



March 25, 2025

**Addendum #1  
RP008-25  
Provision of Professional Brokerage Services on a Multi-Year Contract**

**Questions**

- Q1. Please provide more information on the anticipated projects related to On-Demand Services.  
**A1. Gwinnett is looking for a partner to bring ideas on the topics listed in Section III, Letter U.**
- Q2. Is this request for proposal being conducted as due diligence, due to contract expiration and/or due to service concerns with the current service provider? Please elaborate.  
**A2. This is due to contract expiration.**
- Q3. Please provide the current contract, scope of service and fees and arrangement for each broker/consultant (service provider).  
**A3. Please submit an Open Records Request through the Gwinnett County website for this information.**
- Q4. A service provider requires a reasonable limitation of liability as to direct damages and a full disclaimer of indirect, consequential or related damages in all its services contracts. Would proposing same prevent a proposal from being considered?  
**A4. No.**
- Q5. Can Gwinnett agree to limit all indemnification obligations to third-party claims?  
**A5. Specific language of indemnity provisions or obligations are subject to negotiation. Please note, as a governmental entity. The County cannot agree to any indemnification.**
- Q6. Will the final contract terms and conditions be negotiated after service provider selection?  
**A6. Exceptions to Gwinnett's standard contract language must be provided with the proposal response. The ability of Gwinnett to accept those edits will be included as part of the negotiation process with the highest-scoring service provider, not after the contract is awarded.**
- Q7. Please provide the following information:  
  - **Employee census** including age, gender and plan elections (Y/N for Life, Disability, Medical, Dental and Vision)
  - **2025 Enrollment guide** for actives and for post-65 retirees.**A7. This will be provided in Addendum 2.**
- Q8. Regarding Gwinnett retirement plans:  
  - Does Gwinnett not currently have a retirement plan consultant? What has prompted Gwinnett to hire one now?
  - Does Gwinnett have a current Investment Policy Statement (IPS)? If so, please provide. Please provide the Annual Plan Review for Gwinnett's Defined Benefit, 457(b) and 401(a) Plans or a consolidated version.
  - Please provide a copy of the plan documents and administrative service agreements.
  - Is Gwinnett looking for quarterly due diligence review meetings? If so, is Gwinnett looking for those committee meetings to be in person, virtually, or a combination?
  - Is Gwinnett paying for the retirement plan consulting services? Or is it being built into the plan

expenses?

**A8. Responses:**

- **Gwinnett is under contract with Voya for DC retirement plan services. As previously described in On Demand Services, this carve out would be dependent on projects, needs, and services, not yet determined.**
- **Yes. This will be provided in Addendum 2.**
- **This will be provided in Addendum 2.**
- **Gwinnett is open to suggestions.**
- **All Voya accounts are charged a monthly service fee.**

Q9. The Defined Scope of Services is somewhat broad in nature. Please confirm that the following items are in scope for each plan including Health, Dental, Vision, Health Savings Accounts, Flexible Savings Accounts, Health Reimbursement Arrangements, Lifestyle Spending Accounts, Hospital Indemnity Insurance, Critical Illness Insurance, Accident Insurance, Universal Life Insurance, Life (Basic, Optional, & Dependent Life), Short- and Long-Term Disability, Identity Theft Insurance, Wellness Program, Onsite Employee Wellness Center and Retirement plans (Defined Benefit, Defined Contribution and voluntary 457 plans:

- Annual Planning, Benchmarking and Strategy Development
- Renewal Management Services
- Vendor Management Services
- Vendor selection services
- Actuarial and Financial Services
- Data Analytics and Reporting on Financial Performance
- "Day-To-Day" Client Services
- Pharmacy and Health Intelligence: Well-being Strategy and Program Development
- Voluntary Benefits
- Compliance/Regulation Services

**A9. Confirmed.**

Q10. Are employee communications considered to be in scope? If so, what are the specific requirements, collaterals needed and number of versions of each?

**A10. Gwinnett has an internal communications department and brand standard. There are communications that may fall outside the scope of what is considered internal communication. Service providers are expected to communicate as appropriate. The broker will be responsible for helping to facilitate communication pieces.**

Q11. How many sessions and what locations are anticipated for the "Benefits Boot Camp"?

**A11. See Page 4, Section III, N, 3. This typically includes two in-person sessions at one location with a virtual option for attendance. Gwinnett reserves the right to modify this based on the need.**

Q12. Has Gwinnett ever surveyed employees on their sentiment of offering employee benefit and total reward programs to gauge areas such as: understanding, adequacy, value, interest in additional programs not currently offered, etc.? If so, when was the last survey completed?

**A12. There is no survey practice currently in place.**

Q13. What is Gwinnett's specific need and service expectations related to the on demand services below? Is Gwinnett looking for an overview of capabilities or looking for a proposed fees for a specified scope of services?

- **Career/Workforce Strategies**, including talent management and recruitment
- **Total Rewards**, including overall employee offerings and compensation

- **Financial Health**, including retirement strategies and support

**A13. Gwinnett is look for a proposed fees for a specified scope of services.**

Q14. Is a data warehouse currently in place? If so, which data warehouse service provider is in place and does Gwinnett have a direct contract with this organization?

**A14. Yes, Cedar Gate Technologies. Gwinnett does not have a contract with this provider.**

Q15. Please confirm what services are needed to support the “quarterly budget” in item D. in the Defined Scope of Services. Is this a quarterly claim and expense projection for the medical plan for the current plan year?

**A15. Yes, Gwinnett is asking for an actuarial explanation of quarterly claims and expense projections for the medical plan for the current plan year.**

Q16. Is it acceptable to negotiate and utilize fully disclosed service provider implementation credits for implementation support and implementation audits as these services are needed?

**A16. Negotiation practices benefitting Gwinnett and vetted through Gwinnett are welcome.**

Q17. Who are the current service providers and what are the contract end dates and commissions for each of the contracted carriers and service providers? This is needed to understand which contracts need to be marketed via proposal and when.

**A17.**

Plan	Service provider	Contract end date	Annual commission
Health	Aetna Life Insurance Company	Renewal options thru 2029	Medical \$5PEPM Rx \$0.75 per script
Health	Kaiser Foundation Health Plan of Georgia, Inc.	Renewal options thru 2026	0.75%
Health	Humana Insurance Company	Renewal options thru 2026	\$85 PMPY
Stop Loss	Aetna Life Insurance Company	Renewal options thru 2029	8%
Dental	Cigna Health and Life Insurance Company	Renewal options thru 2028	0.00%
Vision	Vision Service Plan Insurance Company	Renewal options thru 2027	10%
Health Savings Accounts	Wex Health Inc. dba WEX	Renewal options thru 2028	0.00%
Flexible Savings Accounts	Wex Health Inc. dba WEX	Renewal options thru 2028	0.00%

<b>Plan</b>	<b>Service provider</b>	<b>Contract end date</b>	<b>Annual commission</b>
<b>Health Reimbursement Arrangements</b>	Wex Health Inc. dba WEX	Renewal options thru 2028	0.00%
<b>Lifestyle Spending Accounts</b>	Wex Health Inc. dba WEX	Renewal options thru 2028	0.00%
<b>EAP and Work Life Services</b>	ComPsych Corporation	Renewal options thru 2027	0.00%
<b>Family Planning</b>	Maven Clinic Co.	Renewal options thru 2026	0.00%
<b>Hospital Indemnity Insurance</b>	ReliaStar Life Insurance Company	Renewal options thru 2026	55% first year, 5% renewal
<b>Critical Illness Insurance</b>	ReliaStar Life Insurance Company	Renewal options thru 2026	75% first year, 5% renewal
<b>Accident Insurance</b>	ReliaStar Life Insurance Company	Renewal options thru 2026	70% first year, 5% renewal
<b>Universal Life Insurance</b>	Metropolitan Life Insurance dba MetLife	Renewal options thru 2026	
<b>Life (Basic, Optional, &amp; Dependent Life)</b>	Metropolitan Life Insurance dba MetLife	Renewal options thru 2026	\$100K per year Basic
<b>Short- and Long-Term Disability</b>	Metropolitan Life Insurance dba MetLife	Renewal options thru 2026	\$100K per year LTD
<b>Identity Theft Insurance</b>	Identity Rehab Corporation dba ID Watchdog	Renewal options thru 2026	35%
<b>Wellness Program</b>	Sharecare, Inc.	Renewal options thru 2027	0.00%
<b>Onsite Employee Wellness Center</b>	Crossover Health Medical Group, APC	Renewal options thru 2028	0.00%
<b>Retirement plan - Defined Benefit</b>	Voya Institutional Plan Services, LLC	Evergreen Contract	0.00%
<b>Retirement plan - Defined Contribution</b>	Voya Institutional Plan Services, LLC	Evergreen Contract	0.00%

Plan	Service provider	Contract end date	Annual commission
Retirement plan - Voluntary 457 plans	Voya Institutional Plan Services, LLC	Evergreen Contract	0.00%

Q18. The request for proposal states that non-Medicare eligible retirees have the same medical coverage options as active employees with a few additional options. Please specify the below:

- What, if any, are the eligibility requirements for a retiree to be deemed “eligible” for enrollment in the active group medical coverage offerings?
- Please clarify the “additional coverage options” made available to non-Medicare eligible retirees.
- Please confirm the level of retiree medical subsidized rates; Are eligible retirees offered active group rates or are the rates subsidized at some level?
- Please specify the plan options available to Medicare eligible retirees. Please confirm if these plan options are subsidized by Gwinnett to any extent.

**A18. Responses:**

- **Employees must be retirement-eligible with at least 10 years of service.**
- **Non-medicare eligible retirees are offered additional plans with our self-funded medical plan.**
- **This will be provided in Addendum 2.**
- **This will be provided in Addendum 2.**
- **This will be provided in Addendum 2.**

Q19. Gwinnett references the offering of a defined benefit, defined contribution, and voluntary 457 retirement plan. Please confirm the status of Gwinnett’s defined benefit plan is it open, closed, or frozen?

**A19. Closed.**

Q20. Regarding the requested fee schedule:

- Is the annual fee obtained through commissions intended to cover all requested services which are permissible for use of commissions?
- Please advise regarding the full request on item number 4 in the cost proposal as the statement is an incomplete sentence “4. List any annual allowance offered for communications, wellness and/or annual auditing on b\_\_\_\_\_.”
- The ability to provide total project cost for items 5, 6 and 7 is dependent on having a confirmed scope of services for each item as requested in Q9. above.
- Is Gwinnett looking for an average hourly rate in item number 8 on the fee schedule or rates by position?

**A20. Responses:**

- **Yes**
- **See A30.**
- **See A9.**
- **Gwinnett is looking for one hourly rate for Benefit Consulting Services.**

Q21. Who is the current broker?

**A21. Aon Consulting, Inc.**

Q22. How long has the current broker been providing services to Gwinnett?

**A22. 25 years.**

Q23. What is the total annual compensation paid to the current broker(s)?

**A23. The current structure is commission based.**

Q24. Is the current broker compensated by fees, commissions, or a combination of both?

**A24. Commissions only.**

Q25. Please share a few specific challenges Gwinnett would like to address regarding the benefits programs over the next several years.

**A25. This will be provided in Addendum 2.**

Q26. When were the benefits plans last marketed?

**A26. See A17.**

Q27. How many in-person meetings (open enrollment, budget, with Gwinnett staff, with vendors, etc.) does Gwinnett anticipate will occur annually?

**A27. This is not a defined number. The broker should operate as a partner and be available to attend all meetings as requested by Gwinnett.**

Q28. The reference form on Page 8 requires two items which may not apply to brokerage services (i.e., Brief Description of Positions Filled" and "Number of Temporary Employees Supplied"). Please clarify what Gwinnett is looking for in these areas.

**A28. Please replace Page 8 with the attached Revised Reference Form.**

Q29. On Page 9, in the Fees Schedule section, Gwinnett is asking for an estimated cost on a commission basis. To accurately estimate annual commissions, please provide the count of participants and total annual premiums of each benefit plan.

**A29. This will be provided in addendum 2.**

Q30. On Page 9, for item 4, the sentence ends with "on b", please provide clarification.

**A30. Please revise to say the following:**

**4. List any annual allowance offered for communications, wellness and/or annual auditing on benefit plans.**

Q31. In order to provide accurate and competitive pricing for the On-Demand Services illustrated on Page 5, item U, (i.e., 1. Career/Workforce Strategies, including talent management and recruitment, 2. Total Rewards, including overall employee offerings and compensation and 3. Financial Health, including retirement strategies and support). Please respond to the following items:

A. Has Gwinnett conducted a feasibility study or developed an assessment of its critical talent management needs and recruiting challenges? If so, please provide a copy of the completed feasibility study.

B. Has Gwinnett provided total compensation statements in the past? If so, please provide an example of the Total Rewards or Total Compensation statements that have been provided to employees.

C. What services does Gwinnett receive currently from its defined contribution plan administrator with respect to financial health and retirement planning?

D. Is Gwinnett interested in implementing a user-friendly pension estimator so employees can project the amount of their pensions at various future retirement dates?

**A31. A. No.**

**B. No.**

**C. The current service provider provides content, communication pieces, presentations, etc.**

**D. The current pension administrator provides this.**

Q32. Does Gwinnett have specific HR/Workforce and Total Rewards related projects on the roadmap?

**A32. No, Gwinnett is in the early stages of identifying these.**

Q33. Is Gwinnett looking for a comprehensive classification and compensation review of all positions?

**A33. Not at this time.**

**Attachments:**

- Revised Reference Form

Acknowledge receipt of this addendum on Page 10 of the proposal document.

Sincerely,

A handwritten signature in blue ink, appearing to read "Dana Garland".

Dana Garland, CPPB, FOII, NIGP-CPP  
Purchasing Manager

FAILURE TO RETURN THIS PAGE AS PART OF YOUR PROPOSAL DOCUMENT MAY RESULT IN REJECTION OF PROPOSAL.

**REVISED REFERENCES**

Gwinnett County requests a minimum of three (3) references where work of a similar size and scope has been completed.

Note: References should be customized for each project, rather than submitting the same set of references for every project bid. The references listed should be of similar size and scope of the project being bid on. Do not submit a project list in lieu of this form.

1. Company Name \_\_\_\_\_

Brief Description of Project \_\_\_\_\_

Completion Date \_\_\_\_\_

Contract Amount \$\_\_\_\_\_ Start Dates \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

2. Company Name \_\_\_\_\_

Brief Description of Project \_\_\_\_\_

Completion Date \_\_\_\_\_

Contract Amount \$\_\_\_\_\_ Start Date \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

3. Company Name \_\_\_\_\_

Brief Description of Project \_\_\_\_\_

Completion Date \_\_\_\_\_

Contract Amount \$\_\_\_\_\_ Start Date \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Service Provider Name** \_\_\_\_\_