



JEFFERSON COUNTY
DEPARTMENT OF ADMINISTRATIVE SERVICES
729 MAPLE ST / PO BOX 100
HILLSBORO MO 63050
WWW.JEFFCOMO.ORG

Request for Proposal: EMPLOYEE HEALTH INSURANCE 2011 Date Issued: 7-26-10

PROPOSALS SHALL BE ACCEPTED UNTIL: TUESDAY, AUGUST 24, 2010, AT 2:00 P.M. LOCAL TIME.

**Specification
Contact:**

JACKIE WAGGONER
Department of Administrative Services
636-797-5479

**Contract
Contact:**

VICKIE PRATT
Department of Administrative Services
636-797-5382

**Mail (3) Three
Complete Copies
With Vendor And
Proposal
Information As
Shown In Sample:**

**Contract Term:
1-1-11 to 12-31-11**

**Vendor
Information:**

SAMPLE ENVELOPE

VENDOR NAME

VENDOR ADDRESS

CONTACT NUMBER

DEPARTMENT OF THE COUNTY CLERK

JEFFERSON COUNTY MISSOURI

729 MAPLE ST / PO BOX 100

HILLSBORO MO 63050-0100

SEALED PROPOSAL: (PROPOSAL NAME)

The undersigned certifies that he/she has the authority to bind this company in an agreement/contract to supply the commodity or service in accordance with all terms, conditions, and pricing specified. Prices are firm during this agreement term, unless agreed upon in writing by the County. The County has the option to renew this agreement at the same terms and conditions as the original agreement for two additional one-year terms with the written consent of the successful bidder. Price increases for renewals are not authorized unless approved in writing by the County.

Company Name

Authorized Agent (Print)

Address

Signature

City/State/Zip Code

Title

Telephone #

Date

Tax ID #

E-mail

Fax #

TABLE OF CONTENTS:

Legal Notice and Request for Proposal	Page 1
Table of Contents	Page 2
Proposal Requirements	Page 3
Proposal Form and Contract	Page 5
Affidavit	Page 8
Specifications	Page 9
Exceptions to Proposal	Page 9

PROPOSAL REQUIREMENTS

A. PROPOSAL SUBMISSION:

Submit proposal form in triplicate (three copies) with specification pages, if applicable. No facsimile proposals shall be accepted and shall be rejected. A fully executed Affidavit is required by Section 285.530 RSMo and shall be submitted with the proposal form. A copy of the Affidavit is attached hereto. Failure to execute the Affidavit shall result in the proposal being rejected. Vendor shall comply with the requirements of Sections 285.525 to 285.555 of the Revised Statutes of the State of Missouri. If any part of the work is subcontracted, each subcontractor shall comply with the same requirements of this specification. No contractor shall knowingly employ, hire for employment, or continue to employ an unauthorized alien to perform work within the State of Missouri. Vendor and any of its subcontractors, shall, by sworn affidavit and provision of documentation, affirm their enrollment and participation in a federal work authorization program with respect to the employees working in connection with the contracted services. Vendor and its subcontractors shall also sign an affidavit affirming that they do not knowingly employ any person who is an unauthorized alien.

Prevailing Wage

Vendor and its subcontractors shall pay not less than the prevailing hourly rates of wages, as determined by the Labor and Industrial Relations Commission of Missouri. Vendor shall abide by the most current Annual Wage Order published by the Missouri Department of Labor and Industrial Relations or other similar resources and publications.

B. BASIS OF PROPOSAL AWARD:

Award may be made on an item-by-item basis to the lowest and best proposals or award may be made to the lowest and best proposal total, whichever is in the best interest of the County. County may reject any or all proposals for any reason and may waive any informality. Proposals submitted from a Missouri State Contract shall include a copy of the State Contract with the proposal.

It is further agreed that the Contract shall not be valid and binding upon the County until approved by the County Counselor, as to legal form and is subject to the Ordinances, Resolutions and Orders of Jefferson County, Missouri, and State and Federal Law. If no proposal or proposals have been awarded by the County Council within thirty (30) days following the opening of the proposal then all proposals will be deemed rejected.

C. PROPOSAL PREPARATION:

1. Vendors are responsible for examination of drawings, specifications, schedules and instructions.
2. Each Vendor shall furnish the information required by the invitation. The vendor shall sign all required documents. All deletions and erasures shall be initialed
3. Alternate proposals for supplies or services other than specified shall not be considered unless authorized by invitation.
4. Vendor shall state a definite time for delivery of goods or for performance of services unless otherwise specified in the Request for Proposal.
5. When specified, samples must be timely submitted and at no expense to the County.
6. Failure to adhere to all requirements may result in the response being disqualified as non-responsive.

D. MODIFICATION OR WITHDRAWAL OF PROPOSALS:

Proposals may be modified or withdrawn prior to the exact hour and date specified for receipt of proposals, provided the modification or withdrawal is in writing and is delivered in the same manner as a proposal submission.

E. LATE PROPOSALS:

It is the responsibility of the vendor to deliver his proposal or proposal modification on or before the date and time of the proposal closing to the Department of the County Clerk of Jefferson County. Proposals received late will be rejected and returned unopened to the vendor.

F. PROPOSAL DEPOSITS:

Proposal Deposits are not required unless specified in the Specifications.

G. MATERIAL AVAILABILITY:

Vendors must accept responsibility for verification of material availability, product schedules and other pertinent data prior to submission of proposal and delivery time. It is the responsibility of the vendor to notify the County immediately if the materials specified are discontinued, replaced, or not available for an extended period of time. All materials ordered by the County, shall be as needed. A sample of materials may be requested.

H. ALTERNATE PROPOSALS:

Where required, vendors must submit complete specifications on all alternate proposals with the proposal form. Alternate proposals without complete specifications may be rejected. Alternate proposals and exceptions to proposal clauses must be

clearly noted on the proposal form. The County may accept or reject alternate proposals; whatever is most advantageous to the County.

I. INCORPORATION OF DOCUMENTS:

The terms of the proposal invitation, proposal specifications, proposal form are incorporated into the contract as if fully setout therein.

J. ADDENDA:

Addenda to proposal specifications are incorporated by reference as if fully setout herein. It is the responsibility of the vendor to insure and verify that they are in receipt of and completed all attached addenda's prior to submission of proposal forms. Verification is made by contacting the Department of Administrative Services or by reviewing the County Web Site. (www.jeffcomo.org).

K. INSURANCE:

The Vendor/Contractor shall purchase and maintain in force, with an insurance company licensed to do business in the State of Missouri, at it's own expense, such insurance as will protect the Vendor/Contractor from claims which may arise out of or result from the Vendor/Contractor's execution of the work, whether such execution be by himself, his employees, agents, or by anyone for whose acts any of them may be liable. If any such work covered by the Contract is to be performed on County owned or leased premises, the Vendor agrees to carry liability and workman's compensation insurance, satisfactory to the County, and to indemnify the County against all liability, loss, and damage arising out of any injuries to persons and property caused by the Vendor, his sub-contractors, employees or agents. The insurance coverage shall be such as to fully protect the County and the general public from any and all claims for injury and damage resulting by any actions on the part of the Vendor/Contractor or its' forces as enumerated above. All policies must name the County as an additional insured and provide for thirty (30) days written prior to any material changes or cancellation.

THE COUNTY REQUIRES ORIGINAL CERTIFICATES OF INSURANCE BEFORE THE CONTRACT IS AWARDED.

A. (XX) Required () Not Required **Comprehensive General Liability Insurance**

The Vendor/Contractor shall maintain and keep in force of this Contract such comprehensive general liability insurance as shall protect them from claims which may arise from operations under this Contract, whether such operations be by themselves or by anyone directly or indirectly employed by them. The amounts of insurance shall be not less than \$1,000,000.00 combined single limit for any one occurrence covering both bodily injury and property damage, including accidental death.

B. (XX) Required () Not Required **Professional Liability Insurance**

The Vendor/Contractor shall provide the County with proof of Professional Liability Insurance, which shall protect the County against any and all claims, which might arise as a result of the operation of the Vendor/Contractor in fulfilling the terms of this Contract during the life of the Contract. The minimum amounts of such insurance will be \$1,000,000.00. Should any work be subcontracted, these limits will also apply.

C. (XX) Required () Not Required **Worker's Compensation Insurance:
per Missouri Revised Statutes Chapter 287**

The Vendor/Contractor shall maintain and keep in force of this Contract such worker's compensation insurance limits as required by the statutes of the State of Missouri and Employer's Liability with limits no less than \$500,000.00.

L. PROPOSAL OPENINGS:

Proposals will be publicly opened and read aloud at the time indicated on page 1. The vendors and the public are invited but not required to attend the formal opening of the proposals. No decisions relating to the award of a contract or agreement will be made at the opening.

M. PROPOSAL TABULATIONS:

Proposal Tabulations will be available 5 to 7 business days following the proposal opening. Proposal submissions are open for public review at the time of the proposal opening. Proposal tabulations are posted on the County's web-site address, www.jeffcomo.org, under the services tab, Invitation for Bid/Request for Proposal link. **NO COPIES** of proposal tabulations are sent to vendors.

PROPOSAL FORM AND CONTRACT

A. PROPOSAL REPRESENTATIONS:

The vendor, by executing the proposal form certifies that:

1. The proposal complies with Request for Proposal, Form and Proposal Specifications.
2. The vendor is not debarred or suspended from participation in Federal Assistance programs.

B. CERTIFICATION OF INDEPENDENT PRICE DETERMINATION:

1. The prices in the proposal shall be independently determined, without consultation, communication, or agreement for the purpose of restricting competition as to any matter relating to price with any Vendor or other person.
2. Unless otherwise required by law, the prices shall not have been knowingly disclosed by the Vendor prior to opening; or
3. No attempt has been made or will be made by the vendor to induce any other person or firm to submit or not to submit a proposal.

C. PRICE:

The price(s) specified in this proposal shall be firm and not subject to contingency or reservation. The vendor represents prices specified in the proposal do not exceed current selling price for the same or substantially similar good or service, and are the same as or lower than other prices charged to the vendor's most favored customer. In the event the stated prices are determined to be higher than the prices for which Supplier has sold the items, or services, to others, this contract price shall be reduced accordingly. **Proposal prices are ALL INCLUSIVE: (Shipping, Handling, Delivery, and Assembly to locations specified by the County). Prices shall be firm for ALL County departments and locations for term of the agreement.**

D. MISSOURI DOMESTIC PRODUCT PROCUREMENT ACT:

Vendor represents that the goods provided comply with Sections 34.350 to 34.359, RSMo, known as the Domestic Product Procurement Act. The act encourages the purchase of products manufactured or produced in the United States, State of Missouri, and Jefferson County, Missouri. Vendor shall include proof of compliance with the Act with the proposal.

E. NON-EXCLUSIVE AGREEMENT:

The contractor shall understand and agree that the contract shall not be construed as an exclusive agreement and further agrees that the County may secure identical and/or similar services or products from other sources at anytime in conjunction with or in replacement of the contractor's services.

F. DEFINITIONS:

1. The term "County" means the Jefferson County, Missouri and its designated representatives.
2. The term "Vendor" means Supplier, Contractor, and Seller and includes designated representatives.
3. The term "RFP" means Request for Proposal.
4. The term "Agreement/Contract" means Binding Agreement, Contract, Request for Purchase, Order.

G. INSPECTION, ACCEPTANCE AND APPROVALS:

Goods shall at all times and places, including the period of manufacture, are subject to inspection and test by County. County will accept or give notice of rejection of goods delivered within a reasonable time after receipt. Acceptance shall not waive any warranty. All goods supplied are subject to final inspection and acceptance by County notwithstanding payment, prior inspections or approvals. County may require prompt replacement or correction of rejected goods at Supplier's expense, including a reduction in price for rejected goods. Supplier shall not resubmit rejected goods to County without prior written approval and instructions from County. In addition, Supplier shall identify resubmitted goods as previously rejected. Supplier shall provide and maintain a quality assurance and control system acceptable to County.

H. WARRANTY:

Unless otherwise agreed to in writing by the parties, Supplier warrants that items ordered to specifications will conform thereto and to any drawings, samples or other descriptions furnished or adopted by County, or, if not ordered to specifications will be fit and sufficient for the purpose intended, and that all items will be new, merchantable, of good material and workmanship, and free from defect. Such warranties, together with Supplier's service warranties and guarantees, if any, shall survive inspection, test, acceptance of, and payment for the items and shall run to County and its assigns. Except for latent defects, the County shall give notice of any nonconformity to the Supplier within one (1) year after acceptance. County may return for credit or require prompt correction or replacement of the defective or non-conforming goods or have the defective good corrected or replaced at Supplier's expense. Return to Supplier of any defective or non-conforming goods and delivery to County of any corrected or replaced goods shall be at Supplier's expense. Defective or non-conforming items shall not be corrected or replaced without written authorization by County. Goods required to be corrected or replaced shall be subject to

the provisions of this clause and the clause hereof entitled "Inspection, Acceptance and Approvals" in the same manner and to the same extent as goods originally delivered under this contract.

I. PAYMENT:

County will pay Supplier for goods upon delivery to, submission of certified invoices and acceptance. The County will not be responsible for articles or services furnished without a purchase order. Price is tax-exempt.

J. CHANGE ORDER:

County may make changes within the general scope of this contract. If any such changes cause an increase or decrease in the cost of or the time required for the performance of any part of the work, whether changed or not changed by any such order, an equitable adjustment shall be made in the price or delivery schedule or both, and any change order shall be in writing.

Any claim by a Supplier for adjustment under this clause shall be asserted within fifteen (15) days from the date of receipt of this written order directing the change, provided, however, County, if it decides that the facts justify such action, may receive and act upon such claim asserted at any time prior to final payment.

K. DELIVERIES:

Deliveries shall be made in strict accordance with any delivery schedule contained in the proposal specification or contract and in the exact quantity ordered. Failure to adhere to delivery schedule is reason for termination in accordance with the "termination" clause. Deliveries are to be made at locations specified by the County at time of Order.

L. RESPONSIBILITY FOR SUPPLIES:

Pursuant to Section 290.560 RSMo, Supplier/Contractor shall employ only Missouri laborers and laborers from nonrestrictive states except that other laborers may be used when Missouri laborers or laborers from nonrestrictive states are not available, or are incapable of performing the particular type of work involved, if so certified by the contractor and approved by the County. Except as otherwise provided, Supplier shall be responsible and bear all risks for loss and damage to goods until delivery at County's facilities, regardless of F.O.B. point, point of inspection or acceptance; and if the goods are rejected.

M. SUBCONTRACTS:

Supplier shall not enter into any subcontract(s) in excess of \$25,000 or 20% of this contract price; whichever is less, for any goods without County's prior written approval.

N. CHOICE OF LAW:

This proposal and contract shall be governed and interpreted according to the laws of the State of Missouri. Venue for any court action shall be in Jefferson County, Missouri.

O. TERMINATION:

1. General: Performance of work may be terminated by the County in whole, or from time to time in part, whenever County shall determine that such termination is in the best interests of County. Termination shall be affected by delivery to Supplier of a Notice of Termination specifying the extent to which performance of work is terminated and the date upon which such termination becomes effective. If such notice does not state termination is pursuant to subparagraph 2, 3, or 4 of this paragraph, County shall have the right to so indicate within thirty (30) days. If no notice is delivered within the thirty (30) day period, or such longer periods as is mutually agreed to by the parties, the original Notice of Termination shall be deemed to be issued pursuant to subparagraph 1 of this paragraph.
2. Bankruptcy or Insolvency: In the event bankruptcy proceedings are commenced by or against Supplier or under any provisions of the United States Bankruptcy Act or for the appointment of a receiver or trustee or a general assignment for the benefit of creditors of either party, County shall be entitled to terminate without further cost or liability.
3. Default: County may terminate the whole Contract or any part in either of the following circumstances:
 - a. If supplier fails to deliver the items required by the contract within the time specified; or
 - b. If supplier fails to perform any of the other provisions of the contract, or so fails to make progress as to endanger performance of the contract in accordance with its terms, and in either of these two circumstances does not cure such failure within a period of ten (10) days after notice from County specifying such failure. In the event of termination under subparagraph 1, County shall have the right to procure, on such terms and in such manner as it may deem appropriate, items similar to those terminated, and to recover from Supplier the excess cost for such similar items provided, however, Supplier shall not be liable for such excess costs where the failure upon which the termination is based has arisen out of causes beyond the control of Supplier and without the fault or negligence of Supplier. Such causes shall be deemed to include fires, floods, earthquakes, strikes, and acts of the public enemy. The rights of County provided in subparagraph 1 shall be in addition to any other rights provided by law or the contract.

c. In the event of the Supplier's non-compliance with the provisions as set forth. This Contract may be cancelled, terminated or suspended in whole or in part and the supplier may be declared ineligible for further County contracts. The rights and remedies of the County provided in this paragraph shall not be exclusive but are in addition to any remedies provided in this Contract or as provided for by law.

P. NOTICE AND SERVICE THEREOF:

Any notice from the County shall be in writing and considered delivered and the service thereof completed when said notice is posted, by certified or regular mail, to the Supplier, at the address stated on the proposal form.

Q. CONTRACT TERM:

Performance shall be governed solely by the terms and conditions as set forth in the Request for Proposal, Proposal Specifications, Proposal Form and the Contract notwithstanding any language contained on any invoice, shipping order, bill of lading or other document furnished the Seller at any time and the acceptance by the County for any goods furnished.

R. COMPLIANCE WITH APPLICABLE LAWS:

Supplier warrants it has complied with all applicable laws, rules and ordinances of the United States, Missouri or any other Governmental authority or agency in the manufacture or sale of the goods, including but not limited to all provisions of the Fair Labor Standards Act of 1938, as amended.

S. ACTS OF GOD:

No party shall be liable for delays, nor defaults due to Acts of God or the public enemy, riots, strikes, fires, explosions, accidents, governmental actions of any kind or any other causes of a similar character beyond its control and without its fault or negligence.

T. SELLER'S INVOICES:

Invoices shall contain the following information. Contract number (if any), Purchase Order Number, Item number, contract description of goods or services, sizes, quantities, unit prices and extended totals. Invoices for and inquiries regarding payment should be addressed to the County Accounts Payable Clerk.

U. APPROVAL:

It is agreed the acceptance of a proposal shall not be valid and binding upon the County until approved by the County Purchasing Agent, County Council and County Counselor.

V. INDIVIDUAL, PARTNERSHIPS, CORPORATIONS:

Indicate: Individual: Partnership: Corporation.

Incorporated in the State of _____.

THE INVITATION FOR BID / REQUEST FOR PROPOSAL NOTICES ARE POSTED ON THE
JEFFERSON COUNTY, MISSOURI WEBSITE AT WWW.JEFFCOMO.ORG LOCATED
UNDER THE SERVICES TAB, INVITATION FOR BID / REQUEST FOR PROPOSAL LINK.

SPECIFICATION
CONTACT

JACKIE WAGGONER
INSURANCE AND BENEFITS SPECIALIST
636 797 5479

EXHIBIT C

AFFIDAVIT OF WORK AUTHORIZATION:

The grantee, sub grantee, contractor or subcontractor who meets the section 285.525, RSMo definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now _____ (Name of Business Entity Authorized Representative) as _____ (Position/Title) first being duly sworn on my oath, affirm _____ (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to _____ (Bid/Grant/Subgrant/Contract/Subcontract) for the duration of the grant, sub grant, contractor, or subcontractor, if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that _____ (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services related to _____ (Bid/Grant/Sub grant/Contract/Subcontract) for the duration of the grant, subgrant, contract, or subcontract, if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

Authorized Representative's Signature

Printed Name

Title

Date

Subscribed and sworn to before me this _____ of _____. I am
(DAY) (MONTH, YEAR)

commissioned as a notary public within the County of _____, State of
(NAME OF COUNTY)

_____, and my commission expires on _____.
(NAME OF STATE) (DATE)

Signature of Notary

Date

EXHIBIT C

(Continued)

BOX B – CURRENT BUSINESS ENTITY STATUS

I certify that _____ (Business Entity Name) **MEETS** the definition of a business entity as defined in section 285.525, RSMo pertaining to section 285.530, RSMo as stated above.

Authorized Business Entity
Representative's Name
(Please Print)

Authorized Business Entity
Representative's Signature

Business Entity Name

—Date

As a business entity, the grantee, sub grantee, contractor, or subcontractor must perform/provide the following. The grantee, sub grantee, contractor, or subcontractor shall check each to verify completion/submission:

- Enroll and participate in the E-Verify federal work authorization program (Website: http://www.dhs.gov/xprevprot/programs/gc_1185221678150.shtm; Phone: 888-464-4218; Email: e-verify@dhs.gov) with respect to the employees hired after enrollment in the program who are proposed to work in connection with the services required herein;
AND
- Provide documentation affirming said company's/individual's enrollment and participation in the E-Verify federal work authorization program. Documentation shall include a page from the E-Verify Memorandum of Understanding (MOU) listing the grantee's, sub grantee's, contractor's, or subcontractor's name and the MOU signature page completed and signed, at minimum, by the grantee, sub grantee, contractor, or subcontractor and the Department of Homeland Security – Verification Division; (if the signature page of the MOU lists the grantee's, sub grantee's, contractor's, or subcontractor's name, then no additional pages of the MOU must be submitted).

HEALTH-MAJOR MEDICAL INSURANCE

SECTION 1: NOTICE TO BIDDERS

Jefferson County currently offers Health Insurance to its employees. The county currently contracts its Health Insurance on a direct basis with the carrier. Any company who wishes to submit a bid through a Missouri licensed broker must still assign a group service representative to Jefferson County and the group service representative will be available to the county benefit representative and will be available for any group presentations and enrollment.

The County of Jefferson, Missouri is soliciting sealed proposals for the following Employee Insurance Coverage:

The County's insurance proposal distribution procedure will prevail. The County will solicit sealed proposals from those Licensed Brokers or Benefit Providers on the vendor list by sending them a copy of the Notice to Bidders. Bid notices will be published in the Countian and available on the county website; www.jeffcomo.org.

The County of Jefferson reserves the right to reject any or all proposals or any part of the proposals submitted and to waive informalities and to accept the proposal that in its judgment will be in the best interest of the County of Jefferson, Missouri.

SECTION 2: GENERAL SPECIFICATIONS

- A. Jefferson County invites proposals for Health-Major Medical Insurance.
- B. Bidders will submit proposals for coverage and benefits. Rate and premium quotations must be submitted on the attached Proposal Form.. However, proposals, which differ from the specifications herein, must be accompanied by detailed explanations of how the proposed plan differs from the specifications and the bidder will list such deviations on the "Exception Section" of the proposal form. All proposals must comply with applicable Federal and State Laws, the requirements of Section 125 of the Internal Revenue Code and other relevant regulations.

All proposals must be clear, precise and written in terms that a layman can easily understand. Failure of the bidder to abide by these terms will constitute non-compliance and may be cause for rejection of the proposal.

- C. Additional information related to the present plans and other supplemental information can be obtained and/or reviewed in the Department of Administration, Division of Human Resources Office located at 729 Maple Street, Hillsboro, Missouri, 63050, (636) 797-5479. The Division of Human Resources office is located on the ground level of the County Administration Center in the Department of Administration.
- D. This request for proposal consists of the following:

- Section 1: Notice to Bidders
- 2: General Specification
- 3: Information Questionnaire
- 4: Instructions to Bidders – All Insurance Coverage and Plans
- 5: Health-Major Medical Specifications
- 6: Bidder Identification Forms and Proposal Form

The following forms must be submitted by the bidder for the proposal to be deemed valid:

- 1. Response to the Information Questionnaire
- 2. Bidder Identification Form
- 3. Health-Major Medical Proposal Form

- E. All information provided, including supplementary information available for review in the County's Human Resources Office is believed to be accurate.

- F. All insurance coverage accepted by the County will be written through a Missouri licensed insurance company or a company group. All accepted coverage for insurance shall be placed in companies licensed, operating in and paying taxes to the State of Missouri and having an acceptable financial rating.
- G. Any proposed master policy or plan (premiums, charges and contract quotations) must remain in force for at least twelve months from January 1, 2011 through December 31, 2011 for all coverage. Thereafter, the County must receive notice of cancellation or rate change by the bidder ninety days (90) prior to the anniversary date of any policy or plan renewal. After the initial term of twelve months (12), the County may award plan renewals for terms of one year upon the negotiation of each annual premium rate or fee. No policy or plan may be cancelled or have its rate changed on any date other than the anniversary date, except in the event of breach of contract. Subsequent policy renewals must also conform to the above terms.
- H. Successful bidders must provide paid claims/loss reports to the County on a quarterly basis within thirty days (30) from the quarter's ending date. This provision will be included as part of the agreement to insure and subsequent policy renewals are subject to these terms

SECTION 3: INFORMATION QUESTIONNAIRE

Jefferson County will assume that all answers provided will pertain to the plan design of the proposal. Please respond to each question in the order presented. Please be as succinct as possible while still providing the necessary detail to reduce the need to refer to other parts of your proposal. You should avoid making references to other pre-printed material. Your response should answer each question directly and thoroughly. If a question does not apply, please explain why it is not applicable.

Your responses should reflect both your current and expected organization and administrative capabilities. Anticipated changes that will be effective as of January 1, 2011 should be listed.

A. Company Information

1. How many years has your company been in the group insurance business?
2. What insurance product is your company's primary business focus (i.e. medical, dental, etc.)?
3. Who will be the assigned group service representative and what is the location of the representative's office?
4. Which company office will be responsible for claims administration and paying claims?
5. Does your company currently underwrite public sector employers or local government groups in the State of Missouri? Please provide a listing of the group name, number of lives and the type of insurance.

B. Plan Administration

1. Are there any limitations related to the selection of providers? If so, what affect will the selection have upon payment or reimbursement of incurred expenses?
2. Does the plan use a "provider network"? If so, please provide a provider directory.
3. What is the turn around time for processing claims?
4. What is the appeal process for denied claims?
5. Does the plan require more than one (1) open enrollment per contract year?
6. Under what conditions are late enrollees allowed into the plan?
7. Explain the established procedures for covered employees needing assistance with plan specifications, claim status, payment or dispute.

- i. Who will the employee contact be?
- ii. Is there a toll free customer service number available?
- iii. How will final disposition be determined?

8. Will your company agree to relieve Jefferson County of any involvement in claims handling?
9. What is the extent of employee involvement in the filing of claims? Explain claim-filing processes and submit sample claim forms.
10. What internal audit processes are practiced to evaluate the claims examiners claims payment accuracy rate per claims processed?
11. Under what conditions does the plan provide for conversion rights? Specify any limitations and/or exclusions included in the conversion programs.
12. If there is an out-of-pocket expense associated with the plan, define how the out-of-pocket is calculated relative to family coverage.
13. Does your company administer Health Reimbursement Accounts. If so provide details how an HRA would be administered with any large deductible plan. Does your company administer any partially self funded insurance plans? If so provide details how a partially self funded plan would be administered.

C. Miscellaneous

1. Are quoted rates contingent on final enrollment results? If so, what percentage of the employee base is required to enroll in the plan?
2. If your company experiences an underwriting loss due to claims in excess of premiums, how will this loss be handled? Will this loss be carried forward and charged to the group? If it is to be charged to the group, explain how. Please submit examples of this accounting.
3. Do you estimate or otherwise establish a reserve for incurred but unreported claims on the renewal date under this policy? Please describe, including the amount of these reserves.
4. Will you make any charges against experience other than paid claims and reserves or estimated noted above? If yes, please describe in detail.
5. Will the company guarantee that plan coverage will be provided for the amount of proposal for at least twelve months, except for breach of contract?
6. Will you submit an operating statement within 90 days after the end of the policy year, along with a check for any surplus or dividend due? Will this operating statement include a complete accounting of all money remitted to and disbursed by your company during the policy year, plus a listing of any and all reserves set up by your company? Will you submit this information upon the request of the County within 60 days of written request for it?
7. Please supply copies of your company's contract, certificate of coverage, enrollment forms, billing invoice and administrative requirements, and sample summary plan description to verify compliance with bargaining unit contractual agreements.
8. What percentage of your providers has left the plan for each of the past year?
9. How many new providers have been added to the plan in each of the past year?
10. How many providers currently accept your plan in the following Counties?

Jefferson County

St. Louis County

St. Louis City

SECTION 4: INSTRUCTIONS TO BIDDERS

Jefferson County is requesting proposals for the following programs and/or plans:

Health-Major Medical Insurance

Each insurance coverage and/or program must conform to the specification described in the applicable "Proposal Form" for the plan.

The following guidelines are applicable to each program and/or plan:

1. Contract Site: State of Missouri
Nature of Business: County Government
2. All quotations must be made on the attached quotation sheets with any exception to the proposal specifications clearly noted and explained. Failure to note exceptions may be cause for elimination of the proposal for consideration.
3. Any proposed master policy must remain in force for at least twelve months. Thereafter, notice of cancellation or rate change by the insurance company must be given to the county ninety days (90) prior to the anniversary date of any policy.
4. Insured effective date is January 1, 2011.
5. Actively at work provisions must be waived for initial enrolment.
6. Full transfer of benefits must be provided to employees, retirees and their eligible dependents currently participating in existing plans.
7. A Summary Plan Description booklet, of distinctive design, describing the plan/program will be provided to the employee.
8. The Carrier will provide identification cards for the plan/program to the employee and their covered dependents.
9. Enrollment packages will be provided to the employee with instructions for plan participation and/or claim filing, including but not limited to contact names, phone numbers, facility locations, and the appropriate forms/directories, etc.
10. The selected carrier will be responsible for coverage certifications to service providers and manage all claims processing directly between the carrier and employee with no involvement on the part of the County.
11. The bidder must define out-of-pocket expenses, including deductibles, and maximum benefits and applicable periods during the initial twelve month term and during subsequent twelve month renewals.
12. Coverage for an employee will terminate on the last day actively employed by the County.

SECTION 5: HEALTH- MAJOR MEDICAL

A. Eligibility

All full-time, regular, employees working at least 35 hours per week, dependents and retirees.

1. Eligible dependents include spouse, unmarried dependent children to the end of the calendar year in which they reach the age of 26. This also includes stepchildren or children of legally appointed guardians that are under the age of 26. Such children are protected beyond the end of the calendar year in which age 26 is attained if:
 - a. The child is incapable of self-support due to mental retardation or physical handicap which commenced prior to age 26; and
 - b. Chiefly dependent upon the employee for support and maintenance; and

2. Carrier will be in compliance with all applicable federal and state laws regulating group medical insurance; and
3. Eligible depends, as defined in this document, shall have the right to enroll annually during the open enrollment period.
4. Evidence of insurability is not required and pre-existing conditions are waived except for employees and dependents that do not elect to participate in the program within 31 days following their date of eligibility. Eligibility date is defined as the first thirty-one days of the contract year and/or first day of the month following a full calendar month of continuous employment.
5. Standard industry coordination of benefits is to apply to medical care coverage.
6. The policyholder will provide the selected carrier with an initial listing of covered participants and monthly additions and deletions. The carrier will provide employees with a membership packet, including claim forms and instructions. Carrier will certify coverage to purveyors of services and handle all claims processing directly between carrier and employee with no involvement on the part of the policyholder.

B. Amount of Health-Major Medical Coverage

It is the intent of Jefferson County to offer a core benefit plan but also have plans with varying levels of coverage. This will allow employees freedom to choose the plan best suited to their individual needs. Current plans available are a no deductible, \$500 deductible, and a \$1,000 deductible. All are a POS. Doctor co-pays range from \$15 to \$30 for specialists. The \$0 deductible plan has co-pays for in patient and out patient services. All are 100% after deductible with a maximum out of pocket from \$1500 to \$2,000 per year. Employees may choose between the three plans.

1. Proposals are requested for HMO, POS and PPO plans of various deductibles including a \$2,000 deductible plan which could be used in conjunction with an HRA. You are also encouraged to recommend any coverage which you find to be the most cost effective. At least one option must be a \$500 deductible. Proposals for partially self funded plans will be accepted.
2. Rate structures should be quoted at 4 tier rates.
3. Provide Prescription riders quoting various rate structures and the cost effect each rate would have on the health rates when paired with the different plans/programs.
4. Provide both in-network and out-of –network benefits including co-payments, deductibles, co-insurance, and out-of-pocket for each plan proposal.
5. Provide the various additional benefits provided (i.e. ambulance service, mental health, alcohol and drug abuse treatments, home health care, skilled nursing facility etc.).
6. Provide benefits for outpatient care.
7. Provide benefits for inpatient hospital care.

PROPOSAL FORM
INSURANCE BIDDER IDENTIFICATION FORM
HEALTH-MAJOR MEDICAL

PROPOSAL FORM

Bidder's Name _____

HEALTH - MAJOR MEDICAL QUOTATION SHEET

Agreement Term: January 1, 2011 - December 31, 2011

Attach pricing for all plans and any alternatives and clearly indicate the portion of premiums for employees only. All proposals should contain a one to two page executive summary.

Proposal Exceptions: The bidder must note all exceptions to the specifications or to the current plan. I certify that the following are the only exceptions:

If your proposal meets all specifications except as noted above, please sign here:

Name and Title:

Agency: _____ Date: _____