



December 22, 2020

**Addendum 3
RP002-21**

Provision of a Retiree Medicare Advantage Plan on an Annual Contract

Questions

Q1. Please provide 2021 rates from Aetna.

A1. Please see attached.

Q2. Please provide 2021 member documents – EOC, ANOC, Summary of Benefits.

A2. The 2020 ANOC and EOC were provided with the original MAPD Request for Proposal in the "Gwinnett MAPD Supplemental Documents" zip file. If you did not receive the supplemental documents file, please contact Dana Garland.

Q3. Does Gwinnett County utilize a preferred pharmacy network with Aetna today? If not, is this an option that may be considered?

A3. There is currently a network of pharmacies based on the incumbent carrier's network arrangement; we have not narrowed the network. We would instruct all proposers to respond to the pharmacy portion of the RFP with their broadest retail network and broadest formulary with no "buy-up" drug riders for their initial submission. After all proposals are received and analyzed, we will discuss results with the client and pursue alternative retail network, formulary, and buy-up rider opportunities with the winning proposer as we move forward with implementation.

Q4. Please provide an example of the responses required for this section of the cover letter (other than benefit provisions). Include a cover letter that clearly identifies deviations from requested services. Please note that plan designs, all benefit provisions, and policy particulars must be replicated to match the plan coverages and procedures. Unless indicated otherwise, your proposal will be interpreted as a duplication of the plan benefits, procedures, and policies as set forth in this RFP.

A4. We do not have a sample cover letter to provide but can advise that, as long as you've outlined your plan design and service deviations as requested within the questionnaire, you do not need to outline them in your cover letter.

Q5. Please confirm that a non-officer individual with the authority to bind a contract is sufficient to sign all applicable signature documents required for this RFP submission. Please also confirm if an electronic signature is acceptable.

A5. Yes, non-officer individual with the authority to bind a contract is sufficient to sign all applicable signature documents required for this RFP submission. If original signatures are not possible, we will accept an electronic signature through docusign. Proposers submitting electronically signed documents must also submit a letter on company letterhead stating that, due to COVID-19, original signatures can't be provided.

- Q6. Like many organizations across the Country, in furtherance with general public health guidance, we have transitioned much of our workforce to work from home in light of COVID-19. Our team that assembles hard copy presentations is located in a state with a "Stay at Home" executive order. We will therefore be providing only an electronic version of our response by the due date. Please confirm that this is acceptable in fulfilling the submission requirements of the RFP? In the event you do not have a procurement portal we can upload to an Aetna established secure FTP site to assist with any proposal delivery to ensure confidential information is kept secure and to deliver proposals that otherwise would be too large for traditional emails. We will deem non-response as confirmation that we can provide only an electronic version of our response.
- A6. We cannot accept an electronic version only in lieu of the required hard copies as specified in the RFP. Refer to A7.**
- Q7. If hard copies are required, please confirm that in order to minimize printing, we can provide large attachments (provider utilization, samples and brochures, etc.) on USB. Are the Financial and Technical excel workbooks required to be printed or is it acceptable to provide on USB only?
- A7. Procurement requires that all responses be printed including the Technical and Financial questionnaires with the exception of the below Technical questionnaire tabs which may be provided electronically in lieu of hard copies. These tabs request raw data that will undergo further analysis by Aon and do not need to be included in your hard copy response:**
1. Rx Formulary Disruption_E13a
 2. Rx Network Disruption_E13b
 3. Provider Facility Disruption_E15
- Q8. Teladoc was mentioned as one of the current benefits, but it is not an offered benefit with the current plan, only the Telehealth benefit. Is Teladoc a benefit that should be added to the 2022 plan?
- A8. Telehealth is a covered benefit under the current plan. Per the 2020 EOC, certain telehealth services including consultation, diagnosis, and treatment by a physician or practitioner for patients in certain rural areas or other locations approved by Medicare are covered. Please follow the 2020 EOC for these and all benefits.**
- Q9. RFP Section: MAPD Plan Design and Deviations GWINNETT_MAPD_TECHNICAL_RFP#RP002-21_12.7.2020: For discrepancies between the plan design chart provided in the RFP Excel Workbook and the EOC (Evidence of Coverage); should we base our proposed plan design on the EOC? Example: Vision Exam-Medicare covered: \$0 copay on Excel plan chart & \$30 copay on EOC.
- A9. In cases where there is a discrepancy between "MAPD Plan Deviations Medical" tab and the 2020 EOC, please defer to the 2020 EOC. In the case of a routine eye exam every 12 months, it is Medicare-covered and member pays a \$0 copay. Per page 36 of the EOC, there are circumstances that vary such as exams to diagnose and treat eye disease, which require a \$30 copay.**
- Q10. RFP Section: Supplemental Document "12. GWINNETT_PART D CLAIMS EXTRACT": The file contains partial year data (January-September 2020). Would you also provide the full year data for 2019 (January-December)?
- A10. While the detailed "12. GWINNETT_PART D CLAIMS EXTRACT" includes Jan-Sept 2020, the "10. GWINNETT_RX PAID CLAIM AND ENROLLMENT" (Supplemental Document) includes 2018PY, 2019PY and 2020 (Jan-Sept). We will not be providing additional data for the RFP. If you are unable to access the 2019PY data, please contact Dana Garland.**

- Q11. RFP Section: GWINNETT_MAPD_TECHNICAL_RFP#RP002-21_12.7.2020: On several tabs there are preformatted drop-down boxes with the option to select the response. There are several drop down boxes that when you click on the arrow to select a response there are no options built into the formula. For example, on tab Account_Report_Implementation Question 1a – there is a drop down box with nothing that can be selected. Will an updated version be supplied?
- A11. An updated Technical questionnaire document will be provided with this Addendum which corrects this issue. The drop-boxes will be removed entirely.**
- Q12. Are you planning to offer both MA HMO and PPO plans with a premium differential to the retirees as a choice? If no, would you be willing to consider this approach?
- A12. Gwinnett is evaluating the feasibility of providing a dual option for 2022, which may include a MAPD PPO and MAPD HMO. The Financial questionnaire indicates that if pricing differs for slice business, please provide additional detail in the “Financial Supporting Detail” tab.**
- Q13. Why is the retiree Aetna MA rate \$106.50 and the retiree + spouse rate \$323.95? We would assume the rate would be \$213.00 if the retiree and spouse are both Medicare eligible. Does Gwinnett County contribute a higher amount for the retiree vs. the spouse? Is \$106.50 retiree only the total rate (including the employer and retiree contribution)?
- A13. The above are not total rates, but rather only reflective of the portion the Retiree is paying (retiree contribution). Gwinnett does contribute higher towards the retiree vs. the spouse.**
- Q14. How does Gwinnett County manage the retiree billing process?
- A14. Gwinnett County manages a direct billing process for retiree medical contributions on a monthly payment basis.**
- Q15. The RFP requested carriers to match the current plan design. If we are quoting MAHMO, should we quote the current benefits in-network only or will Gwinnett County consider alternative MAHMO plan designs?
- A15. Please quote the current benefits in-network only; you do not need to provide alternative MAHMO plan designs.**
- Q16. Please confirm that geo access reports are not being requested for the pharmacy network. If not, can you please submit the county’s requested access standards for this report?
- A16. Correct, we did not request a GEO access for pharmacy, but are requesting data to do a pharmacy network disruption analysis per tab E13b.**
- Q17. For the geo access reporting should it be run with straight line or driving distance methodology?
- A17. For the medical GEO access reporting, please use driving distance methodology.**
- Q18. Please provide the missing drop-down menu values for the “Plan Design_Clinical_Formulary” worksheet within the GWINNETT_MAPD_TECHNICAL_RFP #RP002-21 workbook.
- A18. See A11.**
- Q19. Will there be an opportunity to update pricing after the CMS rate book is released?
- A19. Once proposals are submitted, we cannot accept revised pricing. We are closely tracking the CMS release of final rates, and may extend the submission deadline if the timing is deemed reasonable for this RFP.**

Q20. Are the claims provided in the file "11. GWINNETT_MEDICAL CLAIMS AND ENROLLMENT.xlsx" on an allowed or paid basis?

A20. They are paid, not allowed.

Q21. Has Gwinnett County BOC experienced any service concerns in the past 12-24 months with the current retiree health plan? If yes, please describe service enhancements Gwinnett County might like to see in the future.

A21. This RFP is being conducted due to the expiration of the renewal options under the current contract. It is not due to any particular service concerns with the incumbent provider.

Q22. Please advise whether electronic signature will be acceptable on this bid or if original signatures are required?

A22. See A5.

Q23. Due to the current COVID situation, will notary requests (if applicable) be waived at time of bid submission?

A23. If a notary seal is not possible, proposers must submit a letter on company letterhead stating that, due to COVID-19, notary seals can't be provided.

Q24. Due to the current COVID situation, will corporate seal requests (if applicable) be waived at time of bid submission?

A24. If a corporate seal is not possible, proposers must submit a letter on company letterhead stating that, due to COVID-19, corporate seals can't be provided.

Q25. Would the County be open to receiving a full electronic bid on a USB or via email versus hardcopy?

A25. See A6 and A7.

Q26. Please confirm if a bid bond is due with the proposal submission due on 1/6?

A26. A bid bond is not required.

Q27. On the Rx Network disruption tab within the GWINNETT_MAPD_TECHNICAL_RFP#RP002-21 workbook can you please update this data set to include the pharmacy's zip code? With the current data set, we will only be able to provide the Next Closest in-network pharmacy response in Column G for the pharmacies we are already contracted with and have the associated zip code for the pharmacy number on the file.

A27. We won't be able to provide the associated zip code so please do what you can to complete the Next Closest in-network pharmacy column with the data available within your system.

Q28. If any benefits changed from the claims experience period to the current benefit period, please provide the benefit summaries that would correspond with each benefit period.

A28. The provided 2020 ANOC provides summary of benefit changes from 2019 to 2020, which were minimal. As an overview, from 2019 to 2020, there was a change in the member pharmacy cost threshold (Medicare-dictated) before reaching the Coverage Gap Stage, the addition of Opioid treatment program services (\$30 copay required), and changes to the drug formulary and drug tiering.

Q29. What is the contribution level of the employer? (percent of premium and/or flat dollar amount – if it varies by years of service, please provide average years of service and average employer monthly funding).

A29. The contribution level does not vary based on years of service. It is percent of premium. County subsidy is 59% for retiree only tier and 37% of retiree + spouse tier.

Q30. Does the contribution vary by plan? Can the members move between the Aetna MAPD Plan and the other plans (Kaiser HMO and Aetna HSA plans) at open enrollment?

A30. No, the MA rates and contributions do not vary by plan. Pre-65 retiree members may change their plan option each year at Annual Enrollment. Medicare eligible retirees are only eligible for the Aetna MAPD plan. Members of blended families may change plans at Annual Enrollment.

Q31. The census has multiple plans. For the full replacement option requested are we replacing all plans, so 1,326 members?

A31. Correct, the 1,326 from the census on the "Medicare retirees" tab represents those retirees enrolled in MAPD as well as the blended or split enrollment in which at least one family member is Medicare eligible while the others are not yet Medicare eligible.

Please note: the provided census file includes other employee groups (i.e. active, pre-65 retirees) for proposers to understand the pipeline of those who may become eligible for the MAPD. The eligibility requirements for Gwinnett County retiree medical coverage include official retirement from the County with 10 years of service. Additionally, both those who are deemed permanently disabled and elected officials are eligible for retiree medical coverage.

Q32. For the Personal Choice request are we just quoting on the 1,178 MA members? Would you offer two MAPD options in this scenario?

A32. Please refer to A12 and A31.

Q33. Are Part B Rx claims included in the claims provided? And if so, are they included in the pharmacy or medical claims data?

A33. Yes, they are included in the medical claims experience under the current MA medical plan.

Q34. Do the MA medical claims include any costs for Non-Medicare Covered Services, Clinical, Quality, Disease Management or Fitness Programs? If so, please provide the estimated costs of these programs that were charged by the current carrier.

A34. They are included in the medical claims experience under the current MA medical, pursuant to the EOC. We cannot provide a break-out of these costs.

Q35. Please indicate which of the following are included in the Rx claims provided:

- Manufacturer rebates
- Member cost share.
- Reinsurance
- Pharmaceutical discount in the coverage gap

A35. The paid Rx claims include the net plan paid portion of the claims, excluding member copays, and excluding rebates, reinsurance, and pharma discounts.

Q36. Please provide the following details regarding the provided risk score so that bidders have an accurate representation of what the risk score denotes.

A36. The risk scores in the paid Rx claims file are the Medicare Part D only paid risk scores by month across the entire enrolled group. The risk scores in the MMR for the MAPD plan are the overall paid risk scores by member under the MAPD program as of the date of the report.

Q37. For the summary risk score information provided the paid risk scores are as of what date?
A37. See A36.

Q38. Does the provided summary risk score data include any actual or estimated amounts for the CMS mid-year payment?
A38. Yes.

Q39. Does the provided summary risk score data include any actual or estimated amounts for the CMS final payment?
A39. Yes.

Q40. Would Gwinnett County consider receiving the proposal response electronically only?
A40. See A6 and A7.

Q41. Please confirm the employer contributions.
A41. The 2021 Single MA Rate employer contribution is \$151.23 and the Family MA rate employer contribution is \$191.51. See A13, A29, A30.

Q42. Can you provide the rate history including 2020, 2021 and/or the 2022 renewal rates? (broken out by Medical and Pharmacy)
A42. See attached.

Q43. Please confirm if you would like us to provide a quote for the entire retiree population (Comprised of 1,326 members) Or if we should only be quoting only the Aetna Medicare Advantage population (1,178 members)?
A43. Correct, please provide a proposal for the entire 1,326 population, which is the current enrollment of the Aetna MAPD plan. This number is inclusive of both Medicare Advantage and blended enrollment. Refer to A31.

Q44. If you would like us to provide a quote for all post-65 members, should we be mapping them into one Medicare Advantage plan that matches the Aetna Medicare Advantage plan today?

Medicare Benefit Plan	Membership by Plan
Aetna Blended HSA Bronze	12
Aetna HSA Gold Blended	29
Aetna HSA Silver Blended	38
Aetna Medicare Advantage	1178
Aetna Traditional PPO Blended	37
Kaiser Gold HMO Blended	23
Kaiser Silver HMO Blended	9
Grand Total	1326

A44. Please see A41. The Blended enrollment includes at least one person on the MAPD. The other member in the Blended Plan is not yet Medicare eligible.

Q45. Should we include the 148 retirees enrolled in "blended" plans in our MAPD pricing?
A45. See A43 and A44.

Q46. Please confirm if AON commission can be a percentage equaling \$7.08 PMPM (Our rating model does not allow for PMPM. Rating is on a % basis).
A46. Yes.

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Addendum 3

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Q47. On the "Access Standard_E14" tab, the 5 column headings for the results show "Fill in 3 Digit Zip From Procurement Officer". Please advise what 3-digit zip codes you would like reflected.

A47. Please disregard this heading and use the zip codes as provided in the census file (Medicare Retirees tab) to complete the HMO Medical GEO analysis.

Q48. Is the Rx claims experience provided (i.e. 10. GWINNETT_RX PAID CLAIMS AND ENROLLMENT) associated with the Aetna MAPPO membership only?

A48. Yes.

Q49. As this is a fully-insured arrangement, Cigna is not the Business Associate of the client as defined under HIPAA. Rather, Cigna is the Covered Entity and a business associate agreement is not applicable. Would the county still need us to redline the BAA?

A49. Gwinnett will be requiring a BAA for this line of coverage. Please redline accordingly.

Attachments

- **RP007-16 Cost Tab R20**
- **RP007-16 Cost Tab R21**

Acknowledge receipt of this addendum on page 11 of the RFP document.

Sincerely,

Dana Garland

Dana Garland, CPPB
Purchasing

COST TABULATION

RP007-16
Retiree Medicare Advantage Plan on an Annual Contract
Department of Human Resources

2020	Aetna Life Insurance Company (OS)	
	PPO	HMO
DESCRIPTION		
Assume All Members Migrate to PPO		
Medical PMPM	\$118.55	-
Rx PMPM	\$181.06	-
Total Rate	\$299.61	-
Assumed Enrollment	1185	-
Monthly Cost	\$355,037.85	-
Annual Cost	\$4,260,454.20	-

COST TABULATION

RP007-16
Retiree Medicare Advantage Plan on an Annual Contract
Department of Human Resources

2021	Aetna Life Insurance Company (OS)	
	PPO	HMO
DESCRIPTION		
Assume All Members Migrate to PPO		
Medical PMPM	\$83.84	-
Rx PMPM	\$173.89	-
Total Rate	\$257.73	-
Assumed Enrollment	1266	-
Monthly Cost	\$326,286.18	-
Annual Cost	\$3,915,434.16	-