



THE SCHOOL DISTRICT OF LEE COUNTY

PROCUREMENT SERVICES DEPARTMENT

Tracey N. Adams, Procurement Coordinator

ADDENDUM TO CONTRACT DOCUMENTS

ADDENDUM NO.: 1

PROJECT NAME: RFP No. R167266TA – Group Critical Illness and Group Accident Insurance

DATE OF ISSUE: April 27, 2016

The following information shall be included in the RFP documents and is hereby made part of the contract documents in the form of clarification, addition, deletion or revision to the contract specifications.

Bidders' questions/issues and District answers (District answers are italicized):

- Q1. Could you let us know who the Cancer benefit is with and can we get the latest monthly billing statement?
- A1. *Allstate is the current carrier. The District does not have a monthly billing statement as the District is self-billed. Please see the census that was provided with the RFP.*
- Q2. Is the school district accepting proposal from insurance carriers who are working with a broker/agent?
- A2. *No, Aon is the broker. If the insurance carrier would like to submit a proposal as a broker, it would be accepted.*
- Q3. Is there an in force agent currently and if so, what is the current compensation /commissions?
- A3. *The current broker on the Cancer policy is Willis; Aon is the broker for this RFP.*
- Q4. We work with over 18 insurance carriers who offer Critical Illness and Accident insurance. Before we invest our time in gathering proposals for Lee County School District, could you confirm whether the School District will accept proposals from these insurance carriers working with a broker such as myself?
- A4. *No, Aon is the broker for this RFP.*

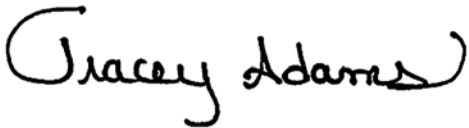
- Q5. With your size group, I have carriers that can customize their plan design and pricing to be competitive in most cases. Would it be possible to get a copy of the plan design and rates for your current carrier?
- A5. ***Please see Exhibit 3 attached. Premiums located on page 5 of the brochure.***
- Q6. Is Aon a fee-based consultant only on this RFP?
- A6. ***No.***
- Q7. Which Aon office is overseeing the RFP?
- A7. ***Tampa.***
- Q8. What is the name of the HRIS technology platform that you use?
- A8. ***PeopleSoft.***
- Q9. Could you provide a brochure or SPD for the two Allstate programs? Also, if that information could include current rates that would be helpful.
- A9. ***Please see the answer to question #5.***
- Q10. Asking for proposal to be in edge-bound format, does this mean we can use a three ringed binder to submit?
- A10. ***Yes, 3 ring binders are accepted.***
- Q11. In the RFP on page 10, you state “You will be permitted to submit only one proposal. Trustmark’s voluntary benefits need to be communicated and enrolled by a third party enrollment firm as we have with the other school districts that we insure who are located in Florida. We have multiple enrollment partners that provide different solutions. Can we submit more than one proposal if we are offering different solutions based on the different enrollment firms?”
- A11. ***School District of Lee County will enroll through their own system, PeopleSoft.***
- Q12. If any addendum are created, what is the last day they will be posted on the website?
- A12. ***Although unlikely, addenda can be posted to the website up until the proposal due date and time.***

Q13. Page 12 shows Attachment B – Samples of Communications; pages 16/17 shows Attachment B as References and Page 12 shows Attachment C – Implementation Timeline; pages 18/19 show Attachments C as Insurance Requirements form. Should we follow the directions under the Proposal Submittal Section or should we follow the names of the Attachments as they are listed further in the document. Would like clarification so that we can put our copies in the proper order.

A13. *Attached are edited and revised pages 12 & 13 of the specifications. Please follow the REVISED list when preparing your Proposal.*

There are no other changes at this time. Please acknowledge this addendum via Attachment D, Addenda Acknowledgement Form.

Thank you for your interest in The School District of Lee County.

A handwritten signature in black ink that reads "Tracey Adams". The signature is written in a cursive, flowing style.

**Tracey Adams, CLGPO
Procurement Coordinator**

- 6.4 **Corporate Overview:** Provide the location of the office from which service is to be performed and the number of partners, managers, supervisors, senior management and other professional staff employed at that office and the name of each individual in charge.

Disclose under what other or former name(s) the Proposer is currently operating or has operated.

Provide a statement of any litigation or regulatory action that has been filed against the Proposer, any affiliates, and/or subcontractors in the last three years. If an action has been filed, state and describe the litigation or regulatory action filed, and identify the court or agency before which the action was instituted, the applicable case or file number, and the status or disposition for such reported action. If no litigation or regulatory action has been filed against the Proposer, provide a statement to that effect. For joint venture or team Proposers, submit the requested information for each member of the joint venture or team.

Provide proof the Proposer satisfies the requirements specified in Section 7, Minimum Eligibility Requirements.

- 6.5 **Required Submittal Checklist:** Proposer shall complete and submit the Request for Proposal coversheet, page 1 of the RFP, with all required information completed and all signatures (blue ink preferred on original) as specified. Any modifications or alterations to this form shall not be accepted and may cause proposal to be rejected.
- 6.6 **Attachment A – Questionnaire and Rate Exhibit:** Proposers shall complete Attachment A in Excel, answering all questions as they relate to the Group Critical Illness and Group Accident Insurance plans. For any additional service offerings not requested by the District, provide a detailed description of the offering and the benefit to the District.
- 6.7 **Attachment B - Reference Form:** Proposer shall provide three (3) large (1000+) current and three (3) large (1000+) terminated clients for Group Critical Illness and/or Group Accident Insurance plans in the following order of preference: Florida school districts, other Florida public entities, non-public entities.
- 6.8 **Attachment C – Insurance Requirements Form:** Proposer shall complete the District's Insurance Requirements form.
- 6.9 **Attachment D – Acknowledgement of Addendum Form:** Proposer shall complete the form with all required information, copies of all addenda issued, and all signatures as specified.
- 6.10 **Attachment E – Debarment Form:** Proposer shall complete the form for Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier covered Transactions.
- 6.11 **Attachment F – Drug Free Workplace Certification:** Proposer shall complete the Drug Free Workplace Certification form.
- 6.12 **Attachment G – Public Entity Crimes Form:** Proposer shall complete, sign and obtain notarization of the form for sworn Public Entity Crimes statements required by section 287.133(3), (A), Florida Statutes.
- 6.13 **Attachment H – Conflict of Interest Form:** Proposer shall complete form with all required information and all signatures as specified and form should be **signed and notarized**.
- 6.14 **Attachment I – Waiver of Trade Secret Form:** Proposer shall complete form with all required information and all signatures as specified and form should be signed.
- 6.15 **Attachment J– Proposal Mailing Label:** Accurately completed and adhered to sealed proposal.

- 6.16 **Attachment K – Samples of communications:** Proposers shall provide samples of benefit communications and marketing materials for the Group Critical Illness and Group Accident Insurance plans.
- 6.17 **Attachment L – Implementation Timeline:** Proposers are asked to include a suggested implementation timeline beginning after Board award in September, Open Enrollment beginning in January 2017, and benefit effective date of April 1, 2017.
- 6.18 **Attachment M - Sample Administrative Agreement:** Proposers shall provide a sample administrative contract (or similar, if applicable)
- 6.19 **Attachment N – Policy Exclusions:** Proposers shall provide a complete list of all policy exclusions, including any state variations for the Group Critical Illness and Group Accident Insurance plans proposed.
- 6.20 **Attachment O - Sample Policy / Certificate:** Proposers shall provide a sample policy and/or certificate of coverage for the Group Critical Illness and Group Accident Insurance plans proposed.
- 6.21 **Attachment P - Compensation for Services Form:** Proposer shall complete Attachment K, Compensation for Services Form. No deviations from this form are permitted. No conditions or qualifications (e.g. participation requirements) to the quoted rates are acceptable.
- 6.22 **Attachment Q – Beneficial Interest and Disclosure of Ownership Affidavit:** Proposer shall complete Attachment E with all required information and all signatures as specified, including notarization. The District is requesting this affidavit to include a list of every “person” (as defined in Section 1.01(3), Florida Statutes to include individuals, children, firms, associates, joint ventures, partnerships, estates, trusts, business trusts, syndicates, fiduciaries, corporations and all other groups and combinations) holding 5% or more of the beneficial interest in the disclosing entity.

7. **MINIMUM ELIGIBILITY REQUIREMENTS**

In order to be considered for award and to be further evaluated, proposer must meet or exceed the following criteria. Proposer is responsible for providing the following information in their response. The Proposer shall also include a statement of acknowledgement for the items below in the Corporate Overview section of the response.

- 7.1 Proposer must be appropriately licensed in the State of Florida to provide Group Critical Illness and Group Accident Insurance. Proposer shall provide a copy of the license(s) with the response.
- 7.2 If the proposer is an insurance carrier, Proposer must have an AM Best rating in the secure bracket of the AM Best rating as of July 1, 2015. Provide a copy of the Proposers most recent AM Best rating published from the AM Best website. Print date must be no earlier than July 1, 2015.
- 7.3 If not an insurance company and as such not rated by AM Best, then the Proposer shall supply three (3) years of the most recent independently audited financial statements for the proposal to be considered.

8. **EVALUATION OF PROPOSALS**

The Procurement Agent and the Evaluation Committee reserve the right to: ask questions of a clarifying nature after proposals have been opened; interview any or all Proposers that respond to the RFP; or make recommendations based solely on the information contained in the proposals submitted. Proposals that meet or exceed the Minimum Eligibility Requirements shall be evaluated by the Committee according to the following criteria: