Regional School District 17
57 Little City Road
Higganum, CT 06441
(860) 345-4534  Fax (860) 345-2817
www.rsd17.org

Regional School District 17

REQUEST FOR PROPOSAL

HEALTH INSURANCE BROKER/CONSULTANT

Submission Deadline:

October 21, 2013

10:00 AM Central Office
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I. INVITATION FOR PROPOSAL

Regional School District 17 (“District”) requests proposals to provide broker/consulting services for its medical health insurance program, COBRA, life insurance including accidental death and dismemberment, long term disability coverage and a flexible spending plan.

The official documents may be obtained at Central Office, Regional School District 17, 57 Little City Road, Higganum, CT or online at www.rsd17.org

Please read the RFP and related documents carefully and respond appropriately. Five (5) copies of the completed proposal shall be placed in sealed envelope(s) marked “INSURANCE BROKER/CONSULTANT” and delivered to Regional School District 17, Central Office, ATTN: Martha Vaughn, Director of Fiscal Operations, 57 Little City Road, Higganum, CT 06441 on or before 10:00 a.m. Eastern Standard Time, on October 21, 2013. Thereafter, bids will be publicly opened and read aloud.

Regional School District 17, as awarding authority, reserves the right to reject any and all proposals in full and/or in part and to waive any informality in bidding. In determining the appropriate broker/consultant, Regional School District 17 reserves the right to consider, in addition to price, the compatibility, quality, experience of the broker/consultant, sufficiency of resources of the broker/consultant as relates to the offering as well as the ability of the firm to provide future service. The decision of Regional School District 17 shall be final.

II. BACKGROUND

Currently, Regional School District 17 is self-insured through Anthem Blue Cross/Blue Shield; however, coverage with the company may change at a future date. Regional School District 17 maintains health plans for current employees and retirees which total approximately 400 contracts (1 contract = 1 employee health plan, i.e. 1 individual plan, or 1 family plan = 1 contract).

Currently, Regional School District 17 utilizes Lincoln for group term life coverage, accidental death and dismemberment and long term disability coverage. Our flexible spending plan is administered through Advanced Benefit Strategies. The Business Office is responsible for health benefits administration and the financial administration of all health benefits including employee payroll contributions.

Regional School District 17 is seeking a qualified firm to provide health care benefit consulting services for group, dental and prescription coverage in addition to group term life, long term disability and a flexible spending plan. It is also the intent of this RFP to identify a vendor to properly represent Regional School District 17 in its desire to minimize rate increases for all insurances, analyze current plans and recommend future plans. The selected health benefits/insurance consultant shall identify the base cost of services as provided under the Scope of Services listed in Section III.
III. SCOPE OF SERVICES TO BE PERFORMED

Regional School District 17 is seeking a firm that is highly skilled and fully knowledgeable of the health care industry, life insurance, disability insurance and other related services and will take a proactive approach in advising the District on all aspects of health care benefits and analyzing and making recommendations with regard to the benefit plan structure, program design, benefits and coverage. It is the District’s intent to hire a consultant who is independent and unbiased in its approach to offering advice.

During the term of this Agreement, the Health Insurance Broker/Consultant shall perform the following services:

- Serve as broker of record and or consultant for health, COBRA, dental, vision, disability, life, and flexible spending plans.
- Provide financial projections of future benefit costs and budgeting needs
- Provide guidance on health self-insurance reserve requirements and funding levels
- Compile cost and trend data on a monthly basis and report on a routine basis.
- Analyze data (past, current and future trends) for all plans. Formally meet with management at least twice per fiscal year and discuss and make recommendations to meet the District’s objectives.
- Provide suggestions for cost savings through plan design, alternative funding arrangements and employee benefits education while maintaining or increasing employee satisfaction with the benefit options and plans.
- Ensure accurate follow through on all negotiated contractual arrangements made between Regional School District 17 and any insurance carriers utilized by the District.
- Provide current information on managed care delivery systems, including HMO, PPO, POS, and other current and emerging systems and any other general health care consulting advice.
- Review claims data and compile statistics on a regular basis
- Renewal; Coordinate and review claims, rates, and renewal projections on an annual basis. Advocate and negotiate on behalf of the District with the carrier during the renewal process.
- Assist the District in interpreting coverage as applied to claims, as well as resolving problems associated with benefit plan administration.
- Assist Regional School District 17 with its budget planning for health care costs by providing an original estimated renewal for the next fiscal year prior to January.
- Monitor all contracts and maximize management information available through all providers.
Serve as a liaison between Regional School District 17 and the Insurance Carrier/Administrator to include; renewal negotiations, claim issue inquiries and resolutions, coordination of onsite visits, explanation of new procedures to staff and assistance in communication to employees and or covered dependents.

Provide onsite open enrollment support including assistance with document preparation

Provide support to Regional School District 17 in educating and facilitating positive working relationships with the districts bargaining unit(s)

Provide ongoing analysis of plan designs, cost containment strategies, and cost sharing alternatives available to Regional School District 17 while maintaining integrity of union contracts.

Draft Plan Documents and Summary Plan Descriptions as needed, facilitate revisions as necessary

Monitor claim performance. Recommend the establishment of addition performance standard agreement with vendors if there are any service problems.

Provide consulting advice for union negotiations before, during, and after the negotiations to include the impact of benefit demands and advice on implementing the new changes. Provide supportive materials for collective bargaining as needed.

Assist and provide recommendations in order to fulfill compliance requirements of State and Federal regulations, statutes, and mandates (COBRA, HIPPA, etc.)

Facilitate and track all data and claims with the carrier for specific and or aggregate coverage and negotiation of the stop loss contract and terms

Prepare Manage and Review market place through formal bids and Request for Proposals to assure rates and fees are competitive. Present findings including evaluations and recommendations annually and at the request of Regional School District 17.

Provide routine group benefit and general health care consulting advice.

Provide consulting advice on all facets of compliance for new and upcoming health insurance regulations including timelines of requirements, sample documentation, and general related recommendations.

Provide expert advice and/or testimony in disputes that may arise, including labor unions or litigation hearings pertaining to benefit issues.

Gather and present data and options from a variety of vendors in the areas of health, COBRA, dental, vision, disability, life, and/or voluntary benefits with the objective to maximize Regional School District 17’s value in terms of coverage, price, and service.

Analyze utilization data to identify preventative measures; analyze utilization data with an emphasis on the development of wellness initiatives.
• Advise and Assist in evaluating and selecting among plan design alternatives such as plan coverage, deductibles, co-payments, out of pocket payments, funding mechanisms and employee benefits education while maintaining or increasing employee satisfaction with the benefit options/plans.

• Provide current information on managed care delivery systems, including HMO, PPO, POS, Traditional, and other current and emerging systems and any other general health care consulting advice.

• Provide presentations to District management, and the Board of Education regarding plan design, plan changes, reserve requirements or other related topics as requested.

• Complete any/all application(s) for coverage and any/all associated documentation and/or forms.

• Minimally meet quarterly with the District to review current year progress.

• Provide the District with accurate management reports/utilization review information from all carriers on a continuing basis.

• Provide the District with information on new health programs, more cost effective products and future trends in employee benefits as they become available.

• Provide a team of servicing representatives available to the District on an ongoing basis.

• Respond to questions and requests promptly. (It is expected that there will be more than one individual within the firm capable of addressing possible concerns of the District.)

• Coordinate employee communication and conduct employee information meetings as needed and as new programs are implemented, providing assistance, materials, and resources for a wellness program, employee education materials for healthy lifestyles and explanation of benefits and health fairs.

• Analyze and report utilization trends and cost.

• Help to provide management and staff overview education on how to best utilize plan and contain cost.

• Review and assist with legislative issues, technical materials, and communication of this information to the District and Board.

• Assist with administration audits, forms and questions as needed for these programs or other applicable legal compliance and notification requirements.

• Maintain all systems to insure that all negotiated self-funding arrangements and other arrangements with any administrator and or insurance carriers are strictly adhered to.

• Provide written updates on new State and Federal legislation or judicial decisions impacting the District and suggest action or changes in operations or procedures to assure
compliance. (Said updates must be provided with enough notice to allow the District to comply with changes and communicate changes to employee and or bargaining units.)

- Review coverage documents and invoices to assure coverage has been correctly issued and billed.

IV. SUBMITTAL REQUIREMENTS

Proposals should demonstrate the qualifications, service level, and cost for services, competence and capacity of the firm. Proposals must address all the points outlined here:

- Brief history of firm including size and any specialty areas.
- Organization of the firm, number and location of offices, and number and type of employees in the office that would service this account.
- Background company data, including financial references.
- Particular expertise or involvement in the insurance/employee benefits industry.
- Public School experience including regional districts
- Description of service philosophy.
- An introduction of the account team, by name with specific roles, qualifications and experience, and distribution of responsibilities including support capabilities. (The successful respondent shall not employ any subcontractor to fulfill any of the duties herein specified without express, prior written approval of Regional School District 17.)
- Current use of technology, especially capability for computerized legal/benefit design research.
- Action-plan and timetable for assuming responsibilities as well as future design/cost containment suggestions.
- Detail of services that will be provided to Regional School District 17.
- Method used for carrier renewal and bid solicitation process
- Do you have in-house legal advisors who provide counsel to your clients? If so, are there additional fees for the services?
- Explain your ability to monitor regulatory and legislative developments on the federal and state level that may impact our benefit plans. How does your firm typically disseminate this information to clients? Do you publish newsletters and other informative publications that are routinely provided to your clients?
- Describe your experience with self-funded and alternately funded plans, including your ability to set reserves, report experience and project funding levels.
- Describe the performance standards and measurements you use to evaluate the services you provide to your customers. Describe how you have used the information gathered from the results of such evaluations.

- Explain how you will ensure consistency and quality of service and communication between benefits staff, employees and insurance companies.

- Describe the issues and challenges, as you view them, facing Regional School District 17 Benefit Plans in the upcoming year and how your company can assist. Explain why your company is uniquely qualified to provide benefit consulting/brokerage services to Regional School District 17, and what single qualification best differentiates your organization from other providers in the market place?

- What, if any, financial interest does your firm have in any of the companies providing services that are recommended? Do you have any distribution partnerships with other firms or vendors, either internal or external?

- What other types of Human Resources consulting services do you offer?

V. CONFLICTS OF INTEREST

- Disclose any conflicts or perceived conflicts of interest.

- Identify what procedures your firm utilizes to identify and resolve conflicts of interest.

VI. REFERENCES

- Provide a list of all clients who have left you within the last three years.

- Provide at least 5 references of current clients that are similar to Regional School District 17 with respect to size and complexity. For each reference, please include number of benefit-eligible employees; number/types of plans serviced, length of relationship with your firm, and contact name, title, address and phone number.

VII. DOCUMENTS TO INCLUDE

- Errors and Omissions Coverage

- Statement of compliance with federal and state laws

- Description of the firms view of their responsibilities regarding the provision of benefits brokerage services

- Additional relevant information may also be included, please do not include marketing brochures.
VIII. TRANSITION PLAN

It is planned that the successful firm will start its engagement with Regional School District 17 upon award of the successful proposal. Please provide a detailed action plan and timetable for assuming responsibilities at Regional School District 17.

IX. SELECTION CRITERIA

Regional School District 17 will evaluate proposals based on the needs of the District. Firms will be evaluated and selected based on compliance with specifications, completeness of responses, ability to provide strong administrative support, relevant prior school district experience, technical competence, the qualifications and experience of assigned staff, past record of performance, as well as the cost of service.

During the evaluation process, Regional School District 17 reserves the right to reject any and all proposals in full, and or in part and to waive any informality in bidding or request additional information or clarification from proposing firms.

Regional School District 17 will evaluate the proposals based upon the factor listed above. After a review of the written proposals, selected firms may also be asked to make an in person presentation. The proposers in attendance should be those that will have day to day and account management responsibilities. The District will choose the proposal that best fits its needs. The District is not obligated to award the contract based on cost alone. The decision of Regional School District 17 shall be final.

The successful firm will be required to enter into a written agreement with Regional School District 17 that will include service agreements and compensation for coverage. Such written agreement must be executes within thirty (30) days of the award or the District reserves the right to render the proposal invalid and may award the contract to another qualified vendor in its sole discretion.

X. COMMUNICATION AND QUESTIONS CONCERNING RFP

All questions must be submitted in writing to the Business Office at Regional School District 17 via email at mvaughn@rsd17.org

No oral interpretations shall be made to any respondent as to the meaning of any of the documents. Every request for an interpretation shall be made in writing, addressed and forwarded to the email address above. To receive consideration, such questions must be received by 11:00 a.m. Tuesday, October 15, 2013.

Proposers are responsible for checking the District website at www.rsd17.org for any addendums and updates to the RFP.
XI. GENERAL REQUIREMENTS AND CONDITIONS - INSURANCE

The selected Respondent shall be required to furnish a Certificate of Insurance evidencing the following insurance coverage within five (5) days from the Notice of Selection. Insurance coverage shall remain in full force for the duration of the contract term including any and all extensions. All renewal certificates shall be furnished at least thirty (30) days prior to policy expiration. Failure to maintain insurance coverage as required and name Regional School District 17 as an Additional Insured will be grounds for termination of the contract.

All policies shall be on the occurrence form. All Certificates of Insurance shall be reviewed and approved by Regional School District’s 17’s insurance agent.

The interest of Regional School District 17 shall be included in all insurance policies required (except for Workers’ Compensation coverage), as Additional Insured and shall include but not be limited to investigation, defense and settlement or payment of judgment. Such insurance must be written by companies of recognized standing, qualified to engage in the insurance business in the State of Connecticut. All such insurance policies shall and must contain an agreement by the insurer that it will not cancel or effect any material change in such policy except upon thirty (30) days prior written notice to each party.

Comprehensive General Liability Insurance (Broad Form) Including Contractual Liability and Products/Completed Operations: Coverage with minimum limits of $2,000,000 Combined Single Limit (CSL). All, if any, deductibles are the sole responsibility of the Respondent to pay and/or indemnify.

Professional Liability Insurance: Issued on a claim made basis for the term of the contract, with a limit of $5,000,000. The insurance is to remain in force for at least 2 years following the completion of the contract.

Umbrella Requirement: Coverage with minimum limits of $5,000,000.

Automobile Liability Insurance: Same limits as indicated for Comprehensive General Liability.

Workers’ Compensation Insurance: The statutory limit including Employers Liability with limits of $100,000 each accident, $500,000 for each disease/policy limit and $100,000 for disease for each employee.

Regional School District 17 is named as an Additional Insured as their interest may appear (for Comprehensive General Liability and Auto Liability) THE UNDERLINED WORDING MUST BE SHOWN IN THE SPACE PROVIDED FOR “COMMENTS” ON THE ACORD INSURANCE CERTIFICATE.
XII. HOLD HARMLESS AGREEMENT

The Respondent, its subcontractors, agents and assigns, will at times all defend, indemnify, protect and save harmless Regional School District 17 and its elected officials, its officers, agent and employees from any and all claims or demands for damages for bodily injury including death or property damage sustained by any party, including officers, agents, employees of the Respondent or its subcontractors. This clause will include but is not limited to the costs to investigate, defend and settle any claim, judgment or payment of any legal liability.

XIII. CONDITIONS

Respondents to this RFP will be expected to adhere to the following conditions and must make a positive statement to that effect in its proposal submitted.

Have sufficient reserve personnel to assure task continuity and completion of work in a timely manner.

Agree that all work produced under this agreement will become property of Regional School District 17 and shall have the right to use any/or all of the information obtained for use it deems appropriate.

The firm will accept and follow direction of Regional School District 17.

Agree to conform to State and Federal Regulations governing health benefits administration.

Agree that if Regional School District 17 cannot in good faith negotiate a written contract within a reasonable time with the selected firm, the District may unilaterally cancel its selection of that firm.

Agree to conform to all applicable laws, ordinances, statues and policies of the federal government, State of CT and Regional School District 17.
XIV. AFFIRMATIVE ACTION

Regional School District 17
Higganum, CT 06441

TO: All Proposers

FROM: Martha Vaughn, Director of Fiscal Operations

SUBJECT: Affirmative Action

Regional School District 17 is an Equal Opportunity Employer. Regional School District 17 has made it a matter of policy that they will not transact business with firms, which are not in compliance with all Federal and State Statutes and Executive Orders pertaining to non-discrimination.

STATEMENT OF POLICY

It is the employment policy of ___________________________________ that there will be no discrimination against anyone on the grounds of race, religious creed, national origin, ancestry, age, sex, marital status, sexual orientation, genetic information or disability in establishing and implementing hiring and employment practices.

In addition, this form is in full compliance with the letter and intent of the various Equal Employment Opportunities and Civil Rights Statutes noted above.

________________________________ _________________________________
Date Signed (Name/Title of Company Officer)

________________________________ _________________________________
Telephone # Street Address

________________________________ _________________________________
Fax # City/State
XV. PROPOSAL SIGNATURE PAGE

An officer of the firm duly authorized to bind the firm to the proposal submitted must sign all proposals. Responses to all sections of this proposal must be completed where appropriate and included in the sealed package submitted. Failure to properly sign the proposal and include all required information may result in the rejection of the proposal.

The information in this proposal and all attachments hereto is true and correct, and the officer signing below is duly authorized to bind this firm to such proposal.

Signed this ______________ day of ______________________, 20___.

By: _____________________________________________________________

Name of Officer: _______________________________________________

Title of Officer: __________________________________________________

Name and Address of Firm:

________________________________________________________________

________________________________________________________________

________________________________________________________________
XVI. FEE SCHEDULE - INSURANCE BROKER / CONSULTANT

The initial term of the contract will be for the remainder of this fiscal year 13/14 and three (3) years beginning upon award of this proposal. The District shall have the option to renew the contract for two (2) successive one-year periods under the same terms and conditions subject to appropriation of funds. Serve as broker of record and/or consultant for health, dental, vision, disability, life, and/or voluntary benefits for Regional School District 17.

The undersigned proposes to furnish all services, for insurance broker/consultant for the amount specified on this proposal form, in accordance with the terms of a negotiated contract with Regional School District 17 for the remainder of 2013-2014 and fiscal years; 2014-2015, 2015-2016 and 2016-2017.

INSURANCE BROKER/CONSULTANT:

Fee to be paid by Regional School District 17 to the broker/consultant:

Remainder of 2013-2014 (monthly) ______________________________

2014-2015 ____________________________________________________

2015-2016 ____________________________________________________

2016-2017 ____________________________________________________

Please itemize any services for which there would be an additional fee and include a list of additional services available but not included in your fee proposal on a separate sheet.

FIRM AND SIGNATURES

Firm Name ____________________________ Signature of Authorized Agent ____________________________

Address ____________________________ Typewritten Name of Agent ____________________________

City, State, Zip ____________________________ Telephone Number ____________________________

Date ____________________________
XVII. NON-COLLUSION STATEMENT

The undersigned respondent, having fully informed himself/herself regarding the accuracy of the statements made herein, certifies that:

1. The proposal has been arrived at by the respondent independently and has been submitted without collusion with and without any agreement, understanding or planned common course of action with any other vendor of materials, supplies, equipment or services described in the invitation to bid, designed to limit independent bidding or competition, and

2. The contents of the proposal have not been communicated by the bidder or its employees or agents to any person not an employee or agent of the bidder or its surety on any bond furnished with the proposal and will not be communicated to any such person prior to the official opening of the proposal.

The undersigned bidder further certifies that this statement is executed for the purpose of inducing Regional School District 17 to consider the bid and make an award in accordance therewith.

__________________________________________
Legal Name of Business

__________________________________________
Street

__________________________________________
City

__________________________________________
State

__________________________________________
ZIP

__________________________________________
Phone

__________________________________________
(Print/type)
Person authorized to sign for company

__________________________________________
Title of authorized person

__________________________________________
Signature

__________________________________________
Date