

Diabetes, obesity, high blood pressure, and high cholesterol are the most costly chronic conditions.

81. Does the City or its partners calculate ROI of the on-site clinic based on claims data and/or productivity measures? What are the numbers? If not, why not?

Yes, ROI is calculated on a monthly basis. It is based upon medical costs, payroll and productivity.

82. What specific outcomes does the City target with its next on-site clinic management contract?

The City desires to have continued savings and increased engagement of the high risk population with continued measurable reduction in risk status and maintaining standard of care.

Question Set #9:

83. Can you please provide the number of employees and the number of eligible dependents that would have access to the clinic? Do all 3058 employees and retirees have access to use the clinic? Do all 3714 dependents have eligibility to use the clinic? Exhibit A includes eligible members only. For occupational health, how many employees are eligible to use the clinic (excluding retirees)?

All eligible members on Exhibit A have access to use the clinic. For Occupational Health, there are approximately 2700 employees who could potentially be injured.

84. Can you please describe the "WellAdvantage staff"? What are their roles and basic job descriptions? Who is their employer? The current vendor is Marathon Health.

Please see Exhibit A.

85. Is the dietician currently the only staff member providing health coaching for this population? Is that one staff member sufficient enough to handle the current health education, and health coaching patient load?

With our current vendor's model, health coaching is provided by all staff at every visit.

86. Do the salaries listed in this RFP include benefits, or are those just the basic salaries? Base salaries only. Does the current vendor offer a full employee benefits package, including health insurance?

Yes.

87. What does the current vendor do with the \$20 collected from the HDHP members? Does it go toward their operations?

No. The money is applied to our monthly invoice so goes back to the City.

88. Is the "Onsite Health Navigator" employed by BCBS? Or the health center vendor?

The Health Navigator is employed by BCBS

89. Who currently employs and manages and staffs and stocks the on-site pharmacy?
The current vendor is OnSite Rx.

90. Are basic clinic supplies and office supplies billed to the City of Chattanooga as a pass through cost?

No. These are part of the overall cost of the vendor.

91. In the cost proposal, is the "Clinic Administration Fee" line to reflect all staffing and benefits costs, operations costs, management costs, reporting costs (basically, everything outside of implementation/start up costs and pass through charges)?

Yes.

92. How often is the MA or phlebotomist utilized for after hours blood draws? (in days per week and hours per week)?

There are about 40-50 draws per month. Does the current vendor have staff on call for this service? Yes.

93. How many DUI screenings are completed annually for the police department on suspects?

See above.

94. Who currently provides the HRAs/biometric screens?

Marathon Health, the current vendor.

Question Set #10:

95. On page 4 of the RFP document under the Occupational Health section, it states "the City has a number of long-term IOD claims which is being managed by the current vendor." Does current vendor mean the TPA who pays the claims and provides case management or the on-site clinic vendor?

No. These cases are managed by the onsite clinic vendor. There are currently 408 claims.

96. Are any of the current staff FMCSA medical examiner certified?

Yes.

97. Are the existing medical providers PECOS certified?

Yes.

98. How many WellAdvantage staff members are there? What are their titles and responsibilities? Are they staffed by the City or the current onsite clinic vendor?

Please see exhibit A. Staff is provided by current vendor.

99. As stated in the RFP, the City does not currently perform mass volume biometric screenings. Would the City like to move to a mass screening event? If not, are all screenings performed in the clinic? Is there a designated time period for when the screenings occur or do they occur throughout the year?

The City does not currently perform mass volume biometric screenings and is not interested in moving in that direction. All screenings are performed at the clinic throughout the year.

100. Do the DOT examinations, NFPA physicals, pre and post offer employee physicals, and respiratory physicals occur at a certain time of year or are they spread out throughout the year?

All of these examinations are spread out throughout the year.

101. Page 3 of the proposal states "If specialty care is needed, the on-site providers will refer to in-network providers and can use the on-site Health Navigator for assistance." What is the Health Navigator? This a clinic staff member or a City staff member?

The Health Navigator is an employee of Blue Cross Blue Shield of TN.

102. Page 3 references Exhibit B for summary on-site medical clinic utilization data and BCBST Claim Data. This was not included in the RFP package. Where can we access this document?

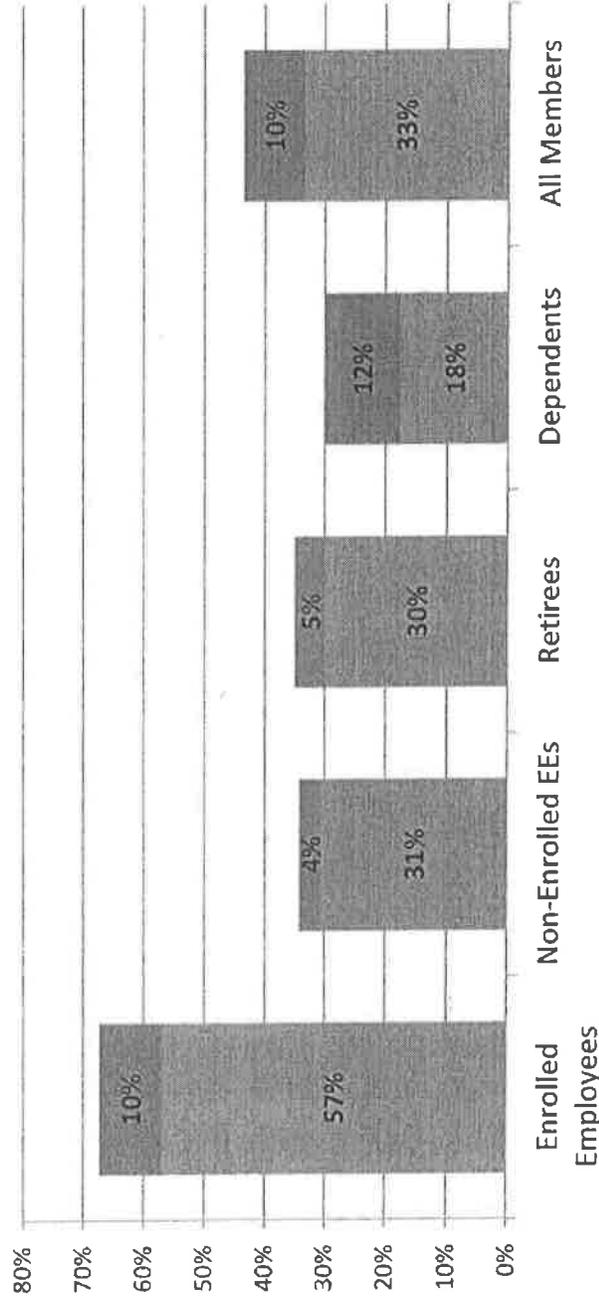
Exhibit B is being provided with these answers

103. Can you please explain the process for 24/7 blood draws for all DUI suspects? What if the phlebotomist is not available? Are these performed directly at the clinic? Who notifies the phlebotomist?

The Police Department notifies the onsite medical clinic vendor that a draw is needed and where the draw needs to be done. A phlebotomist must be available 24/7 for the draw. Draws are normally performed at the jail, but may also be performed on the side of the road at a traffic stop, a road block, the hospital or the Police Service Center. They are not performed at the clinic.

EXHIBIT B (Following 5 Pages)

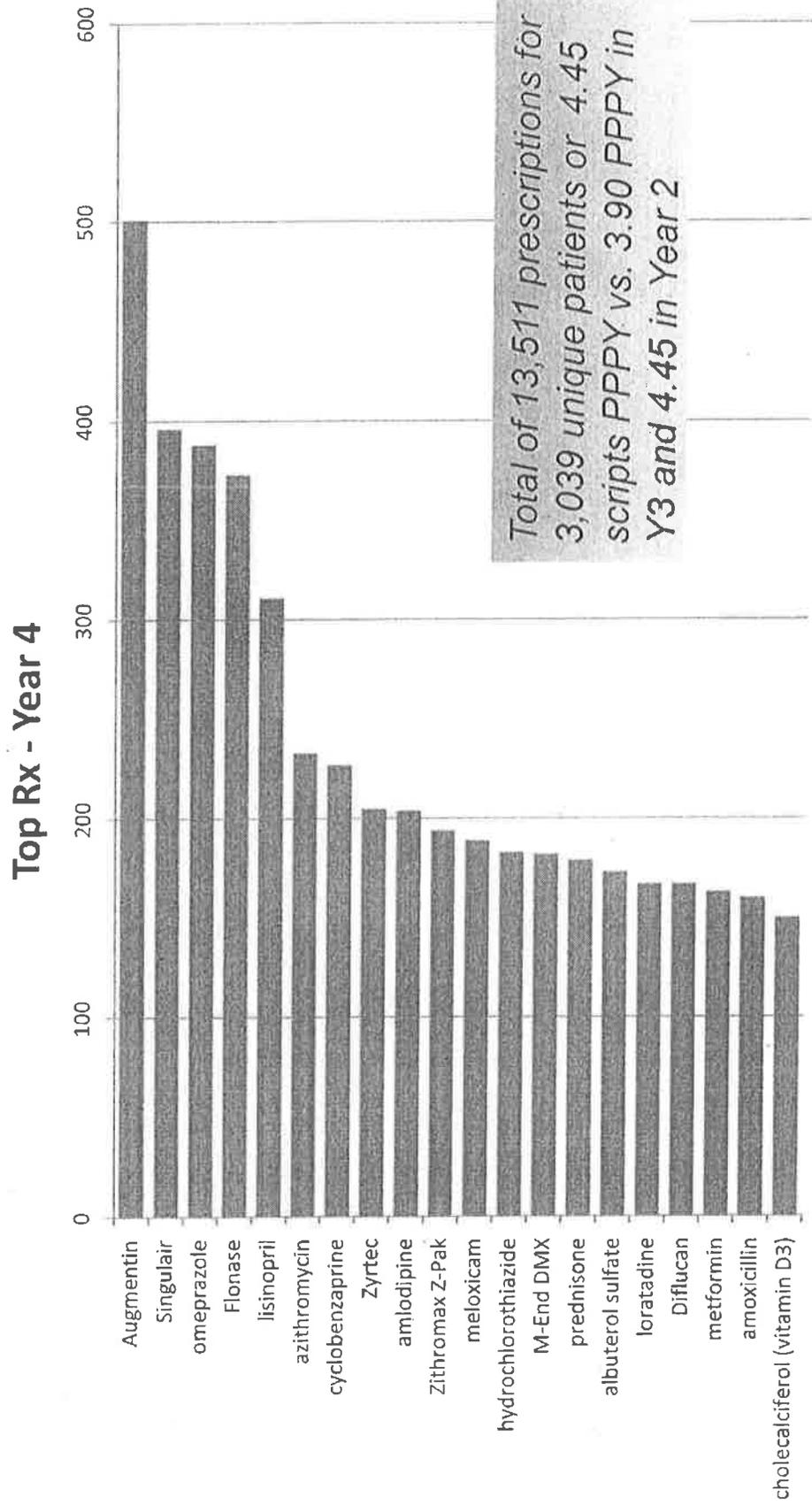
Year 4 Utilization by Member Type



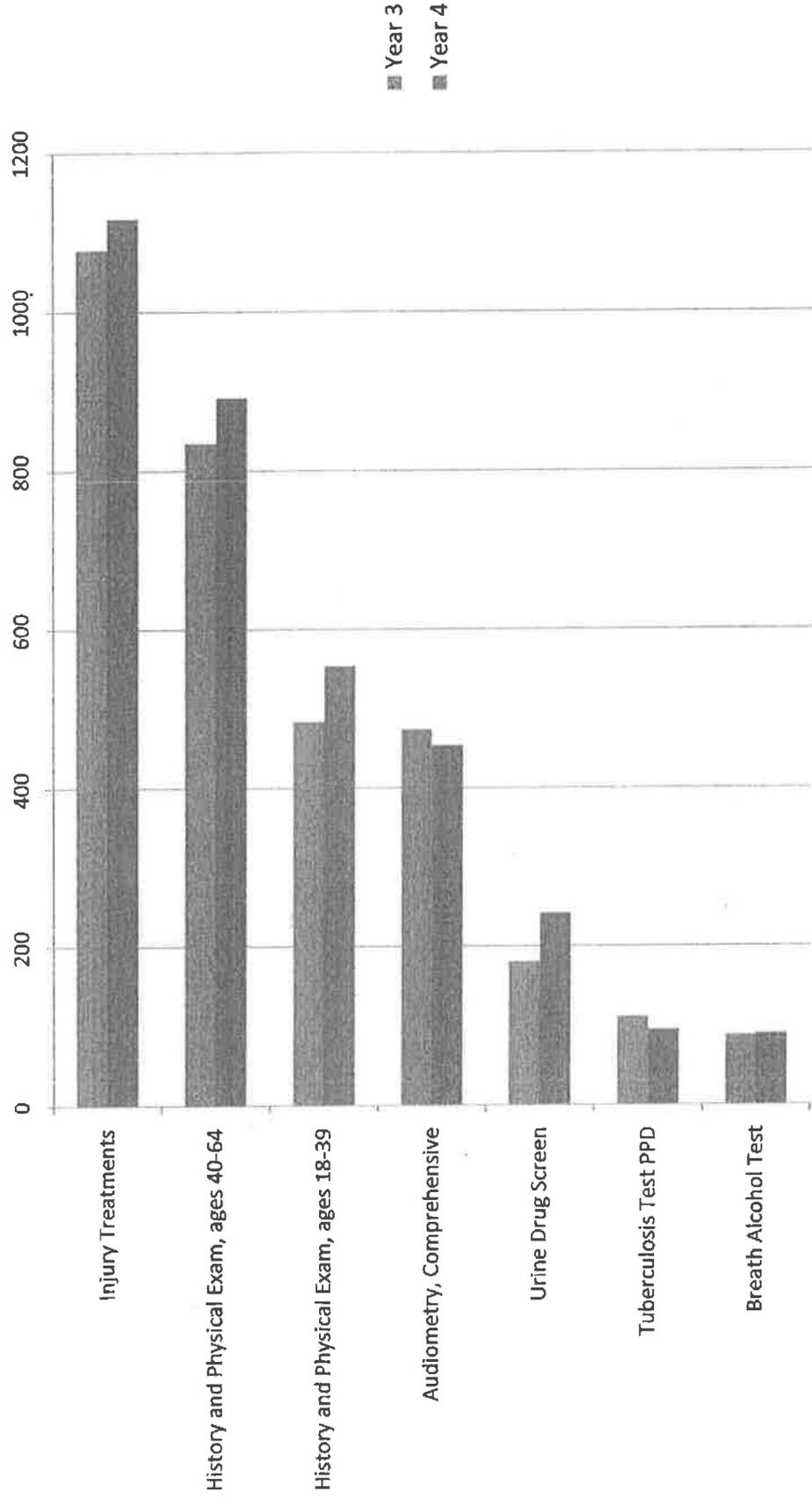
■ Coaching % ■ Acute/Primary %

	Population	Coaching	Acute / Primary	Total Participating	Coaching %	Acute / Primary %	Total Participating
Enrolled Employees	2,655	1,512	276	1,788	57%	10%	67%
Non-Enrolled EEs	695	212	26	238	31%	4%	34%
Retirees	876	261	46	307	30%	5%	35%
Dependents	3,639	643	452	1,095	18%	12%	30%
All Members	7,865	2,628	800	3,428	33%	10%	44%

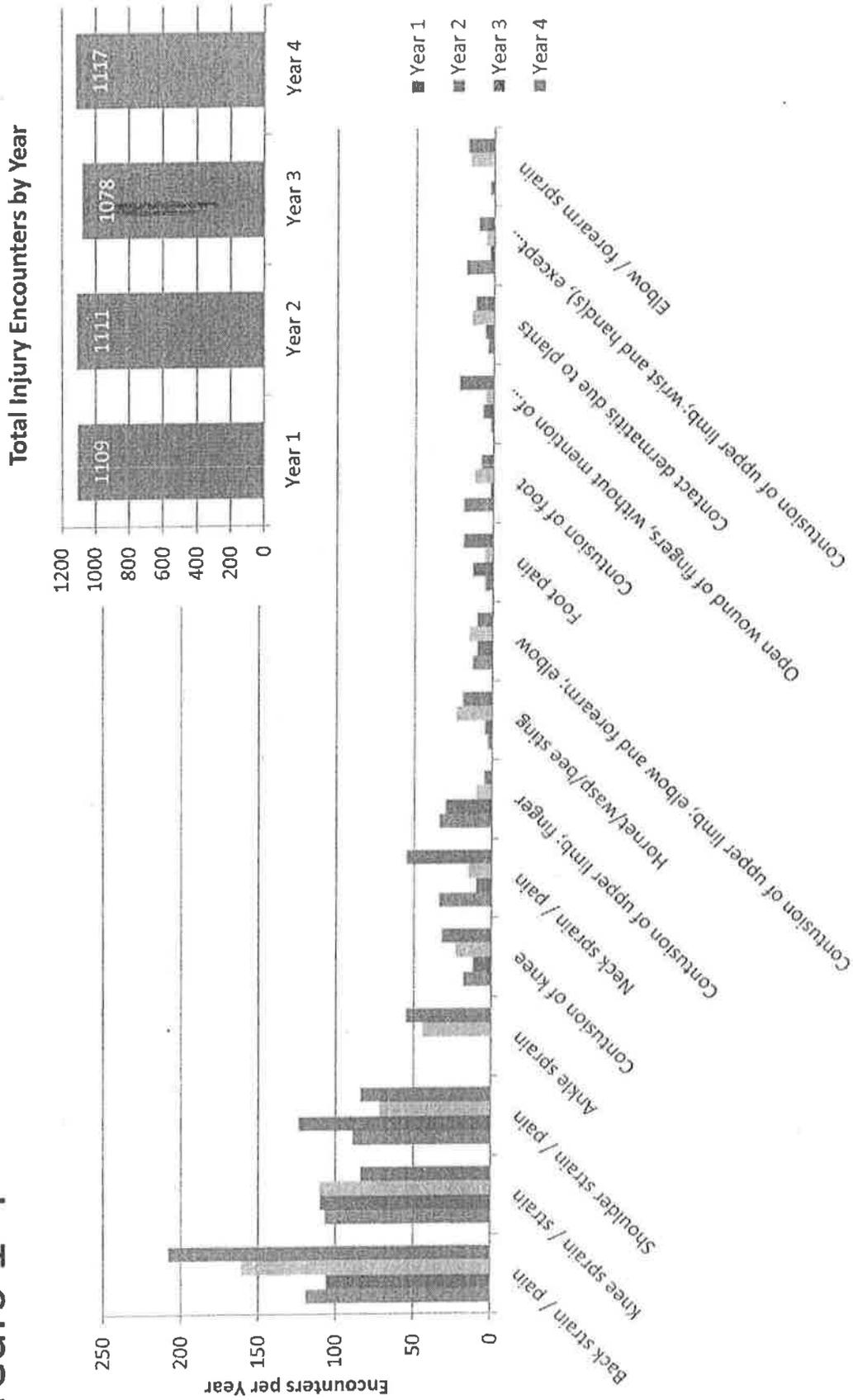
Most Common Rx – Year 4



Most Common Occupational Health Services Years 3 & 4



Most Common Injury Treatment Diagnoses Years 1-4



BCBST Paid Claims by Fiscal Year by type

Subgroup (Multiple Items)

Fiscal Year	Medical	Drugs	Total
2011	16,792,981.29	4,904,274.82	21,697,256.11
2012	19,788,471.98	5,233,242.33	25,021,714.31
2013	19,632,265.62	5,390,858.93	25,023,124.55
2014	21,683,323.67	7,728,339.56	29,411,663.23
2015	19,655,577.45	7,610,613.08	27,266,190.53
Grand Total	97,552,620.01	30,867,328.72	128,419,948.73