



July 19, 2022

RE: Superior Court of California, County of San Bernardino

REQUEST FOR PROPOSAL (RFP): Medical Benefits: RFP 22-01, Effective January 1, 2023

Due by: TUESDAY, AUGUST 2, 2022, 1:15 P.M., PT - NO LATE PROPOSALS WILL BE ACCEPTED

To Whom It May Concern:

We are conducting a medical marketing for our valued client, the Superior Court of California, County of San Bernardino (The Court). You are invited to submit a proposal for medical benefits with a January 1, 2023 effective date. Their zip code is 92415 and SIC code is 9211.

This RFP is composed of two documents:

- 1) USI Insurance Services' RFP cover letter with requested specifications and
- 2) The Court's official RFP that contains requirements and process for contracting vendors. **You** are responsible for reviewing **both** documents in their entirety.

The USI Team members assigned to the Court are Gary Delaney, Sr. Vice President, Christine Kwock, Sr. Account Executive and Pam Rodrigues, Account Manager.

COURT BACKGROUND:

The Court holds jurisdiction over San Bernardino County, the largest county in the United States, geographically, covering over 20,000 square miles and serving more than two (2) million people. The County has three distinct geographical areas: desert, valley and mountains.

The Court has 69 judges and 16 subordinate judicial officers who hear court proceedings in 12 locations: Barstow, Big Bear, Colton, Fontana, Joshua Tree, Needles, Rancho Cucamonga, four (4) sites in San Bernardino, and Victorville. There are 1,024 employees listed on the active census who service the needs of the Court by providing administrative and clerical support.

CURRENT BENEFITS PROGRAM:

The Court became a separate employer from the County of San Bernardino in 2001. The Court continued to participate in the County's health and welfare plans until August 1, 2011 when the Court contracted for their own benefit plans for its employees. The current medical carriers are Blue Shield HMO, Trio HMO, and Blue Shield PPO and COB (since January 1, 2018) and Kaiser HMO (since 2010).

They also offer voluntary retiree medical for early and Medicare retirees and their dependents. The Court's plans are non-grandfathered under the Affordable Care Act and the active and early retiree rates are unblended.

CURRENT MEDICAL ENROLLMENT:

Actives	Blue Shield HMO	Blue Shield PPO	Blue Shield TRIO	Kaiser Permanente	Waived Medical	Actives Total
EE	60	0	74	282	195	611
EE+ 1	37	0	33	114		184
EE+ 2 or more	32	0	44	142		218
Actives Total	129	0	151	538		1013

Early Retirees	Blue Shield HMO	Blue Shield PPO	Blue Shield TRIO	Kaiser Permanente	Early Retiree Total
EE	4	0	10	1	15
EE+ 1	0	0	0	7	7
EE+ 2 or more	0	0	0	10	10
Early Retiree Total	4	0	10	18	32

COBRAs	Blue Shield HMO	Blue Shield PPO	Blue Shield TRIO	Kaiser Permanente	COBRA Total
EE	0	0	2	7	9
EE+ 1	1	0	0	2	3
EE+ 2 or more	1	0	0	0	1
COBRA Total	2	0	2	9	13

Medicare Retirees are all enrolled in Kaiser Senior Advantage HMO. There are 21 participants. Please refer to the Medicare tab of the census for details.

Please note the Court allows employees upon their retirement from the San Bernardino County Employees Retirement Association (SBCERA) (www.sbcera.org), to choose between the Court-sponsored retiree plans, County-sponsored medical plans or COBRA. If the County-sponsored medical plan is elected, they forfeit the ability to enroll in a Court-sponsored medical plan at any time in the future.

PROPOSAL CONTENT (YOU WILL NEED TO ACCESS THESE DOCUMENTS FROM THE COURT'S WEBSITE PROVIDED BELOW):

- Rate History, Subsidy and Court Contribution information
- Blue Shield and Kaiser EOCs and Summaries
- Blue Shield claims experience and large claim information
- 2022 Benefit fair locations
- Blue Shield HMO PCP Listing for Provider Disruption Report MANDATORY TO COMPLETE
- Medical RFP #22-01 benefit matrix MANDATORY TO COMPLETE
- Court Formal RFP with Attachments MANDATORY!! PLEASE READ AND HAVE YOUR COMPLIANCE REVIEW THE
 COURT'S TERMS AND CONDITIONS. ALL MANDATORY TERMS AND CONDITIONS MUST BE ACCEPTED IN ORDER
 FOR YOUR PROPOSAL TO BE CONSIDERED.

MAIN PROPOSAL REQUIREMENTS:

1. Provide a quote assuming the Kaiser plan will renew and remain in place for the 2023 plan year. Kaiser's proposal will need to assume another carrier will be offered alongside their plan. Your proposal should duplicate as closely

- as possible the current level of benefits including the Affordable Care Act (ACA) and other legislative mandates. Any plan provision that deviates, limits, or excludes from current benefits must be addressed in the matrix.
- 2. Please provide your monthly rates with a separate line item identifying the dollar and percentage amount attributed to ACA fees. Non-Kaiser rates should include a **flat 1.1% commission**. **Kaiser rates should also include** a **flat 1.1% commission**.
- 3. Waive the binder check requirement.
- 4. Please duplicate the current plan offerings as closely as possible.

ADDITIONAL COURT PROPOSAL REQUIREMENTS:

- A. The Court uses Phoenix SAP as their online eligibility system tied to its payroll to enroll employees; therefore, carrier feeds will need to be established on a bi-weekly frequency. Please include an implementation timeline for this feature. Go "live" date for eligibility feeds will be December 3, 2022 with open enrollment in November.
- B. Eligibility: An employee in a regular position scheduled and paid for a minimum of 40 hours per pay period.
- C. Employees have 30 days from their employment date to enroll and 60 days from a qualifying event to provide Human Resources with proper documentation for the enrollment. The same timeframe applies to all mid-year status changes for employees and dependents.
- D. Employees must provide proof of other employer-sponsored group health insurance or Covered California that offers coverage comparable to a Court sponsored plan to be able to waive Court sponsored medical.
- E. Rates to be presented in monthly frequency; contributions will be deducted on a bi-weekly pre-tax (26 pay periods) basis.
- F. Registered Domestic Partners covered: only those who are registered with the state as well as their dependents (follows AB 205).
- G. Court paid medical subsidy formula is noted in the attachment. Part—time employees get prorated amounts based on the number of hours worked per pay period.
- H. A highly motivated service-oriented Account Team with a dedicated contact will be a key element to the Court. Please identify or describe your proposed Account Team and each Account Team member's daily functions please include support staff. Please provide location and the hours of operation and time zone for the Account Manager and Customer Service.
- 1. A hybrid approach will be used this year for enrollment meetings or benefit fairs and will be conducted at various locations to educate the employees on their benefits during their lunch hour. A representative from your company will be requested to attend. If you require a minimum number of employees to attend, please provide your guideline if a carrier change is made, we request the minimum to be waived for the first open enrollment held this Fall. Please provide a microsite where employees and dependents will be able to see the Court offerings and download summaries and value-added resources.
- J. The Court provides hard copy enrollment packets during open enrollment for actives, COBRAs, retirees, and new hires every year. Not all employees have access to computers to able to download or view their benefit materials. Please take this into consideration when quoting.
- K. Please summarize the value-added benefits that are included in your proposal. State whether they are for the HMO or PPO plan and if they are available in California only or also outside of California.
- L. Proposing carriers are encouraged to include a wellness program/services that educates employees in proven practices for maintaining and improving their health. Your proposal should include a specific description of the wellness services (and funds) to be provided and the specific means used to deliver those services.
- M. Please indicate the full name of the full provider network and website that is being quoted to allow for provider searches on your website.
- N. The Court allows employees to elect federal COBRA upon termination or enroll directly in a retiree medical option, if applicable. If they elect COBRA, the former employee/dependents can go on to Cal-COBRA or elect retiree coverage, if applicable. If Cal-COBRA is elected, they will stay on for 18 additional months. Upon exhaustion of Cal-COBRA they can elect Retiree medical, if applicable.

- O. COBRA administration will be administered by a third party and will require an implementation call to confirm the process.
- P. Coordination of benefits provisions. The Court allows employees who are married to each other to cover each other and their dependent children on the plan. (Kaiser: If employees married to each other cover each other as dependents and are enrolled in the same medical group, co-pays collected by the medical group will be cancelled out to \$0. The pharmacy co-pays can also be coordinated to \$0 in this scenario as well.) Please duplicate this for your plans. The Blue Shield plans do not work this way.
- Q. Please provide GEO Access reports for the medical plans based upon <u>all the zip codes</u> listed on the census (regardless of plan enrollment). The parameters must include: 2 PCP's within 10 miles; 2 SPC's within 10 miles; 1 hospital within 15 miles. Please also include the zip codes that fall outside your service area and those that are not eligible for a plan.
- R. Please provide your responses on the attached HMO provider disruption document to determine provider network disruption.
- S. Please include your financial ratings for: Standard & Poor's, Moody's Investors, and A.M. Best.
- T. Please provide a detailed carrier transition process that will provide the least amount of disruption for Court members who are in the middle of medical treatment upon the effective date. Implementation can begin at the end of September.
- U. The Court is requesting rate guarantee(s) for three (3) years, one for the initial term, one for an option to renew in the second year, and same for the third year. The option to extend the contract in year 2 and 3 is exercisable at the sole discretion of the Court.
- V. If you are awarded the contract, upon the end of your term if a carrier change is made, you will be required to provide premium versus paid claims reporting until the end of the plan year and provide run-out claims for the following quarter.
- W. If your company can write more than one line of coverage, please provide pricing based upon a "packaged" as well as "unpackaged" basis. Please refer to the following websites for other benefit related RFPs: https://caleprocure.ca.gov/pages/Events-BS3/event-search.aspx and https://www.sb-court.org/GeneralInfo/RequestforProposal.aspx.
- X. Please provide details about "pre-enrollment" (i.e.: access to customer service, email or website) support (during open enrollment for transitionary medical issues) if applicable.
- Y. Please detail how HMO members can change providers (please indicate cut-off dates and if it can be done via phone, online or website).
- Z. What has your client retention percentage been over the last three years in California for your proposed products?
- AA. Please include optional funds that can be used to cover the costs for wellness and benefits promotion. Please provide the details on how the Court would access the funds (ie. Pre-approval for expenses, reimbursement by service or lump sum). The Court is currently receiving a lump sum of \$40,000.
- BB. Please include a performance guarantee based upon implementation, service standards, etc. for the Court's consideration.

IMPORTANT: The Court has stringent requirements in their formal RFP that must be followed in order for your bid to be considered. Please read the Court RFP document that is posted on the procurement website very carefully. A Compliance representative of your company must review and accept all mandatory terms and conditions prior to signing off in order for your proposal to be accepted.

QUESTIONS ON THE RFP?

In compliance with the Court's RFP practices DO NOT contact the USI team directly. <u>All questions</u> pertaining to this RFP, attachments, and exhibits should be submitted to scccsb.rfps@usi.com and must include the RFP title: Medical Benefit

Plans and RFP number: **RFP #22-01**. Deadline for questions is July 25, 2022, 1:15pm., PT – late questions will <u>not</u> be accepted. Answers are scheduled to be posted on July 26, 2022 (estimated).

RFP SUBMISSION GUIDELINES:

Please send one hard copy of your proposal to USI Insurance Services (address below) via Fedex, UPS or hand deliver. The bidder must include the RFP name: **Medical Benefit Plans** and RFP number: **RFP #22-01** on the outside of the package. It must be received by **TUESDAY**, **AUGUST 2**, **2022**, **by 1:15 P.M.**, **PT**.

USI Insurance Service Attn: SCCCSB RFP Team 21250 Hawthorne Blvd., Suite 380 Torrance, CA 90503 (424) 390-0000 (for delivery purposes only)

- ✓ In addition, please provide USI with an electronic version of your proposal to scccsb.rfps@usi.com the rate or fee information and benefits matrix should be in excel; all others should be in pdf format with live links. The bidder must include the RFP name and number on the subject line of the email. Please submit the email by 1:15pm PT on August 2, 2022.
- ✓ You will be notified of the best and final offer (BAFO) opportunity which will be August 3, 2022, and due on August 5, 2022 by 1:15pm PT.

Please no elaborate printing or binding desired, rather focus on complete, clear, and concise content.

The due date has been set strategically in order to prepare the presentation to the Court's Employee Benefits Advisory Committee (EBAC) in August with the final recommendations going to the Judges in September for approval. Please note that carrier reference calls <u>may</u> be conducted on **August 19**, **2022** and interviews <u>may</u> be conducted on **August 22**, **2022**, **if necessary**.

This is a **blind bid** where submitted proposals are not shared in the market. You will have an opportunity to improve upon your proposal during the BAFO. We do reserve the opportunity to negotiate with the finalists.

Sincerely,

Pam Rodrigues Account Manager

Attachments

Cc: San Bernardino Superior Court
Gary Delaney and Christine Kwock: USI Team