PART II SCOPE OF WORK

PART II - SCOPE OF WORK Section 1: Introduction

1.0 INTRODUCTION.

1.1 The Greater Dayton Regional Transit Authority (RTA) provides medical and prescription drug insurance for all full-time salaried non-represented employees and all full-time employees represented by AFSCME.

1.2 Primary Purpose for Soliciting Proposals for the Medical and Prescription Drug Insurance Plan.

- ✓ Obtain a competitive net cost for current benefits from a carrier or vendor who can also provide high levels of service with a complete Dayton network.
- 1.3 General Plan Information.

Plan became fully-insured with MMO on 6.1.2019 when the members of the ATU (Amalgamated Transit Union) left the Greater Dayton RTA plan. Plan was self-funded with MMO from 1.1.2018 until 6.1.2019. There were approximately 400 ATU employees who left the plan on 6.1.2019.

1.4 Carrier History for Medical/Drug Coverage:

6/1/2019-present	Medical Mutual of Ohio Fully Insured (smaller group)
1/1/2018-6/1/2019	Medical Mutual of Ohio – ASO – included ATU
1/1/17 – 12/31/17	United Healthcare / Optum Rx – ASO via HAC contract included ATU
1/1/11 – 12/31/16	Anthem Blue Cross/Blue Shield – ASO beginning 1/1/2014 included ATU

PART II - SCOPE OF WORK Section 2: Proposal Format

2.0 **PROPOSAL FORMAT.**

- 2.1 Cover Letter.
- 2.2 Executive Summary.

The purpose of the Executive Summary is to provide a brief description of the proposal to the RTA Staff and Consultants. The Executive Summary should include conditions of your quote, e.g. rate duration; renewal rate adjustment guarantees (if any); participation requirements for contributory coverages; etc... The Executive Summary should also provide confirmation that all employees covered under the current plan the day before any change in carriers will be unconditionally covered under your contract or policy on a "no-loss/no-gain" basis, without actively-at-work and dependent non-confined rules.

2.3 Background and Experience.

This section should include a brief description of the company's background and experience.

2.4 Term of Contract.

RTA is requesting proposals from health carriers for:

✓ An insured contract that includes premium rates guaranteed for two or three years. If the premium rates for the insured contract cannot be guaranteed for two or three years, provide rate arrangements for two one-year options with renewal rate adjustment "caps" not to exceed specified levels for the first and second renewal dates (i.e. January 1, 2022 and January 1, 2023, respectively).

Carriers and/or vendors must provide fully insured contracted rates guaranteed for a minimum of 12 months (January 1, 2021-December 31, 2021).

The contract(s) may be terminated by RTA at any time with 60 days' notice.

PART II - SCOPE OF WORK

Section 2: Proposal Format (continued)

2.5 Rate Basis:

RTA is requesting quotations for a fully insured (non-participating) arrangement. Carriers/vendors are to provide rates as follows:

✓ Provide monthly premium rates for fully insured contract. Monthly premium rates should be provided on a four-tier basis (i.e. employee, employee/spouse, employee/child(ren) and family).

PART II - SCOPE OF WORK Section 3: General Information

3.0 GENERAL INFORMATION.

- 3.1 Employer: Greater Dayton Regional Transit Authority (RTA).
- 3.2 Headquarters location: Dayton, Ohio.
- 3.3 Contract site: Ohio.
- 3.4 **Effective date: January 1, 2021.** RTA reserves the right to negotiate a different effective date with the bidding carriers and/or vendors.
- 3.5 Proposal deadline: AUGUST 19, 2020 by 2:00 P.M. (EST)
- 3.6 Current carrier for the medical/drug insurance: Medical Mutual of Ohio
- 3.7 Current funding: Fully Insured
- 3.8 RTA currently maintains a separate labor agreement Ohio Council 8 Local 101 AFSCME.

The existing labor agreement with the Ohio Council 8 Local 101 AFSCME expires DECEMBER 1, 2020.

3.9 Contributions.

Administrative Employees:

✓ Employees pay 20% of the premium; 10% if they meet the wellness plan requirements

Full-time AFSCME Union Employees:

✓ Employees pay 20% of the premium; 10% if they meet the wellness plan requirements

PART II - SCOPE OF WORK Section 4: Employee Benefits

4.0 **EMPLOYEE BENEFITS.**

General administration requirements and responsibilities.

4.1 RTA Responsibility:

- ✓ Enroll eligible employees.
- ✓ Remit premium on a self-billing basis.
- ✓ Maintain enrollment records and report eligibility data to carrier.

4.2 Administrator / Carrier Responsibility (fully insured or self-funded arrangements):

- ✓ Provide assistance for initial enrollment meetings and ongoing annual enrollment meetings, if requested.
- ✓ Provide all plan documents and necessary communication materials. Printing costs for summary plan descriptions and enrollment material to be included in premium rates for fully insured arrangements.
- ✓ Provide all documents and administrative supplies, such as claim forms/kits, certificates, conversion material, identification cards, etc. Printing costs for all documents, administration supplies, identification cards, etc. to be included in the premium rates for fully insured arrangements.
- ✓ Process all claims, including cost containment functions, etc.
- ✓ Handle all questions from employees regarding administrative, billing, claims and provider issues. Provide RTA employees with access to Customer Service Representatives via 1-800 telephone service.
- ✓ Assign a Senior Level Account Manager to be responsible for handling all administrative, billing, claims and other issues claim that come to the attention of RTA Human Resource Benefit Representatives.
- ✓ Provide standard paid claim reports.
- ✓ Provide standard utilization reports for medical and prescription drug benefits.
- ✓ Distribute insurance certificates and/or summary plan descriptions.
- ✓ Assurance that the medical/prescription drug benefit plan is in full compliance with all Federal and State laws affecting such benefit programs (i.e. ACA, ERISA; Newborns/Mothers Act; HIPAA; etc.)

PART II - SCOPE OF WORK Section 5: Conditions of Quotation

5.0 **CONDITIONS OF QUOTATION.**

- 5.1 The data included in the Scope of Work is, to the best of RTA's knowledge, complete and accurate. However, the data should be considered as representative and not as warranties by RTA.
- 5.2 Proposals received in response to the specifications shall be considered valid through January 1, 2021. RTA reserves the right to request additional information and clarification until January 1, 2021.
- Your proposal should comply in all respects with the requirements of the Scope of Work. If there are any deviations, please indicate these in detail. If there is a change in carriers as a result of this process, the new carrier must provide coverage on a "no-loss/no-gain" basis for all participants covered under the plan.
- 5.4 RTA reserves the right to reject any or all proposals without the need for explanation.

PART II - SCOPE OF WORK Section 6: Proposal Evaluation and Selection Process

6.0 PROPOSAL EVALUATION AND SELECTION PROCESS.

See Part IV Section 3.0: Proposal Evaluation and Selection Process

6.1 Commissions.

No commission or any other compensation is to be included in the medical/drug quotations.

6.2 Consultant.

McGohan/Brabender, Inc. 3931 South Dixie Drive Dayton, Ohio 45439 Phone: (937) 293-1600

6.3 Questions/Inquiries.

The Consultant should not be contacted directly. All questions or inquires must be in writing (i.e., email, mail or fax) and addressed to:

Chad Messer
Senior Purchasing Agent
Greater Dayton Regional Transit Authority
4 South Main Street
Dayton, Ohio 45401
Phone: (937) 425-8311

Fax: (937) 425-8410 cmesser@greaterdaytonrta.org

PART II - SCOPE OF WORK Section 7: Funding Arrangements

7.0 **FUNDING ARRANGEMENTS.**

7.1 RTA requests contract proposals based on the following funding arrangements:

Fully insured basis under a non-participating contract. Fully insured quotations should assume medical pooling at \$125,000. The fully insured arrangement should *not* include any type of annual retrospective or terminal liability obligation for RTA.

PART II - SCOPE OF WORK Section 8: Pricing.

8.0	PRICI	NG.					
		ction provides high s the right to negotia				ormats. R'	
8.1	Brokera quoted.	rage commission or any other compensation should not be included in rate					
8.2	from th	insured premium rates quoted must be guaranteed for a minimum of one (1) year he initial effective date of the contract. Option Year 1 and Option Year 2 premium arantees or renewal rate adjustment maximums are requested.					
8.3	Refer t current Any de filings	insured quotations should assume duplication of the current PPO benefit structure. to Part III Section I of the Scope of Work for detailed description of the ent benefit structure. deviation from the current benefit structure must be clearly identified. If news are needed to match benefits, this must be identified in the proposal. A lete plan description and directories of your network providers must also be ided.					
8.4	Fully Ir	Fully Insured – Quotation.					
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Employee		Monthly Rate	X	# of Units	Total		
			T 7				
Employe	ee+Spouse		X				
Employee-	+Child(ren)						
Family			X				
		Monthly Co	ombined Total	Premium			
	Maximum increase in renewal rates for Option Year 1:						
	Maximum in	crease in renewal ra	tes for Option	Year 1:	%		

Medical Plan Notes:

Question	Is there any prior carrier deductible credit?
Response	No.
Question	Is there any prior carrier coinsurance credit?
Response	No.
Question	Is there a three-month deductible carryover credit?
Response	No.

PART III DATA INFORMATION

PART III- DATA INFORMATION Section 1

Benefit Summary and Certificate Materials

✓ 2019 MMO

Census Data

Current Experience for the MMO Plan:

✓ MMO June 2019 thru May 2020

Current Rates and Contributions