



CITY OF SUFFOLK

P.O. BOX 1858, SUFFOLK, VA, 23439-1858, T: (757) 514-7520; FAX (757) 514-7524

ADDENDUM NO. 1

City of Suffolk
RFP #20065-JS
February 7, 2020

Purchasing Division
442 W. Washington Street, Room 1086
Suffolk, VA 23434-5237
Phone: (757) 514-7520 / Fax: (757) 514-7524

The Request for Proposal (RFP) for Employee Benefits – Ancillary Coverage has been amended.

The following questions and answers are incorporated in the RFP:

Q1: The RFP states that “Retirees” under the age of 65 will be eligible for benefits. how will their premiums be collected?

A2: The City uses an outside vendor to collect for premiums. This service is part of the RFP.

Q2: Attachment A does not have a question/response section for legal or identity theft services. If we are responding as a legal/identity theft carrier how would you like us to respond?

A2: See Attachment D. There is a section for Legal and Identity Theft.

Q3: Can the following be provided?

- LTD enrollment added to the census or a current bill
- LTD experience
- Vision enrollment by tier added to the census or a current bill

A3: See Appendix M

Q4: What is the new Hire Waiting Period?

A4: If the employee is hired between the 1st and the 15th of the month, they are eligible for benefits the first of the following month. If the employee is hired between the 16th and the end of the month, they are eligible the first of the month following a full month of employment.

Q5: Regarding the Geo Access report, what parameters would you like for us to use? The standard based off of the employee zip codes is 2 general dentists in 10 miles, and 1 specialist in 15. Would that suffice?

A5: Yes, two general dentists in 10 miles and one specialist in 15 miles are acceptable parameters.

Q6: Would you like coverage to include domestic partners and/or children of domestic partners?

A6: No.

Q7: Want to Confirm that this proposal is "Net" of commissions? Section 9.0, #7 of the Employee Benefits Ancillary Coverage document states "The Provider shall not accept or receive commissions or other payments from third parties for soliciting, negotiating, procuring, or effecting insurance on behalf of the City. The City may not procure supplies, equipment, materials or other goods from a Provider on the same project".

A7: Correct, proposals should be net of commissions.

Q8: Can you provide the census in Excel format to include the zip code, enrollment status, dental plan election, and dental rate tier for each employee?

A8: Email the Contract Officer

Q9: Can we can get full SPDs for the plans rather than just the summaries?

A9: See Appendix N and Appendix O

Q10: Does 30 hours per week constitute an active, full-time employee? If not, what is the minimum number of hours worked that is considered full time?

A10: Yes

Q11: We would like to attend the pre-proposal meeting remotely. Is there a call-in number?

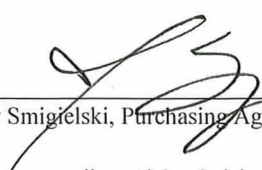
A11: Call number: 415-655-0045. Meeting number: 734 646 643
Password: Benefits2020!

Q12: **On Attachment A1 of the Dental & Vision Questionnaire:**
Item# 6 states that you will need three active and three terminated references, within the last 5 years, however, the very next page under the heading "**Dental and Vision Coverage**" asks to provide two active and two terminated references. Please advise which direction we need to take regarding references.

A12: Two active and two terminated references will be acceptable.

All other information remains unchanged.

Contract Officer:


Jay Smigielski, Purchasing Agent, CPPO

If you have any questions regarding this Addendum, please contact Jay Smigielski, Purchasing Agent at jsmigielski@suffolkva.us

It is the responsibility of the offeror to ensure that they have read and met the specifications of all addendums in their proposal.