



**REQUEST FOR PROPOSAL FOR ANCILLARY GROUP INSURANCE
(DENTAL, VISION, BASIC LIFE, VOLUNTARY LIFE, SHORT-TERM
DISABILITY AND LONG-TERM DISABILITY**

HAMILTON County requests proposals for the provision of group dental, vision, basic life, voluntary life, short-term and long-term disability insurance program, which includes:

Employer Paid – Ancillary Insurance (Dental, Vision, Basic Life with AD&D, Voluntary Life with AD&D, Short-Term and Long-Term Disability). The employer shall contribute 100% to the Basic Life insurance and employees shall contribute 100% for Dental, Vision, Voluntary Life, Short-Term Disability and Long-Term Disability insurance.

It is the intent of the Board to provide optimum benefits to meet the specific needs of its employee group by the most economical means possible. The group contains approximately 160 active employees and retirees.

VENDOR PRESENTATION. All responding vendors will be required to present their proposal to the Hamilton County insurance committee. Each vendor will be notified by the Board of County Commissioners as to the date and time of their presentation.

A. GENERAL INFORMATION

1. Telephoned, telegraphed or faxed proposals will not be accepted.
2. **RFP DELIVERY** . Sealed bids must be in writing and delivered by hand or US Mail to the Hamilton County Board of County Commissioners, Attn: Greg Godwin, Clerk of Court, 207 NE First Street Room 106, Jasper Florida 32052.

RFP CONTACT

Robin Riley, Acentria Public Risk

Robin.Riley@Acentria.com

Schedule/Project Timeline

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| May 15, 2023 | RFP# 23-100 Published |
| May 24, 2023 3:00pm EST | Last Day to Request Additional Information or Clarification |
| June 5, 2023 3:00pm EST | Response Due Date |
| TBD | Committee meeting to review plan designs and proposals |
| TBD | Board Workshop to review plan designs and proposals |
| July 18 th or soon thereafter | Board meeting to approve committee's recommendation. |

3. Proposals are due on Monday, June 5, 2023 @ 3:00 p.m. EST. Proposals received after specified date and time will not be considered. Proposals shall be in a sealed envelope, clearly marked "Proposal for Group Dental, Vision, Life and Voluntary Life Insurance, Short- and Long-Term Disability." Proposals shall be a firm offer through December 31, 2023. Proposals will be opened **only** (no decision to be made on this date) on Monday, June 5, 2023 at 3:15 p.m. After review by the insurance committee a decision may be made by the Board of County Commissioners on July 18, 2023, or soon thereafter as practical.

4. **Attachments:**
 - Census – Please request via email to: Robin.Riley@Acentria.com (A Census will be provided in excel format and will be sent via secure email).
 - Claim Report for the most recent 24 months,
 - Benefit Summaries
 - Life insurance policies

5. **NUMBER OF PROPOSALS.** Each vendor must provide five (5) complete copies of their proposal. One proposal should be labeled **original** with an original signature of an officer of the company authorized to bind this proposal.

6. **MODIFICATIONS/ADDENDUMS TO REQUEST FOR PROPOSAL.** Hamilton County reserves the right to revise or amend the Request for Proposal prior to the proposal due date, and such revisions and amendments will be provided by written addendum to all potential proposers.

If it is in Hamilton County's judgement that an extension of the proposal due date is necessary, the due date may be postponed by as many days as in the opinion of the Risk Manager are necessary to enable proposers to revise their proposals. Addendum's will state the new proposal due date.

7. **WAIVER/REJECTION OF PROPOSALS**. All proposals will be considered. However, Hamilton County reserves the right to waive formalities, to reject any or all proposals deemed to be in the Hamilton County best interest, or to negotiate or not to negotiate with individual proposers, and the decision of the Board will be final. Failure to adequately complete the Proposal Summary Forms will be grounds for Hamilton County to consider a proposal non-responsive.
8. **ACCOMMODATION TO HAMILTON COUNTY GUIDELINES**. Hamilton County prefers that proposals respond to the guidelines stated herein, with no major variation. Where alternatives are proposed, proposers are expected to be specific about how the alternatives deviate from what was requested, with special emphasis on cost, coverage and service differentials. Proposals should clearly identify deviations from the current plan.
9. **CONTRACT EFFECTIVE DATE/TERM**. Coverage/contracts shall be proposed for a term beginning October 1st, 2023 and ending September 30, 2024. Upon mutual agreement of the Board and Service Provider(s), coverage/contracts may be extended for additional one-year periods.

The Hamilton County renewal for subsequent annual contract terms will, in part, be dependent upon acceptability of cost, coverage, service and provider stability.

10. **INFORMATION PROVIDED/ADDITIONAL INFORMATION**. This information is provided to facilitate proposals. Much effort was made to provide necessary and accurate information when this request was prepared, but Hamilton County is not to be penalized for any lack of completeness. Accuracy of this data is not guaranteed. It is the sole responsibility of proposers to assure that they have all information necessary for submission of their proposals.
11. **TERMINATION/RENEWAL/INCREASE NOTICES**. Hamilton County will require at least 120 days notice of non-renewal of contracts and at least 120 days notice of any increase in rates/premiums.

If Hamilton County shall be required to provide advance notice to the proposer of cancellation or non-renewal, the required notice should not exceed 60 days.

Changes in cost shall occur no more frequently than on an annual basis, unless directly related to changes in benefits requested by Hamilton County.

12. **REQUIRED TIME LINE**. Dates for open enrollment, issuance of I.D. cards, etc..., will be as determined by Hamilton County Board of County Commissioners.

13. **INSURER QUALIFICATIONS.** Proposals will only be accepted from financially sound insurers, authorized to do business in Florida. Best's rating of "A" or better is required for each insurer being proposed. Please, provide a copy of your most recent Best's rating. Insurers should explain the full range of their services available to Hamilton County and should state their experience, expertise and data processing capability. Background information should be furnished on personnel that will service the group. Please, provide a list of other political subdivisions, i.e., county, city, or school boards to which you are currently providing benefits. Include the contact person and phone number for these accounts.
14. **SUBCONTRACTING.** Where proposers do not have "in-house" capability to perform work desired in the Request for Proposal. Subcontracting will be permitted only with prior knowledge and approval of Hamilton County. Hamilton County must be assured and agree that any proposed subcontractor(s) can perform the work to the desired quality and in a timely manner. Therefore, the name of any intended subcontractor(s) should be identified in the proposal.
15. **INSURER/PPO/HMO AGENT REFERENCES.** The Hamilton County Board of County Commissioners' Agent of Record is Acentria Public Risk. We are requesting your proposal to include 10% commission for our Agent of Record.
16. **SUCCESSFUL PROPOSER HOLD HARMLESS/PAY ON BEHALF.** The successful bidder will maintain all claims fiduciary with the plan.

Successful proposers will be expected to provide evidence of their general, professional and directors and officers liability insurance. Preferred limits of liability are **\$1,000,000** per occurrence **\$3,000,000** annual aggregate.

17. **AGENT OF RECORD COMPENSATION.** The Hamilton County Board of County Commissioners' Agent of Record is Acentria Public Risk. We are requesting your proposal to include 10% for each line of coverage.
18. **AUTHORIZED OFFER.** The person submitting the proposal should indicate the extent of authorization by the insurer, PPO or HMO to make a valid offer in the proposal summary that may be accepted by Hamilton County to form a valid and binding contract.

If the person submitting the proposal is not authorized to submit a proposal that can be bound by Hamilton County's acceptance, such person should also obtain the signature of an authorized representative of the insurer that may result in a binding contract upon Hamilton County's acceptance.

Proposals should be typed or written in ink, signatures should be manually signed in, and any corrections should be typed or in ink and initialed.

19. **PUBLIC ENTITY CRIMES**. All proposals shall be accompanied by a signed and notarized copy of the Florida Public Entity Crimes Statement form. Failure to submit the completed form with the proposal may be cause for proposal disqualification as non-responsive.
20. **CONFLICT OF INTEREST**. The award of contract is subject to the provisions of Chapter 112, Florida Statutes. All proposers must disclose with their proposal the name of any officer, director, or agent who is also an employee or trustee of Hamilton County. Further, all proposers must disclose the name of any employee or trustee of Hamilton County who owns, directly, or indirectly, an interest of five percent or more in the proposer's firm or any of its branches.
21. **EVALUATION OF PROPOSALS**. In Hamilton County's evaluation of proposals, several items shall be considered in determining proposer responsiveness, including but not limited to:
 - Stability: Financial stability of the insurer and network.
 - Provider Network Analysis: The capabilities and experience of proposers.
 - Coverage: The amounts and breadth of coverage and extent of deductibles, co-pays, co-insurance, restrictions and exclusions.
 - Cost: Although cost will be a major consideration in evaluating proposals, it will not be the only consideration.
 - Service: The capabilities and experience of proposers to service employee questions and concerns
 - Retiree Life: There is great importance placed on minimal disruption coverage amounts and costs of our Retiree Life participants.

The order in which these items have been listed does not necessarily reflect their order of importance. It is possible that Hamilton County in its judgement may consider a proposal non-responsive solely because one of these key items is unsatisfactory. For example, a proposal may be considered non-responsive solely on the basis of unsatisfactory cost, or non-responsive solely on the basis of unsatisfactory coverage or non-responsive solely on the basis of unsatisfactory provider access, etc.

22. **COMPLIANCE WITH FEDERAL LAW/FLORIDA STATUTES**. Proposers are expected to assure that proposed programs will meet Hamilton County's obligations set forth by any Federal or State Legislation in effect at or subsequent to, contract inception. Proposers shall comply with all applicable Florida Statutes.

B. PLAN ADMINISTRATION

1. **BENEFITS ADMINISTRATION**. This portion of the Request for Proposal is to describe the Ancillary insurance services desired for dental, vision, basic life and voluntary life. For purposes of the Request for Proposal, the term "ancillary insurance benefits" will include Dental, Vision, Basic Life with AD&D and Voluntary Life with ADD&D and Short- and Long-Term Disability.

2. **GENERAL ADMINISTRATION OF SERVICES.** The insurer will be responsible for any filings and approvals of documentation or audits of the insurance plan, which may be legally required. Proposers will describe in detail, claims handling, statistical reporting services and other services normally provided, set forth the administrative services proposed, and provide a proposed administrative contract.

Each proposer should state the location and staffing of the claims office, which will serve Hamilton County.

3. **PROGRAM IMPLEMENTATION.** The successful proposer will be expected to provide at no additional cost a plan document, certificates or booklets, and any other appropriate literature available (especially for orientation meetings) to describe the benefits to employees. Literature distributed to employees would be in layman's terms. Indicate the procedure and assistance to be provided for enrollment of employees who become eligible after plan inception. (Sample copy should be included in proposal).
4. **CLAIMS SERVICE.** Proposers are expected to provide prompt and efficient claims service for benefits which require submission of claims. Please, identify your standard claims turn around time.

The preferred definition should be from the date a claim is received by the claims administrator until payment is received by the participants or medical service providers.

5. **PREMIUM/CLAIMS EXPERIENCE RECORDS.** Hamilton County is desirous of receiving timely reports which provide details on its experience and which may be used to detect trends in benefit utilization which can be controlled to reduce ultimate group benefits program costs. Reports shall include, but not be limited to, the information detailed below.

Each quarter proposers are to provide summaries of enrollment, paid claims (separately for employees, retirees, COBRA, and their dependents and separately for each line of coverage) for the month just completed and a recap of policy year experience to date. Claims reports are to be provided additionally for 12 months after plan termination plus any extension of benefit periods. Each report should be identified by employee group established by Hamilton County.

Proposers should submit a listing of the variety of claims reports and other management reporting systems available to Hamilton County, and sample copies of each format that may be requested by Hamilton County.

State if you can not comply with reporting as outlined and subsequently, what you can provide.

6. **RETIREES**. The County complies with F.S. 1120.08 to provide retirees the option to remain in Hamilton County's regular group program at the Retiree's expense.

7. **FUNDING AND DELIVERY SYSTEMS**. Hamilton County requests all proposals on the following basis:

Funding Options: Fully insured with a sixty (60) day premium delay is requested.

8. **PROVISION OF LEGAL DEFENSE**. Please indicate the extent to which the proposers will provide a legal defense and/or pay claims in the event of suit by plan participants. Will the expense of legal defense be paid for by the proposer?