ADDENDUM NO. 1

TO: ALL PROSPECTIVE OFFERORS
REFERENCE: RFP2000002983
FOR: Self-Insured Medical Plans, Flexible and Health Spending Accounts, On-Site Health Clinic & Pharmacy Benefit Management
DUE DATE/TIME: December 12, 2019 at 10 A.M.

The referenced Request for Proposal (RFP) is amended as follows:

1. The last day to submit questions regarding this RFP is Wednesday, December 4, 2019 at 10 AM.

2. Paragraph 7.1 is replaced in its entirety as follows:

   7.1 The offeror must submit the Technical Proposal in a separate binder that addresses Section 6. STATEMENT OF NEEDS and must include an Executive Summary that outlines the overall proposal, including identifying the specific service area(s) for which the offeror is submitting a proposal. The offeror must submit responses to the applicable questionnaire(s) for each service area identified in the Executive Summary. This information will be considered the minimum content of the proposal. Proposal contents shall be arranged in the same order and identified with headings as presented herein.

3. Paragraph 13.4 is replaced in its entirety as follows:

   13.4 Please submit (one) 1 copy of the Cover sheet (DPMM32), Attachments A, B and C and any issued addenda, together, but separate from the technical and cost proposals. Each original and set of the ten (10) copies of the proposal shall consist of:

   a. Technical proposal as required in the Special Provisions, paragraph 7, TECHNICAL PROPOSAL INSTRUCTIONS;

   b. Cost proposal as required in the Special Provisions paragraph 8, COST PROPOSAL INSTRUCTIONS;

4. See Attachment A of this addendum for responses to questions received regarding this RFP.

All other terms and conditions remain the same.

Penny Crawley
Contract Specialist
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THIS ADDENDUM IS ACKNOWLEDGED AND IS CONSIDERED A PART OF THE SUBJECT REQUEST FOR PROPOSAL:

Name of Firm

(Signature)  (Date)

A SIGNED COPY OF THIS ADDENDUM SHOULD BE INCLUDED IN THE PROPOSAL PACKAGE OR RETURNED PRIOR TO DUE DATE/TIME. FAILURE TO DO SO MAY RESULT IN THE REJECTION OF THE PROPOSAL.

NOTE: SIGNATURE ON THIS ADDENDUM DOES NOT SUBSTITUTE FOR YOUR SIGNATURE ON THE ORIGINAL PROPOSAL DOCUMENT. THE ORIGINAL PROPOSAL DOCUMENT MUST BE SIGNED.
Q1. What is the breakdown of number individuals on the PPO vs. HMO plan?
A1. 12,805 subscribers in PPO plans vs. 2,440 subscribers in HMO plan.

Q2. We understand vendors can participate in all or portions of the RFP. For example, we offer a highly-engaging and competitive to carriers Chronic Care Management program and would like to bid on that portion of the RFP to supplement the current Omada program for preventative care for diabetes management. Also, our EAP, MBH and Clinic program offering would be possible, too. Does the County accept carve outs for portions of the Medical piece of the RFP?
A2. Fairfax County Government is open to both an integrated and carved out offerings. To bid services please review Sections 7 and 8 – Technical and Cost Proposal Instructions, respectively.

Q3. Can you please provide a full pharmacy claim file with the below information for the most recent three months (at minimum)? Without the file, we may not be able to offer some of the pricing stipulations noted within the RFP (i.e. individual reconciliation, rebate minimum guarantees, etc.):
   • Drug NDC
   • Pharmacy NABP or NPI number
   • Retail/MOD Indicator
   • Dispense Date
   • Quantity Dispensed
   • Days Supply
A3. Reports have been added to the solicitation webpage under the link for electronic documents.

Q4. Would you be willing to accept a traditional pharmacy quote instead of transparent pricing as noted in the RFP?
A4. No. Fairfax County Government would like to maintain a pass through or transparent PBM model.

Q5. Can you please confirm that the census provided is subscriber based and not member based?
A5. Provided census is subscriber based.

Q6. The RFP included a requested Medicare Advantage medical plan to quote. Is there a requested Medicare advantage Part D plan design that the County would like quoted?
A6. Please refer to Exhibit 15 – Sample Medicare Advantage Plan Design.

Q7. Please confirm if the current Rx plan has an open or closed formulary?
A7. Closed

Q8. Does the formulary exclude any part D drugs?

Q9. Are generic drugs included on Tier 2 and Tier 3?
A9. Generics are Tier 1 only. For the PDP, generics can be Tiers 1, 3 and 4.

Q10. Are non-Part D drugs such as Erectile Dysfunction drugs included?
A10. Yes, for the PDP, the County has elected to buy-up and include Eds. In addition, the county includes prescription vitamins and Cold and Cough preps.

Q11. Does the current carrier offer the most comprehensive formulary available through the incumbent?
A11. Yes.

Q12. What is the average years of service for Medicare eligible retirees?
A12. Fairfax County Government determines eligibility to retire and to maintain benefits. Years of service varies and is only relevant for subsidy provided. Please refer to Exhibits 1 and 2.

Q13. Member months: We also need Rx member months for the same year claims have been provided (by month if possible). This should be provided for Medicare eligible members only and will be used to convert insured pricing to a per-member-per-month basis.
A13. The County will not provide this information.
Q14. Is it a requirement to quote $250,000 Individual Stop Loss?
A14. Yes.

Q15. We would recommend quoting $1,000,000 for this size group. Could we quote the requested $500,000 and also $750,000 and $1,000,000 as options?
A15. Please submit a proposal that represents how your firm would satisfy the requirements of the RFP.

Q16. Can you please confirm if we should quote stop loss on actives only or actives with pre 65 retirees?
A16. Quote on Actives and Pre-65 Retirees.

Q17. Should pharmacy be included under the stop loss quote?
A17. No.

Q18. What are the HSA assets under management, including cash balances?
A18. HSAs are personal banking accounts. We do not have access to this information.

Q19. Can you please confirm if there are any capitation charges that are being drawn through the claim wire for Behavioral Health? If so, can you please quantify those charges and confirm how they will be factored into the cost evaluation?
A19. Fixed fees for behavioral health are included in the total claims provided in Exhibit 7. The fees cover behavioral health claims in addition to behavioral care management programs. Carriers issuing a proposal should use the total claims to project future costs. The fixed fees for behavioral are not needed in order to project total claims costs.

Q20. What response format is the county requesting from the vendor for the Wellness portion of this RFP (layout for the technical and cost proposals)?
A20. Complete the entire RFP and only complete and submit the technical and cost questionnaires of the services you are bidding on.

Q21. Please provide details around the County’s current wellness platform and what it involves.
A21. FCG will not provide this information. Please see Exhibits 13 and 14.

Q22. Who is your current vendor for Wellness services and how long have they been serving the County?
A22. None. We have an internal program.

Q23. How many locations are typically served in relation to on-site wellness programming?
A23. All county facilities.

Q24. Why is the County currently going out to bid for your Wellness program?
A24. We are not going out to bid for a wellness program. We are looking for a wellbeing partner to enhance our current internal program.

Q25. What is the breakdown of number individuals on the PPO vs. HMO plan? Of those individual breakdowns, how many are employees, eligible dependents, and retirees?
A25. There are 12,805 subscribers in PPO plans vs. 2,440 subscribers in HMO plan. The County will not break down these numbers.

Q26. Could the panel tell us more about the FCG Employee Fitness & Wellness Center?
A26. The Employee Fitness & Wellness Center at the Government Center offers group fitness classes (1 studio, approximately 20 classes/week), personal training (approximately 40 personal training sessions per month), and a fitness center that is operational from 5 am-7 pm, Monday-Friday. Additionally, the Fitness Center staff conducts outreach programs, special events, and peripherally supports team sports and activities on the Government Center grounds. Approximate square footage not including locker rooms is 6,750. There is one fitness studio and no consultation rooms. There are ten trainers on staff and no retention management system. The LiveWell program offers discounted memberships to Fairfax County Park Authority RECenters for employees and retirees.

Q27. Per your current immunizations protocol, are you administering trivalent or quadrivalent flu shots?
A27. Approximately 1,700 vaccines were provided through LiveWell in 2018.
Q28. Could FCG expand on the scope and the expectations for the “medical self-care” program? Is this in reference to medical wellness programming, such as medical weight loss?
A28. “Medical self-care” programs generally refer to resources intended to help participants manage acute or chronic conditions such as diabetes, hypertension or musculoskeletal injury.

Q29. What are your current offerings for parent and families programming; more specifically, expecting mothers?
A29. Programs for expectant parents currently include: Promotion of health plan and partner resources and programs, Workshops and webinars, and Online resources.

Q30. How does the current vendor track participation and completion of the online, telephonic, and in-person wellbeing coaching programs?
A30. We don’t have a current vendor. Data is tracked internally in multiple ways (i.e. surveys, sign-ins, class registrations).

Q31. Could the county clarify more on the requirement for First Aid supported by the e-health portal? Will the county need online videos reviewing first aid skills or are you seeking online certification courses? I ask because our team guidelines state that we come on site for both certifications and skills tests to ensure 100% proficiency.
A31. The e-health portal refers to health information, decision support tools, digital educational modules, and similar resources. Information could be presented with or without certification.

Q32. Does the County have the space for the onsite clinic or is the County looking for the vendor to provide the space?
A32. We have yet to designate space at the Government Center (12000 Government Center Parkway, Fairfax, VA 22035)
Q33. Is there currently an onsite clinic that offers the services requested in this RFP?
A33. No.

Q34. Is the clinic to be on the County’s campus? If so, where is it? Square footage?
A34. Yes. We would like to use space at the Government Center (12000 Government Center Parkway, Fairfax, VA 22035). Estimated square footage is 2,000 - $2,500.

Q35. What are the anticipated hours of operation for the onsite clinic?
A35. Anticipated hours would be 6 am to 6 pm.

Q36. Does the County have an Electronic Medical Record?
A36. No.

Q37. Will the awardee have access to Cigna data and County’s risk management health care costs by departments and conditions?
A37. Unknown at this time.

Q38. How many individuals would have access to the clinic?
A38. All Fairfax County Government employees, approximately 20,000.

Q39. Which agencies/departments would the clinic serve?
A39. All.

Q40. For occupational health, how many estimated pre-employment exams annually, annual exams, OSHA exams, DOTs, etc.?
A40. Unknown at this time.

Q41. Would the clinic collect co-payments, co-insurance, and deductibles or would it be offered at a reduced/zero cost to patients served?
A41. Services would be at zero cost.
Q42. What metrics would be of most important to the county and how often would the county like to see them?
A42. Please refer to the On-Site Clinic Management Technical Questionnaire for requested reports. These would be provided cumulative, quarterly.

Q43. Would the clinic provide travel consults and vaccines that may not be reimbursable by FCG plans?
A43. No.

Q44. If services will be billed to FCG plans (Cigna and Kaiser), will the clinic also serve Medicare retirees who have opted out or are no longer eligible for coverage?
A44. No. Only active employees will have access to the On-site Clinic for the immediate future.

Q45. Will FCG provide 2018-19 historical data regarding visit codes, CPT codes, and ICD9s? This can tell us a lot of what about their population.
A45. The County will not provide this information.

Q46. Address your request for High Performing Providers
A46. Fairfax County Government is interested in reviewing bids that include a sub-network of the larger proposed network that offers preferred fees to high performing providers, and better outcomes to participants.

Q47. Is there a fee for employees and retirees to use the Employee Fitness and Wellness Center?
A47. Yes - $10 per month for gym/locker room, $9 additional for unlimited classes.

Q48. Will the Employee Fitness and Wellness Center be used for physical therapy services provided by the on-site clinic?
A48. Yes. Over the past several years as equipment has been replaced in the Employee Fitness and Wellness Center, the replacement items have been therapy grade equipment.

Q49. Are you looking for management, instructors, or other services for the Employee Fitness and Wellness Center?
A49. No. The Employee Fitness and Wellness Center is currently run by the LiveWell program and has an internal staff to support it.

Q50. Are you looking for a vendor to replace the MotivateMe program?
A50. We want to maintain a similar program but bidders are encouraged to present creative and innovative ideas to address all aspects of health, wellbeing and engagement.

Q51. Confirm your current PBM, is it Cigna or Express Scripts.
A51. Our current Pharmacy Benefit Manager is Cigna.

Q52. Can retirees enroll in any of the current plan offerings?
A52. Retirees under 65 can maintain coverage in any of the offered medical plans. Retirees over 65 and/or Medicare eligible can maintain coverage in all of the offered medical plans except the MyChoice CDHP.

Q53. Address the subsidy provided by Fairfax County Government to retirees based on years of service.
A53. The County will not provide data on years of service; the subsidy charts have been provided – reference Exhibits 1 and 2.

Q54. What is the percentage of retirees who maintain coverage in the offered benefits after retirement?
A54. Approximately 67%

Q55. Do you plan on pharmacy dispensing at the on-site clinic?
A55. No.

Q56. Is AON using their discount analysis tool?
A56. Yes.
Q57. Address references to diversity in the RFP.
A57. Fairfax County Government employees, retirees and dependents cover all portions of society and as per our One Fairfax Policy, everyone deserves “an equitable opportunity to succeed – regardless of their race, color, sex, nationality, sexual orientation, religion, disability, income or where they live”. We expect vendors to demonstrate support of this policy and use innovative and creative solutions to address underserved populations.