



**Voluntary, Employee-Paid Benefits  
Request for Proposals  
RFP# 6100043782**

**Questions and Answers  
Posted 10/16/2017**

<b>Question</b>	<b>Answer</b>
1. Please confirm that all employees are US Citizens living and working in the US?	It is confirmed that all eligible employees are legal residents of the United States and legally employed. Citizenship versus other legal status is not tracked by the issuing office.
2. Please identify the current carrier.	Prudential for long-term disability insurance and term life insurance. MetLife for home/auto insurance.
3. Please provide the current carriers renewal?	There are no renewals left on the current contracts, which expire on July 1, 2018.
4. Please provide minimum hours per week to be eligible for benefits.	Eligible employees must work at least 50% of full time hours. This would come to 18.75 hours or 20 hours per pay period (two-week period). It is not necessary for the 50% of full time hours to be in a single week as long as 50% of full time hours is reached in a pay period.
5. Please confirm current plans are proposed plans.	No, it is not a requirement that offerors match the currently offered plans.
6. RFP page 22, number 12 ... coverage must be continued for employees on leave without pay ... is this for life and disability coverages? If so, does	Yes, this is for life and long-term disability. Yes, such experience is included in the experience data provided, now added as Appendix O. See Appendix G-3 for additional census information.

<p>the experience, once provided to us, reflect this practice?</p>	
<p>7. RFP page 22, number 12 ... under what circumstances does this happen and how frequently?</p>	<p>The primary circumstances for leave without pay include, sick leave, military leave, and injury leave.</p>
<p>8. RFP page 23, number 19 ... The Commonwealth will not be responsible for collection of premiums on a retroactive basis ... does the experience once provided, reflect this practice?</p>	<p>Yes.</p>
<p>9. Is the 5 year rate guarantee firm or will you allow a 3 or 4 year rate guarantee to be quoted?</p>	<p>It is required that offers include a rate for all five years of the contract; do not offer a rate for less than five years rate with an offer to negotiate future rates. It is not a requirement for the rate to be the same for all five years. The rate of all five years will be used when developing the cost score.</p>
<p>10.If you would like' all services performed "on-shore", we will need to know 1) covered lives by line of coverage; and 2) claim incidence by line of coverage in order to determine any additional pricing.</p>	<p>Domestic workforce only provides additional points to offerors and is not a mandatory requirement.</p>
<p>11.Please provide a recent billing invoice inclusive of enrolled lives, volumes, volume basis, and</p>	<p>Premiums are paid via payroll deduction; therefore, an invoice such as the one requested is not generated.</p>

<p>premium for all lines of coverage.</p>	
<p>12. For all census, we need more robust data. Please include date birth, gender, annual salary, coverage amounts, occupation, class ID if appropriate, zip code. Please provide both eligible and enrolled data.</p>	<p>Please see Appendix G-3.</p>
<p>13. When provided, please confirm the census data is reflective of each definition of earnings.</p>	<p>The census is reflective of annual salary. In cases where an employee works for an hourly rate rather than a salary, the hourly rate is converted into an annual pay based upon hours worked.</p>
<p>14. Please provide copies of current carrier booklets/contracts for all lines of coverage.</p>	<p>Please see the newly added Appendix L for booklet certificates.</p>
<p>15. STD plan is new – please provide detailed plan provisions to include in this offering.</p>	<p>There is no STD plan that Offerors are required to match.</p>
<p>16. Please clarify the rate basis you would like to see the STD quoted. Given this is new line of coverage, will you allow a minimum participation percentage to be set?</p>	<p>The Commonwealth will not agree to a minimum participation percentage. Short term disability quotes should be provided with age brackets in a chart similar to the long-term disability rate card, also per \$100 of covered payroll.</p>
<p>17. Please provide, by line of coverage, current and</p>	<p>Please see the newly added Appendix M for rate information.</p>

<p>historical rates, 5 years of monthly paid premium, paid claims, lives, volume for actives and retirees if applicable.</p>	
<p>18. Please provide and individual detailed death claim listing with gender, date of birth, date of death, date paid, and coverage amount.</p>	<p>Please see the newly added Appendix N for claim history information.</p>
<p>19. If premium waiver is included in current plans, please provide a waiver of premium listing inclusive of gender, date of disability, date of birth, and face amount.</p>	<p>Insured waiver of premium is not applicable. Continuation of coverage due to disability applies on a premium pay basis upon proof of total and permanent disability to the insurance carrier. See pages 31 and 32 of the life booklet (Appendix L) for more information under the heading "When Your Insurance Ends."</p>
<p>20. If death benefit only is included, please provide a list of current disableds assuming you would like the new carrier to take them on. List should include date of birth, date of disability, benefit amount and diagnosis.</p>	<p>Please see Appendix N for claim history information.</p>
<p>21. Please list any plan or rate changes and the date of change in the past 5 years.</p>	<p>Please see Appendix M for rate history information.</p>
<p>22. Please provide an incurral for each line of coverage with a valuation date.</p>	<p>Please see Appendix N for claim history information.</p>

23. Please confirm this is a new plan without experience.	There is history for life and long-term disability. Please see Appendix N for claim history and Appendix O for experience.
24. Please list any plan or rate changes and the date of change in the past 5 years.	Please see Appendix M for rate history information.
25. Please provide current and historical rates for the last 5 years.	Please see Appendix M for rate history information.
26. Please provide 5 years of monthly premium, paid claims, monthly covered payroll.	Please see Appendix O for experience.
27. Please provide open claims list including date of disability, date of birth, gender, gross benefit, pers/strs offsets, social security offsets, net benefit, current reserve for the past 5 years.	Please see Appendix N for claim history and Appendix O for experience.
28. Please provide an incurral with a valuation date.	Please see Appendix N for claim history.
29. Please provide closed claim list including date of birth, date of disability, gender, date closed, total amount paid and last benefit amount.	Please see Appendix N for claim history.

<p>30. During your previous annual enrollment was it Open, Modified, or Traditional Underwriting? When was the last true "open enrollment"?</p>	<p>The most recent open enrollment included short form evidence of insurability.</p>
<p>31. Do you currently use a TPA or software vendor for your benefits enrollment and eligibility? If so, can the name of the vendor be released?</p>	<p>A TPA or software vendor for enrollments and/or eligibility is not used.</p>
<p>32. When will COPA make a decision on plans to be offered and carrier section?</p>	<p>Targeted date for scoring and selection is to notify vendors of outcome in early January.</p>
<p>33. Are there any competing Voluntary Benefit plans offered to Union employees? If so please provide the plans and which unions are eligible for these plans and the number of employees.</p>	<p>Yes, there is a union benefit offered to members of AFSCME, SEIU Local 668 and UFCW.</p>
<p>34. Please provide full Summary Plan Descriptions or Certificates of Insurance for all requested lines of coverage.</p>	<p>Please see Appendix L for booklet certificates.</p>
<p>35. Please provide a more detailed census file to</p>	<p>Please see Appendix G-3.</p>

<p>include the employee's date of birth, gender, salary, state of residence or zip code, and coverage election choices (optional life, Voluntary AD&amp;D, spouse coverage, child coverage and LTD election).</p>	
<p>36. Who performs billing for the Optional Life and Long-Term Disability today? Does the current carrier execute all aspects of billing, or is there a 3<sup>rd</sup> party involved?</p>	<p>The current carrier executes all aspects of billing. No third party is involved.</p>
<p>37. With respect to Appendix B (Domestic Workforce Utilization Certification), we interpret direct labor to be call center, enrollment, claims and other services outlined in the scope of work. Work internal to the contractor, required to modify the contractor's system(s) to support the Commonwealth would not be considered direct labor.</p>	<p>It is agreed that internal work needed to modify the offeror's systems is not a direct labor.</p>
<p>38. If Social Security Number (SSN) is required by the</p>	<p>Treasury Department and Thaddeus Stevens have both confirmed that SSN can be made available if it is necessary for paying claim, or other legitimate business need.</p>

<p>carrier to process claims, would the Commonwealth consider including SSN in the file layouts for Thaddeus Stevens and Treasury? In the Appendix H-1 file layout, the Personnel ID Number (which is the Employee's SSN) and the Old Personnel ID Number are both marked as "not provided due to confidentiality".</p>	
<p>39.Can you please confirm that, as it relates to the Small Diverse and Small Business goals, "total contract costs" are total administrative expenses or total premium? With insurance contracts, the majority of plan premium is reserved for paying claims.</p>	<p>The Small Diverse Business and Small Business Participation commitments are based upon total premium, which include administrative expenses.</p>
<p>40.With respect to Section III-6, Task #4 on page 36, does the Commonwealth have any parameters on statewide meetings, such as:</p> <ul style="list-style-type: none"> <li>- Are there a minimum number of employees at a location in order for</li> </ul>	<p>Details of parameters can be negotiated with a contractor. Regarding the specific questions raised:</p> <ul style="list-style-type: none"> <li>- There is no minimum number of employees that must appear at a group meeting; however, the Commonwealth will work with an awarded offeror to find locations that are most logical for group meetings based upon potential audience and availability of facilities.</li> <li>- The Commonwealth will not consider one-on-one, face to face meetings.</li> <li>- Meetings may not be mandatory.</li> <li>- The RFP does not permit phone group meetings.</li> </ul>



a group meeting to be offered

- Will the Commonwealth consider both group meetings and one-on-one, face to face meetings with a benefit counselor?
- In support of an active enrollment, would the Commonwealth be open to mandatory one-on-one meetings to ensure everyone is aware of their benefit options?
- Will the Commonwealth consider phone meetings as an alternative to group meetings for employees who are at a remote location or prefer an "off hours" meeting?
- Will the Commonwealth allow mandatory meetings, at least for the initial open enrollment period? This will help to ensure all employees are informed and understand new

<p>optional benefits that are being offered.</p>	
<p>41.Does eligibility processing for all Voluntary Products follow the same rules?</p>	<p>Yes.</p>
<p>42.If a separate enrollment platform is utilized for certain coverages, is the Commonwealth open to sending a separate eligibility file in addition to the one sent to the carrier?</p>	<p>Eligibility files must be pulled from the Commonwealth's server. If an Offeror has an administrative need for more than one unit to have access to the file (such as a contractor and sub-contractor both need the eligibility file) access to the server can be arranged for the additional access.</p>
<p>43.If a single carrier is selected for multiple products, do all products need to be included on the same inbound deduction file?</p>	<p>Yes. Please note that the file contains different fields for the deductions of different products. Therefore, the products will all be on the same file, but the employee premium deduction for the different products will be included in different fields on the file.</p>
<p>44.Requirement #18 on page 23 (Section III-1, Part D), states that Marketing will not include telephonic contact with employees. We interpret this to me unsolicited outbound phone calls to employees is prohibited. Can you please confirm our understanding is correct, and let us know if the Commonwealth will allow employees to make</p>	<p>This understanding is confirmed. Selected Offerors may return a call to an employee that contacts the Offeror. Online tools to request a call is also acceptable.</p>

<p>inbound phone calls to the contractor to discuss their plan options and enrollment with a benefits counselor? If possible, can employees use an online tool to request a call back from a benefits counselor?</p>	
<p>45.Does the Commonwealth offer a Healthcare Saving Account (HSA) for employees who enroll in the Basic PPO?</p>	<p>No.</p>
<p>46.The RFP states that legal services plans will not be considered. We believe this may be a reference legal plans which offer discounts on legal services only. Will the Commonwealth consider a legal services plan in which covered services are paid for in full, no copay/coinsurance or deductibles required of the employee?</p>	<p>No.</p>
<p>47.Would the Commonwealth prefer to have 1 carrier to provide all Employee Paid Benefits, as well as all of the services described on</p>	<p>Offerors may submit proposals that include sub-contractors. Therefore, it is valid for an insurance company to offer a product that includes a sub-contractor relationship with another company that performs communication or enrollment services.</p>

<p>this RFP (communication, enrollment, etc.)? Or, is the Commonwealth open to a multi-carrier option?</p>	
<p>48.Does the Commonwealth offer a Financial Wellness program to their employees? If not, is the Commonwealth interested in offering retirement planning seminars, for example? Or, is the Commonwealth interesting in hearing from the Offerors how the Employee Paid benefits in this RFP support Financial Wellness?</p>	<p>The Commonwealth is developing a Financial Wellness program internally, which includes some coordination with vendors that offer voluntary benefits. An offer for an education/seminar program that operates on a fee-for-attendance basis would not be within the scope of this RFP. How a particular voluntary benefit supports Financial Wellness could be part of how an Offeror explains the value of the benefit to the employer and employee.</p>
<p>49.For the requested Life/AD&amp;D coverages, please provide at least five years' premium and claims experience. Data should include historical lives, average volume, paid premiums, claims paid, pending reserves, and waiver of premium reserves (if applicable).</p>	<p>Please see Appendix N for claim history and Appendix O for experience.</p>
<p>50.What is the definition of age for the purpose of determining the premium age brackets - end of</p>	<p>The first of the month following the month in which the employee has a birthday.</p>

<p>plan year, 1st of each month, etc.?</p>	
<p>51. Is Voluntary AD&amp;D currently offered to employees?</p>	<p>No.</p>
<p>52. Please list any plan changes that have occurred over the last 5 years.</p>	<p>There have not been any plan changes.</p>
<p>53. Please provide rate history for the last 5 years.</p>	<p>Please see Appendix M for rate history.</p>
<p>54. For the requested LTD coverage, please provide a Paid and Incurred exhibit with claims on an incurred basis. The exhibit should include historical lives, premium, and rates for the most recent three year period.</p>	<p>Please see Appendix N for claim history and Appendix O for experience.</p>
<p>55. Please provide a detailed claim listing for the last three years. The list should include the claimant's date of birth, gender, date of disability, benefit start date, claim status (open, pending, terminated etc.), monthly and gross benefit</p>	<p>Please see Appendix N for claim history and Appendix O for experience.</p>

<p>amounts, accumulated benefits paid, individual reserves and social security offsets.</p>	
<p>56. Please list any plan changes that have occurred over the last 3 years.</p>	<p>There have been no plan changes.</p>
<p>57. Please provide rate history for the last 3 years.</p>	<p>Please see Appendix M for rate history.</p>
<p>58. The RFP states that the Commonwealth has made a policy determination that short-term disability and the three currently offered voluntary insurance products are known to complement the current benefits package. We also noted that the Annual Leave and Sick Leave policy is a rather rich benefit. For example, a maximum of 300 days of sick leave may carry over. Can you provide your point of view on how Short Term Disability (STD) will complement the current benefit package? Are changes to the Commonwealth's sick</p>	<p>The Commonwealth had determined that new hires that have not accumulated much leave would benefit from a short-term disability policy. Also, an employee who recovers from a serious health condition may benefit from a short-term disability policy due to exhausting available leave. There are no changes to the sick leave policy being contemplated.</p>

<p>leave policy being contemplated?</p>	
<p>59.To help the carrier counsel employees on their STD benefit election, is the Commonwealth willing to:  Provide information on allotted/accumulated sick leave for all employees;  and  Require, at least employees who do not have an accumulated sick bank, to participate in mandatory STD enrollment counseling meetings; and  Require those who do not elect STD, to sign a waiver acknowledging that they have decided not to elect STD coverage</p>	<p>Neither mandatory counseling sessions nor signing a waiver will be conducted.</p>
<p>60.Are there any STD plan designs or benefit amounts that the Commonwealth would like to see in the STD plan(s) proposed by the bidders? Is the Commonwealth open to offering employees choice of benefits they wish to purchase?</p>	<p>There are no specific plan design elements the Commonwealth is looking to received. The committee will have to decide if a choice of benefits will be made available depending on the value of the benefits, assuming more than one Offeror receives a high enough technical score.</p>

<p>61. Will the Commonwealth require that STD benefits coordinate with sick leave and offset for paid sick leave, like the LTD plan does? If so, can the commonwealth include the accumulated sick pay days by individual on the census file?</p>	<p>The Commonwealth will not require an Offeror to offset a disability plan.</p>
<p>62. Will the Commonwealth consider Optional Long-Term Disability plan design changes that will make it more affordable and complement/enhance the value of both STD and LTD?</p>	<p>Offerors are free to submit a proposal for any plan design the Offeror believes will be most advantageous to employees and the Commonwealth. Offerors do not need to match existing structure, nor will proposals be compared to the existing benefits. The plan design of the benefit offered is part of the technical scoring of the proposals received by the Commonwealth.</p>
<p>63. From July 1, 2008 through July 1, 2013, Travelers was the exclusive auto and home carrier for COP and was then replaced by MetLife. As of YE 2016 there are 2,834 policies remaining from this period that are still in force for Commonwealth of Pennsylvania employees and retirees. If Travelers were to be awarded the future program would the</p>	<p>Yes, those employees could be included in the new plan and may be moved back to payroll deduction if they choose.</p>



<p>Commonwealth of Pennsylvania allow these policies to be included in the new plan? This would allow these employees to move back on payroll deduction if they chose.</p>	
<p>64. It is very common and considered "best practice" in the large case market (above 10k employees) to have two or three auto and home carriers. Auto and home is an individual product and not a group product and hence why this approach is so common. Rather than replace MetLife, we would suggest adding Travelers to the existing plan. This allows for maximum participation while giving employees choices. Will Commonwealth of Pennsylvania support a multi-carrier auto and home program?</p>	<p>No. Products that are submitted should expect that only one carrier will be submitted for home/auto insurance.</p>
<p>65. If COP supports a multi-carrier program, will COP support a multi-carrier communication plan? Please reference 2<sup>nd</sup> attachment to view</p>	<p>The Commonwealth does not agree with a multi-carrier program.</p>

<p>a multi-carrier enrollment kit.</p>	
<p>66. For clarification III-6 Work Plan Tasks, Phase Two – relating to the auto and home program there is not an enrollment period where underwriting is waived. We are highly regulated by the Pennsylvania Insurance Department and must abide by out filed rates, rules and underwriting guidelines. Is the Commonwealth of Pennsylvania in agreement with this clarification?</p>	<p>Yes, the Commonwealth agrees to this clarification.</p>
<p>67. Clarification is needed in Attachment J Sample Rate Card Information for auto and home premiums. The RFP states that "Offerors do not need to include these exact zip codes and must include 175 Pennsylvania zip codes for cost comparison". To ensure apples-to-apples quotes the zip codes must be identified so that all carriers are rating the same zip codes. Without the Commonwealth defining the 175 zip codes, the</p>	<p>The Commonwealth agrees with the potential offeror's analysis. Please see updated Home/Auto Rate Card added as Appendix J-1.</p>

<p>rate comparison process will be flawed and it will be impossible to determine which carrier is the most competitive. We ask COP to issue a list of the 175 zip codes to be rated.</p>	
<p>68. Clarification is needed in Attachment J Sample Rate Card Information for auto and home premiums. There are 17 auto zip codes listed and 20 home zip codes listed in the chart in the auto and home section. Should these zip codes be used for any purpose?</p>	<p>Please see updated Rate card added as Appendix J-1.</p>
<p>69. Will the Pre-Proposal conference have a dial in number? If so, can you please provide?</p>	<p>No.</p>
<p>70. Is the Commonwealth looking for an online enrollment portal to administer all benefits?</p>	<p>No.</p>
<p>71. Will the Commonwealth consider changing carriers for matching plans and more competitive rates?  a. Typically, when introducing a Short Term Disability offering, it is in the</p>	<p>It is agreed that it is in the Commonwealth's interest to offer plans that complement one another. The compatibility of plans will be considered by the selection committee when deciding the Offerors with whom the Commonwealth should enter into contract negotiations.</p>

<p>Commonwealth's best interest to add the STD with the current LTD carrier.</p>	
<p>72. Is the Commonwealth considering offering a supplemental term life insurance product?</p>	<p>Supplemental term life is in scope of this RFP.</p>
<p>73. Please confirm the carriers providing the current voluntary benefits.</p>	<p>Prudential for long-term disability insurance and term life insurance. MetLife for home/auto insurance.</p>
<p>74. We provide employee recognition for career milestones, above and beyond performance, training, etc. Is this something we would bid on?</p>	<p>No, this would not be a voluntary, employee-paid benefit.</p>
<p>75. Can we get an idea of the existing sick bank balances - number of employees with a balance and the average number of days?</p>	<p>The following chart is provided to show the average amount of leave held in balance by employees:</p>

	<table border="1"> <tr> <td data-bbox="609 92 932 253"><b>AVERAGE LEAVE BALANCES AS OF 10/6/2017</b></td> <td data-bbox="932 92 1152 253"></td> <td data-bbox="1152 92 1306 253"></td> </tr> <tr> <td data-bbox="609 253 932 298"></td> <td data-bbox="932 253 1152 298"></td> <td data-bbox="1152 253 1306 298"></td> </tr> <tr> <td data-bbox="609 298 932 370"><b>ANNUAL LEAVE</b></td> <td data-bbox="932 298 1152 370"></td> <td data-bbox="1152 298 1306 370"></td> </tr> <tr> <td data-bbox="609 370 932 483"><b>Years of Service</b></td> <td data-bbox="932 370 1152 483"><b>Balance - Hours</b></td> <td data-bbox="1152 370 1306 483"><b>Number of Days</b></td> </tr> <tr> <td data-bbox="609 483 932 529"></td> <td data-bbox="932 483 1152 529"></td> <td data-bbox="1152 483 1306 529"></td> </tr> <tr> <td data-bbox="609 529 932 599">0 up to 3 Years</td> <td data-bbox="932 529 1152 599">47.47</td> <td data-bbox="1152 529 1306 599">6.25</td> </tr> <tr> <td data-bbox="609 599 932 670">3 up to 15 Years</td> <td data-bbox="932 599 1152 670">140.26</td> <td data-bbox="1152 599 1306 670">18.46</td> </tr> <tr> <td data-bbox="609 670 932 742">15 up to 25 Years</td> <td data-bbox="932 670 1152 742">209.64</td> <td data-bbox="1152 670 1306 742">27.58</td> </tr> <tr> <td data-bbox="609 742 932 813">Over 25 Years</td> <td data-bbox="932 742 1152 813">292.2</td> <td data-bbox="1152 742 1306 813">38.45</td> </tr> <tr> <td data-bbox="609 813 932 859"></td> <td data-bbox="932 813 1152 859"></td> <td data-bbox="1152 813 1306 859"></td> </tr> <tr> <td data-bbox="609 859 932 930"><b>SICK LEAVE*</b></td> <td data-bbox="932 859 1152 930">391.52</td> <td data-bbox="1152 859 1306 930">51.52</td> </tr> <tr> <td colspan="3" data-bbox="609 930 1306 1084">*accrual is not based on years of service; most employees earn 11 days/year; management earns 13 days/year</td> </tr> </table>	<b>AVERAGE LEAVE BALANCES AS OF 10/6/2017</b>						<b>ANNUAL LEAVE</b>			<b>Years of Service</b>	<b>Balance - Hours</b>	<b>Number of Days</b>				0 up to 3 Years	47.47	6.25	3 up to 15 Years	140.26	18.46	15 up to 25 Years	209.64	27.58	Over 25 Years	292.2	38.45				<b>SICK LEAVE*</b>	391.52	51.52	*accrual is not based on years of service; most employees earn 11 days/year; management earns 13 days/year		
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76. Confirm that the sick bank program will remain in place, unchanged, with the addition of the Voluntary STD option.	Confirmed.																																				
77. Performance Guarantees – Are performance guarantees and penalty dollars	Performance guarantees are expected for each product line. However, please note that the addendum to the RFP changes the Customer Satisfaction guarantee to \$2,000 quarterly, as follows:																																				

expected for each product (i.e., Life and LTD)? For example; is \$14,834 quarterly at risk for Life PLUS \$14,834 quarterly at risk for LTD AND \$20,000 annually for Life PLUS \$20,000 annually for LTD and so on for STD and any other voluntary products offered? Or should the Life and LTD performance guarantees be combined with a total quarterly at risk as presented in the RFP of \$14,834 and annual at risk of \$20,000?

CRITERIA	PROPOSED AGREEMENT STANDARD	LIQUIDATED DAMAGE FOR NON-COMPLIANCE	PERIOD OF ASSESSMENT
Customer satisfaction will be ranked by a statistically-significant survey of policy holders in the group plan.	On a scale of 1 – 5 (1 as poorest and 5 as highest score), 80% of customers rank 4 or 5 and less than 2% rank as 1.	\$2,000	Quarterly

78. Small Diverse Business and Small Business Participation – During the 7/1/2013 contract negotiations, BDISBO advised us that we should determine the voluntary premium as noted in the bullets below. Should we do this similarly for this Voluntary RFP or should the % be based as written in the RFP as the actual voluntary premium paid each year of the 5 year contract (total contract cost)?

The Small Diverse Business and Small Business participation commitments should be based upon the actual voluntary premium paid each year of the 5-year contract.

<ul style="list-style-type: none"> <li>- Year 1 – total premium</li> <li>- Year 2 – premium based on additional enrollment</li> <li>- Year 3 – premium based on additional enrollment</li> <li>- Year 4 – premium based on additional enrollment</li> <li>- Year 5 – premium based on additional enrollment</li> </ul>	
<p>79. Part VI – Contract Terms and Conditions – it reflects to “Reference EUP on DGS website under Procurement Resources”. We had difficulty finding the Contract Terms and Conditions. Can you add the document as an Addendum? Or can you confirm if either of the two documents attached are the correct Contract Terms and Conditions we should be reviewing?</p>	<p>Please use the terms in Appendix P, which is added to the RFP via addendum.</p>
<p>80. Are the performance guarantees knock-out requirements?</p>	<p>No, meeting all guarantees is not a requirement for minimum responsiveness</p>
<p>81. What is the contract term?</p>	<p>Five years.</p>

<p>82. In Part VI, the RFP references a document titled "Standard Contract Terms and Conditions" (page 37, section III-8). We were not able to locate a file by that name on the website. May we obtain an electronic copy?</p>	<p>Please use the terms in Appendix P, which is added to the RFP via addendum.</p>
<p>83. Is the Commonwealth looking only for group voluntary products? Is there also interest in individually owned voluntary products?</p>	<p>Yes, the Commonwealth is only looking for group voluntary products.</p>
<p>84. Please provide a list of current benefits offered and the carrier for each. Also, please provide the plan design and premiums for health, disability, and all voluntary. Please provide a current bill for the voluntary products.</p>	<p>For information regarding the Commonwealth's health benefits, please visit <a href="http://PEBTF.org">PEBTF.org</a>.</p>
<p>85. Please provide current claims experience information for any existing group products that may be replaced.</p>	<p>Please see Appendix O for experience data.</p>
<p>86. Does the Commonwealth currently have a Section 125 plan for pre-taxing products? Will this continue?</p>	<p>Employee deductions for health care are taken on a pre-tax basis pursuant to a Section 125 plan document. This will continue.</p>



<p>87. If the Commonwealth has a Section 125 plan, are flexible spending accounts included? Will the selected vendor be to communicate and enroll these accounts? Will the selected vendor have the opportunity to introduce a partner for administration?</p>	<p>No, flexible spending accounts are not included. As stated in the RFP, the Commonwealth will not provide a Section 125 plan for voluntary benefits.</p>
<p>88. Will the incumbent voluntary benefits continue to be payroll deducted or will they be removed from payroll?</p>	<p>If the incumbent insurers are awarded a new contract through this RFP, payroll deductions will continue. If those contracts expire without new contracts with the incumbents, then the related payroll deductions would end.</p>
<p>89. Is there a current broker and/or consultant? How are they compensated? Will they remain as the broker of record?</p>	<p>There is no broker. A consultant was hired to assist with the cost scoring portion of the RFP. Payment to that consultant will be issued as required by the contract with that consultant and will not impact proposals issued in response to this RFP.</p>
<p>90. What are the dates of open enrollment?</p>	<p>Generally, fall open enrollments for voluntary benefits are in November.</p>
<p>91. Is the effective date July 1, 2018?</p>	<p>Yes.</p>
<p>92. What is the current enrollment method?</p>	<p>Online enrollment and paper enrollment.</p>
<p>93. Will the selected vendor be allowed to conduct group meetings and meet with each employee face-to-face?</p>	<p>Group meetings are permitted; face to face meetings are not.</p>
<p>94. Is there any need for employee self-enrollment?</p>	<p>Offerors may include self-enrollment if so desired.</p>
<p>95. Is there a need for call center enrollment?</p>	<p>Offerors must provide a single toll-free customer service number dedicated to Commonwealth employees.</p>

<p>96. What enrollment technology platform is used? Please describe how that vendor/administrator works with us to enroll and administer our products most efficiently?</p>	<p>The incumbent insurers use their own technology platforms.</p>
<p>97. Please provide an updated census with current Voluntary Life elections (EE and Dependent) and Voluntary LTD elections.</p>	<p>Please see Appendix G-3 for additional census data.</p>
<p>98. Please provide the current carrier's Life and LTD contracts and an outline of any plan changes that may have occurred.</p>	<p>Please see Appendix L for the current booklet certificates.</p>
<p>99. Please provide full experience exhibits from the current carrier showing annual premium and claims for the past 5 years. This should include the following:</p> <p>A. Voluntary Life</p> <ol style="list-style-type: none"> <li>1. Annual paid premium broken down by coverage (employee and dependent)</li> <li>2. Current rates and rate history by coverage</li> </ol>	<p>Please see Appendix O for experience data.</p>

(employee and dependent)

3. Annual paid claims by coverage (employee and dependent)
4. Paid claim list showing Date of Death, Date Paid, and Amount Paid for each employee and dependent life claim.
5. Premium Waiver claim list showing Gender, Date of Birth, Date Disabled, and Face Amount for each open premium waiver claim.
6. Annual covered lives by coverage (employee and dependent).

B. Voluntary LTD

1. Paid on Incurred Claim exhibit showing annual paid premium, paid claims, total reserves, and loss ratios by incurral year.
2. Current rates and rate history
3. Open and closed LTD claim listing showing Gender, Date of Birth, Date Disabled, Date Closed, Gross Benefit, Offsets, Net Benefit, Total Paid, Plan or Class (if applicable),

and Reserve for each claim.	
100. Please provide an outline of the STD plan being requested.	There are no specific plan design requirements to the RFP.
101. Please clarify the Life rate basis for Spouses. The RFP states rates are to be shown on a per \$1,000 basis. However, the rate card example provided in Appendix J states it is on a per \$10,000 basis. Which rate basis should be used in our quote?	If dependent life is being offered and is not an option of only \$5,000 or \$10,000, please use \$1,000 basis. (The current benefit only offers \$5,000 or \$10,000 dependent life.)
102. Who are the current providers of your voluntary benefits?	Prudential for long-term disability insurance and term life insurance. MetLife for home/auto insurance.
103. Can you please provide how many employees are enrolled and the premium for each line of coverage?	Please see Appendix O for experience data.
104. Is there a consultant assisting the Commonwealth on the evaluation of the proposals? If so, who is the consultant?	Yes, Deloitte is assisting on the cost scoring portion of this RFP.
105. Can you please provide us the medical and RX ("health") plan design summary that is currently offered to	For information regarding medical and Rx, please visit <a href="http://pebtf.org">pebtf.org</a> .

<p>active Commonwealth employees, including deductibles and copays?</p>	
<p>106. Can you provide a brief description of the Commonwealth employees paid time off (PTO)?</p>	<p>Please see III-1, Part C.</p>
<p>107. Can you please provide a list of the unions eligible for these benefits and the number of employees in each?</p>	<p>Most unions follow the leave policy as outlined in this RFP.</p>
<p>108. Can you provide us with the number of non-represented employees?</p>	<p>Please see the "Overall Complement" section Governor's Annual Workforce Report: <a href="http://www.oabis.state.pa.us/SGWS/2017/SGWS_MAIN.html">http://www.oabis.state.pa.us/SGWS/2017/SGWS_MAIN.html</a></p>
<p>109. Can you confirm if Aflac supplemental life and Trustmark disability insurance are being offered to the union?</p> <ul style="list-style-type: none"> <li>a. If yes, can you identify the unions that are eligible?</li> <li>b. Will the benefits being asked in the RFP replace or supplement these existing coverages?</li> </ul>	<p>Confirmed. Trustmark: AFSCME, UFCW, SEIU Local 668. Aflac: PSCOA. The benefits being asked for in this RFP will not replace those union coverages.</p>

<p>110. Has the Commonwealth considered a guaranteed hybrid life and long-term care product as a future offering since the Prudential long-term care plan is no longer allowing new enrollments?</p>	<p>Such a product is within the scope of this RFP and may be offered.</p>
<p>111. Would any of these benefits be available to the approximate 11,000 Higher Education employees?</p>	<p>No.</p>
<p>112. In order to provide specific and binding proposals for the listed voluntary benefits programs, please provide a census of eligible employees showing the following data elements for each eligible employee:</p> <ul style="list-style-type: none"><li>a. Age or date of birth</li><li>b. Annual compensation</li><li>c. Full-time or part-time status</li><li>d. Actively at work status</li><li>e. Date of hire/most recent date of eligibility to purchase</li></ul>	<p>Please see Appendix G-3 for additional census information.</p>

<p>voluntary benefits program</p> <p>f. Gender</p> <p>g. Job title/job description</p> <p>h. Zip code</p> <p>i. Indication of whether the employee has purchased the term life program and the long-term disability program.</p>	
<p>113. Please provide an Excel census file with the following information on each insured employee.</p> <p>Gender</p> <p>Date of birth</p> <p>Annual salary</p> <p>Class of insured</p> <p>Amounts of Life coverage for each employee.</p>	<p>Please see Appendix G-3 for additional census information.</p>
<p>114. If there are any employees working outside of the United States, including in US territories, please identify them on the census and provide each employee's country of citizenship and country of employment</p>	<p>No employees work outside the United States.</p>
<p>115. Please provide the following experience</p>	<p>Please see Appendix O for experience data.</p>

<p>data separately for each line of life coverage from 2012 to 2017  Annual paid premiums  Annual paid claims  Average annual volume  A premium rate history  A detailed list of all death claims paid</p>	
<p>116. Please provide a copy of a recent monthly billing statement/premium remittance statement to compare census volumes to reported volumes.</p>	<p>Payments are matched to payroll interface files; therefore, there is no bill. Please see Appendix G-3 for census data.</p>
<p>117. Please provide a list of open Waiver of Premium claims, including gender, date of birth, date of disability, and amounts of life coverage for all current disabled insureds.</p>	<p>Please see Appendix N for claim data, including continued insurance data (there is no true Waiver of Premium on the product currently offered).</p>
<p>118. Please provide a copy of the current Life policy or certificate so that our proposal can match current plan provisions as closely as possible. If this isn't available, please provide the following  Plan design (benefits, maximums, guaranteed issue limits, etc.)  Waiver of premium parameters (e.g. disabled prior to age 60, 9 month</p>	<p>Please see Appendix L for the booklet certificates.</p>



<p>elimination period, terminates at age 65)  Age reduction schedule  Any guaranteed issue opportunities available at annual enrollment</p>	
<p>119. If the life insurance plan does not include an insured Waiver of Premium benefit, for how long is coverage continued on a premium paying basis for disabled insureds? Please identify on the census the disabled insureds who will transfer to the new carrier.</p>	<p>Please see booklet certificates added as Appendix L, pages 31 and 32 under the header "When Your Insurance Ends."</p>
<p>120. Have there been any significant plan design changes in the last several years (i.e. change in benefit schedules, acquisitions, mergers)?</p>	<p>No.</p>
<p>121. Will the life insurance plan be self-administered/self-billed by the employer, or will the insurance carrier be responsible for maintaining individual employee records and for generating monthly invoices?</p>	<p>The insurance carrier will be responsible for maintaining individual employee records and for generating monthly invoices.</p>

<p>122. What level of commissions should be included in our proposed rates?</p>	<p>The Commonwealth must receive a single premium quote, the appropriate form as per Appendix J, that is comprehensive of all costs. The Commonwealth does not require a level of commission, if a broker relationship is involved.</p>
<p>123. How many enrollment meetings will the life insurer be expected to attend? At how many different locations will these meetings be held? How many employees will be at each location? During what time period will these meetings hold (i.e. October 12 - 14, etc.)?</p>	<p>Logistics of the meetings will be negotiated with the awarded vendors. The Commonwealth will target locations that have large employee populations.</p>
<p>124. Please provide a copy of the current LTD policy. If unavailable, please provide eligibility requirements, definition of disability, and elimination period for the LTD coverage.</p>	<p>Please see Appendix L for the booklet certificates of the current plans.</p>
<p>125. Please provide a description of your claims submission process; including such items as information gathering, submission, follow up and resolution.</p>	<p>Claims processing is handled entirely by the insurer.</p>
<p>126. Please provide the details of your current portability</p>	<p>Such processes are handled entirely by the insurer.</p>

and conversion administration process.	
127. Do you currently use a TPA or software vendor for your benefits enrollment and eligibility? If so, can the name of the vendor be released?	No, a TPA is not used.
128. For purposes of coordinating waiver of premium with the LTD plan, what is your LTD definition of disability?	Please see booklet certificates added as Appendix L, pages 31 and 32 under the header "When Your Insurance Ends."
129. Please describe your Evidence of Insurability process; including such things as submission, follow-up and notification.	Evidence of Insurability is handled entirely by the insurer.
130. Please describe any established file transfers you have in place today.	File transfers in place are described in III-1, Part D, beginning in paragraph number 24, on pages 23 to 24 of the RFP.
131. What's the best way to communicate with your employees during enrollment and throughout the year?	Email and home mailing.
132. Are current beneficiary designations held electronically or on paper? Who holds current beneficiary designations?	Beneficiary designations are a combination of paper and electronic. The insurer holds all beneficiary designations.

133. What is the process to share beneficiary information with the current carrier?	Beneficiary information is held strictly by the carrier and not communicated with the Commonwealth.
134. How many policy holders are on direct bill?	889