

March 15, 2018

BOARD OF COUNTY COMMISSIONERS
ORANGE COUNTY, FLORIDA

IFB #Y18-1000
GROUP MEDICAL AND PHARMACY PLAN

ADDENDUM NO.3

This addendum is hereby incorporated into the Request for Proposals document. The following items are clarifications, corrections, additions, deletions and/or revisions to and shall take precedence over the original documents. Deletions are denoted by ~~strike through~~ and additions via underline.

The Bid Opening Date remains Thursday, March 22, 2018 at 2:00PM

ADD ITEM

1. ADD – Exhibit_M_ Catastrpohic Detail with Case Management 2018 located at <ftp://ftp.ocfl.net/divisions/Purchasing/pub/Current%20Bids%20and%20RFPs%20-%20Large%20Files/Y18-1000/>
2. ADD – Exhibit_N_ Onsite Health Coaching Summary 2017 located at <ftp://ftp.ocfl.net/divisions/Purchasing/pub/Current%20Bids%20and%20RFPs%20-%20Large%20Files/Y18-1000/>
3. ADD – Exhibit_O_ Disease Management 2018 located at <ftp://ftp.ocfl.net/divisions/Purchasing/pub/Current%20Bids%20and%20RFPs%20-%20Large%20Files/Y18-1000/>

QUESTIONS

4. **Question:** Could you please provide an updated Exhibit E, as the facilities tab does not display properly?

Answer: Exhibit E is posted on the FTP Link as indicated in the RFP. The contents of the link have been verified. For technical assistance call (407)836-5635.

5. **Question:** With regard to the following: “All pages in the proposal must be numbered sequentially and indicate the name of the Proposer. If printed material has been enclosed as an exhibit, reference the exhibit's identifying information and location in the body of a response to a question” is it acceptable to have sequentially numbered pages that restart in each new section? With regard to any additional exhibits that may be requested, if they are extremely large can they be included only electronically rather than hard copy?

Answer: The proposal format shall be in accordance with the requirements stated on page 12, **PROPSAL FORMAT** of the Request for Proposals,

sequential numbering from beginning to end. All documentation shall be both hardcopy and electronic as an exact replica.

6. **Question:** The following section is mentioned several times: "See proposal format, Article 8, Health Plan RFP Attachments and Forms Guide for additional instructions." Can you please provide a page number, as we do not see a section labeled Article 8 or Health Plan RFP Attachments and Form Guide?

Answer: TAB 1 is to include Form 1, the Mandatory Features Checklist, and the additional 13 items listed; TAB 2 is to include Form 2 Group Health and Pharmacy Plan Worksheet; TAB 3 is to include Forms 3 and 4, the Medical and Pharmacy Network and Drug Formulary Worksheets; and TAB 4 is to include Form 5, the Pharmacy Discount and Cost Guarantee Worksheet. Disregard the reference to Article 8.

7. **Question:** Exhibit E includes CIGNA Behavioral Health Normative Utilization Data as of September 2017, alongside Orange County data. Please confirm the specific time periods for those statistics. Are they year to date 2017 through August or September, or are they rolling 12 month numbers?

Answer: This data reflects year to date through September 2017.

8. **Question:** Do the Orange County statistics provided align with the utilization that created the \$3.3m Behavioral Health billed amount also identified in Exhibit E?

Answer: No. Cigna Behavioral Health does not provide claims or utilization data.

9. **Question:** What type of onsite audit of the Behavioral Health can be expected as Provider Specific data isn't identified?

Answer: No onsite audit information is available.

10. **Question:** The CIGNA ASA and Schedule of Financial Charges, Page 10, contains a category of Care Management Services that CIGNA arranges for third parties to provide to OCG on their behalf. The vendor fees and services are documented as available upon request. Please provide the amount of these fees for the December 2016 through November 2017, in order for us to properly forecast this amount into a PEPM charge, as requested in the RFP specifications.

Answer: The County does not have, nor has the County requested Care Management services. No fees have been paid.

11. **Question:** The CIGNA ASA and Schedule of Financial Charges, Page 11, contains a category of Strategic Alliances and Other Vendors and HC Services Providers. The vendor fees and services are documented as available upon request. Please provide the amount of these fees for the December 2016 through November 2017 in order for us to properly forecast this amount into a PEPM charge, as requested in the RFP specifications.

Answer: The County does not have, nor has the County requested these services. No fees have been paid.

12. **Question:** Please confirm historical pharmacy pricing arrangements with CIGNA as forecasting of claims may need to reflect adjustments for changes to the requested for an effective date of 1/1/2019. In particular, Exhibit B shows a quarterly Pharmacy Rebate value beginning 3/2017 that was reflected in any previous quarters.

Answer: Confirmed as accurate.

13. **Question:** Form 2 -Page 15 of 24 (c) Network Provider Discount Guarantee – reads ‘indicate the minimum percent discounts you shall guarantee for 2019 and 2020.’ Yet, the table to complete indicates a request for 2019, 2020 and 2021. Please confirm the guarantee period.

Answer: The Discount Guarantee shall reflect 2019 and 2020. However, the discount guarantee requested for 2021 is subject to review for improved discounts with no corridor included in the guarantee. Refer to the Pharmacy Services Section E on page 32 of the RFP.

14. **Question:** What M/WBE vendors are being utilized by the current carrier to fulfill the County’s 24% of contract request?

Answer: Ambrose Printer 1.88% replaced another MWBE who went out of Business,
Cosby Corp Massage 7.74%

15. **Question:** Can the County please provide further clarification and details of their Cigna 2018 pharmacy financial guarantees?

Answer: The 2018 guaranteed charges for drugs covered under the Plan’s pharmacy benefit are reflected in the current ASA. Proposal evaluations are based on the discount guarantees proposed for the upcoming years and not on the current arrangement. Proposals are to follow the Scope of Services requested.

16. **Question:** Regarding the "One (1) Full time Health Coach to assist the County with wellness initiatives and work directly with employees" and "Two (2) Full time registered dietitians to assist the County with wellness initiatives and work directly with employees" requested in the RFP, does the County want three individuals providing one-on-one member coaching, or would the County want one person (the Health Coach) to instead focus on engagement, culture of health, and wellness strategy while the other two Registered Dietitians provide individual member coaching?

Answer: The County requires three individuals focused on one-on-one coaching and group coaching/presentations as well as working collaborating on employee engagement, the culture of health, and wellness strategies.

17. **Question:** Does the County currently have these three full-time positions with your current vendor?

Answer: No. Currently, there are two individuals (a coach and a registered dietitians, RD). The demand is abundant for their services.

18. **Question:** At how many locations is the County requesting these FTEs be at to work directly with employees?

Answer: The onsite coaches are based at our Wellness Center – Wellworks. From there, they travel to various locations around the County where large numbers of employee’s work.

19. **Question:** Is the County looking for resources that are one to many employees (e.g. wellness initiatives/health and benefit promotion) or one to one (small group/one-on-one lifestyle coaching or nutritional counseling)?

Answer: Both. The coaches will be involved in one to many employees’ initiatives as well as one to one initiatives.

20. **Question:** What scope of services does the County want the Health Coach to provide?

Answer: The County wants three individuals focused on one-on-one coaching and group coaching/presentations as well as working collaborating on employee engagement, the culture of health, and wellness strategies.

21. **Question:** Is the County looking for medical nutrition management or lifestyle change related to nutrition?

Answer: The County expects the health coach and registered dietitians (RD) to function within the scope of their professional capabilities. The County seeks lifestyle nutritional changes for employees. It also expects the coach and the RDs to provide specific guidance and direction based upon the medical nutritional needs of employees in one on one consultation.

22. **Question:** What scope of services does the County want the Registered Dietitians to provide?

Answer: The County wants three individuals focused on one-on-one coaching and group coaching/presentations as well as working collaborating on employee engagement, the culture of health, and wellness strategies.

23. **Question:** How many educational forums (ex. lunch and learns) do you hold each year and at how many locations?

Answer: Educational forums are on an as needed basis. Projections are not available.

24. **Question:** Do you have a wellness champion network? If so, please describe. How many champions are involved? What type of activities do they perform? What support do vendors currently provide to your Wellness Champion network?

Answer: Yes. The health coach and the RDs shall be part of a team led by the County's Wellness Coordinator. They assist the Wellness Coordinators with sharing information amongst their department(s), and engaging colleagues about OCG Wellness events/programs as well as creating excitement around living healthier and more active lives. This program is internal.

25. **Question:** Please describe your current Case Management offering in greater detail.

Answer: The full extent of the County's Case Management is reflected in Exhibit M.

26. **Question:** What is your Case Management reach/engagement rate? Please provide engagement statistics by modality (i.e. telephonically, digitally, in person). Please provide your definition of engagement.

Answer: Case Management details are not available at this time.

27. **Question:** Please provide the current ROI attained as well as a list of clinical care and utilization improvement statistics.

Answer: Case Management details are not available at this time.

28. **Question:** Please provide additional insight into what is working well and what you would like to see improved.

Answer: Current Case Management performance is satisfactory.

29. **Question:** Please describe how you receive your Case Management reports now. Are they quarterly/semi-annual/annual reports? Do you require ad-hoc custom reports? If so, how many per year?

Answer: Case Management details are not available at this time. The full extent of the County's Case Management is reflected in Exhibit M. The County receives Exhibit M monthly. We require custom reports at no additional cost.

30. **Question:** Please describe your current Disease Management offering in greater detail. What is the prevalence rate by disease state?

Answer: The full extent of the insurance company's Disease Management is reflected in Exhibit O. The Diabetes Prevention Program and the Diabetes Care Program are separate programs.

31. **Question:** Please provide the current ROI attained as well as a list of clinical care and utilization improvement statistics

Answer: The full extent of the insurance company's Disease Management is reflected in Exhibit O. The Diabetes Prevention Program and the Diabetes Care Program are separate programs. The information as requested is not available.

32. **Question:** Please provide additional insight into what is working well and what you would like to see improved.

Answer: The County is satisfied with the current Disease Management program.

33. **Question:** What percent of members with a chronic illness are identified as high risk, moderate risk and low risk? Of those, what percent are engaged by modality (telephonically, digitally, in person)? Please provide your definition of engagement.

Answer: The full extent of the insurance company's Disease Management is reflected in Exhibit O. The information as requested is not available. Engagement is defined as actively working with a coach either telephonically or physically and advancing toward a goal.

34. **Question:** What is the average length of time individuals are engaged in your current Disease Management programs by modality (telephonically, digitally, in person)?

Answer: The full extent of the insurance company's Disease Management is reflected in Exhibit O. The Diabetes Prevention Program and the Diabetes Care Program are separate programs. The information as requested is not available.

35. **Question:** Please describe how you receive your Disease Management reports now. Are they quarterly/semi-annual/annual reports? Do you require ad-hoc custom reports? If so, how many per year?

Answer: Disease Management reports are provided and reviewed monthly. The full extent of the insurance company's Disease Management is reflected in Exhibit O. The Diabetes Prevention Program and the Diabetes Care Program are separate programs. When requested, custom reports are provided at no additional cost.

36. **Question:** Please describe your current Wellness offering in further detail. What Wellness program(s) do you currently offer to your population? Please describe including what conditions/issues are targeted today.

Answer: The County does not have a Wellness Vendor. We develop our own program using contractors for components (registered nurse, health coach, registered dietitian). A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

37. **Question:** What levels of engagement have you experienced with your current Wellness program?

Answer: Comprehensive details are not available. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

38. **Question:** How many individuals have completed a health assessment?

Answer: The County does not require health assessments. Instead, we encourage member engagement with their primary care providers. Comprehensive details are not available. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

39. **Question:** How many members have enrolled in a telephonic coaching program?

Answer: Comprehensive details are not available. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

40. **Question:** How many members have enrolled in an online coaching program?

Answer: A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

41. **Question:** How many members have enrolled in an in-person coaching program?

Answer: A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

42. **Question:** Of members that complete a Health Assessment, what percent participate in lifestyle modification programs?

Answer: Comprehensive details are not available. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

43. **Question:** Do you offer a financial wellbeing program currently? What does the program entail and focus on?

Answer: Comprehensive details are not available. The County provides an annual Financial Wellness seminar.

44. **Question:** What percent of members are outreached to by a Health Coach for telephonic counseling, and what percent perform their lifestyle modification programs digitally?

Answer: A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

45. **Question:** Do you make your Wellness program available to eligible adult dependents?

Answer: Telephonic coaching is available to covered spouses. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

46. **Question:** What is the average length of time individuals are engaged in your current Wellness programs by modality (telephonically, digitally, in person)?

Answer: A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary. The information as requested is not available.

47. **Question:** What results have been achieved with current Wellness programs, such as risk reduction improvement and improvements in lifestyle modifications? Please provide the actual results.

Answer: Comprehensive details are not available. A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

48. **Question:** Please describe how you receive your Wellness reports now. Are they quarterly/semi-annual/annual reports? Do you require ad-hoc custom reports? If so, how many per year?

Answer: The County receives a monthly report as reflected in Exhibit N. A summary is provided in Exhibit N Onsite Health Coaching Summary. When requested, custom reports are provided at no additional cost.

49. **Question:** Who is your current Wellness vendor?

Answer: The County does not have a Wellness Vendor. We develop our own program using contractors for components (registered nurse, health coach, registered dietitian). A summary is provided in Exhibit_ N_ Onsite Health Coaching Summary.

50. **Question:** Do you currently offer any kind of incentives for members to participate in your Wellness programming? If so, please provide additional information on the incentive strategy (including dollar values of incentives).

Answer: The County does not offer any financial incentives in our Wellness programming.

51. **Question:** What is the fulfillment type for the reward (ex. gift card, premium reduction, HSA deposit)?

Answer: The County does not offer any financial incentives in our Wellness programming.

52. **Question:** Do you plan to offer incentives to members to participate in the new contract? If so, please describe the incentive plan including what activities are incented and the reward for each activity. Will spouses or dependents allowed to earn incentives?

Answer: No. The County does not plan to offer any financial incentives in our Wellness programming.

53. **Question:** Do you perform biometric screenings on site each year? If so, at how many locations and how many people participate?

Answer: The County does not perform annual biometric screenings. The County encourages employees to have their annual physicals with their primary care providers. Additionally, the County performs wellness checks with a registered nurse under a different agreement.

54. **Question:** Do you offer offsite alternatives as well? If so, what types? What is the utilization per modality?

Answer: The County encourages employees to have their annual physicals with their primary care providers. Additionally, the County performs wellness checks with a registered nurse under a different agreement.

55. **Question:** Who is the current biometric screening vendor?

Answer: The County does not currently have a biometric screening vendor.

56. **Question:** Describe your culture of health in the workplace. How are leaders involved and positioning health and wellness?

Answer: The County promotes and encourages optimal health for each individual.

57. **Question:** Could you please provide more information on the diversity of your membership? Percentage of Spanish speakers? Top additional language spoken by percentage?

Answer: The County embraces diversity and continues to become more diverse each year. As of 2017, the ethnic breakdown is as follows:
White – 42.8%; Hispanic – 21.2%; Black – 30.7%; Asian – 3.3%; American Indian - .2%; Unspecified – 1.6%

58. **Question:** Please describe your current behavioral health offering in greater detail. What is your behavioral health utilization? What are your high-cost behavioral health drivers?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

59. **Question:** Please provide further information on your network access and out-of-network utilization.

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

60. **Question:** Concerning Behavioral health, what is your in-network versus out-of-network utilization?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

61. **Question:** Concerning Behavioral health, where is out out-of-network utilization concentrated (location, facility, etc.)?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

62. **Question:** Concerning Behavioral health, do you have significant out-of-network usage consolidated with a few providers?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

63. **Question:** Concerning Behavioral health, what is driving your out-of-network utilization? For example, do you need more of a specialty provider type, more general providers in a specific area, or are individuals travelling for substance abuse treatment?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

64. **Question:** Concerning Behavioral health, are there specific challenges with outpatient treatment access?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

65. **Question:** Concerning Behavioral health, please provide your last three years of behavioral health utilization reports.

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available beyond the time period in the report.

66. **Question:** Please provide a more detailed description of your substance abuse utilization over the past 24 months. No further specific claims detail is available beyond the time period in the report.

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

67. **Question:** Concerning Behavioral health, are you experiencing significant out-of-network utilization related to substance abuse treatment? If so where is the utilization by region and specific facilities?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

68. **Question:** Concerning Behavioral health, what substances are driving your substance abuse utilization (opioids, alcohol, other)?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

69. **Question:** Concerning Behavioral health, what age groups are driving the utilization?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

70. **Question:** What cost impact has substance abuse treatment had over the last three years?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available beyond the time period in the report.

71. **Question:** What is your current readmission rate? What is your current recidivism rate?

Answer: Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available. The information as requested is not available.

72. **Question:** Who is your EAP provider?

Answer: ComPsych is the current EAP provider.

73. **Question:** What is your level of satisfaction with your current medical/behavioral integration? Do you feel there is room for improvement? If so, what are the current challenges?

Answer: The County is satisfied with the current medical/behavioral integration.

74. **Question:** Please describe how you receive your Behavioral Health reports now. Are they quarterly/semi-annual/annual reports? Do you require ad-hoc custom reports? If so, how many per year?

Answer: We are not currently receiving behavioral health reporting but the County desires this reporting. Custom reporting shall be provided at no additional cost. Please refer to the Exhibit E, Behavioral Health Detail worksheet for additional information. No further specific claims detail is available.

75. **Question:** We have noticed in your RFP it notes that carved out solutions aren't being requested. Is there an opportunity for a stand-alone solution separate from a carved into the health plan option to be evaluated?

Answer: There is no opportunity to submit a stand-alone solution.

76. **Question:** Employers Health works with over 160 plan sponsors, many governmental agencies throughout the country just like you, to deliver great value through a tightly managed contract without sacrificing plan design flexibility, direct access to the PBM and superior member experience. We have industry leading contracts with both CVS Caremark and OptumRx, two of the top three PBMs available.

Answer: There is no opportunity to submit a stand-alone solution.

77. **Question:** Would you allow us to submit a bid for your consideration in this process?

Answer: There is no opportunity to submit a stand-alone solution.

78. **Question:** We are running into issues trying to open the facility tab of the "Exhibit E- Medical Discount Pricing File" excel document provided with the proposal- can you please reissue this file? Without access to that data, we would be unable to accurately complete Section 8 Item 2.b. (Provider Discount Pricing).

Answer: Exhibit E is posted on the FTP Link as indicated in the RFP. The contents of the link have been verified. For technical assistance call (407)836-5635.

79. **Question:** Can bidders restart page numbering within tabs?

Answer: The proposal format shall be in accordance with the requirements stated on page 12, **PROPSAL FORMAT** of the Request for Proposals, sequential numbering from beginning to end.

80. **Question:** Please confirm that those referred to in the census as “H” are in the HSA \$1500 deductible plan, and those referred to as “L” are in the \$750 deductible plan.

Answer: Confirmed.

81. **Question:** Can you let us know what the 110% of out of network reimbursement rate for non-par providers stated in Cigna’s benefit summary is based off of (Medicare, participating fee schedule, etc.)?

Answer: Medicare

82. **Question:** Can you please reissue Form 4 (Pharmacy Formulary Disruption) with 11-Digit NDCs. We are unable to provide the specific information with only 7-Digit NDCs.

Answer: Form 4, Pharmacy Network and Formulary has been revised and is titled Revised 3.12.18 Form_4_Pharmacy_Network_and_Formulary.

83. **Question:** Can you provide an updated medical claim repricing file that includes a column with the zip code for the providers’ actual locations (with only the ones for their billing locations included in the original file)?

Answer: No. We only have access to the billing zip codes.

ACKNOWLEDGEMENT OF ADDENDA

a. The bidder shall acknowledge receipt of this addendum by completing the applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned not later than the date and time for receipt of the bid.

b. Receipt acknowledged by:

_____	_____
Authorized Signer	Date Signed

Title	

Name of Bidder	