

Q&A Number	Question	Answer
Q&A.1	Thank you for including vendor in the RFP process for Alabama LGHIB. Our team has started to review the RFP and wanted to validate the desired go-live date of 1/1/2022 in the timeline. In our experience, this would be a tight implementation window. We appreciate any clarification you could provide around desired implementation kick-off and go-live of services.	The desired contract start date is 1/1/2022, not the go live date. The LGHIB desires to go live with the new system by Open Enrollment, 11/1/2022 and not later than 1/1/2023.
Q&A.2	We noted that there are over 600 entities in the benefits program. Can you please disclose the number of Demographic/Census files we would be receiving and the frequency? Also, how many payroll deduction files would be sending and the frequency? If you are able to disclose the current Payroll and or HRIS systems, that would be helpful as well. The number of HRIS files and payroll files is something we would need to understand prior our commitment to bidding if possible. Thank you!	The employer units are billed monthly for the premiums due for their enrolled members. LGHIB is paid through a single payment. Therefore, other than the initial set up for an employer unit, there are no demographic/census files exchanged nor are there any HRIS/payroll file feeds. Any enrollments and terminations would be expected to be executed by the employee or employer unit through a web-based portal or mobile device accessing the benefits administration platform and subsequently updating the monthly bill sent by LGHIB to the employer unit.
Q&A.3	Hello - We just wanted to confirm the due date for the Intent to Quote. While the RFP indicates a due date of Monday, August 23, at 5:00 PM CDT, the Intent to Quote form included as Appendix A indicates a due date of Thursday, August 19, at 5:00 PM CDT. We want to ensure a timely response. Any clarification is greatly appreciated. Thank you!	The Intent to Quote form is due Monday, August 23 at 5:00 PM CDT.
Q&A.4	Who are the other vendors participating in the RFP process?	The LGHIB declines to answer.
Q&A.5	Can you share your future vision for your benefits program? What are your three top priorities for employee behavior/actions? For example, "add additional medical plan offerings".	The LGHIB is committed to the ongoing enrichment of our benefit offerings to our members including the addition of new benefit plans. Our Wellness program is a vital part of what we offer to our members and we intend to continue to enhance and integrate it into the benefits we provide. We pride ourselves in the utilization of analytics to understand opportunities that allow us to provide robust benefits at affordable costs.

Q&A.6	Section 4.1, 4.2, and 4.3 each request “up to 5” references for each set of criteria. Can employer references be duplicated across categories if they appropriately align to the requested criteria?	Yes.
Q&A.7	Do you have future plans to expand your medical carrier elections beyond BCBS for actives and UHC for retirees?	The LGHIB does not currently have any plans to expand the election offerings; however, the LGHIB issues Request for Proposals every 3-5 years for Medical, Pharmacy and Medicare Advantage Claims Administration Services, so the vendors are subject to change.
Q&A.8	Can we receive a breakdown of the 658 employer groups by size and payroll/HRIS system	Employer units range in size from 1 - 2,000 and utilize a range of payroll/HRIS systems. Refer to the answer to Q&A.2 for further information.
Q&A.9	Can we receive a breakdown of the 658 employer groups by size and payroll/HRIS system	See response to Q&A. 8.
Q&A.10	Please provide the approximate number of administrators across the 650 employer units and how many will need access to their employee population.	Currently, there are approximately 1,200 unit administrators with access to their unit's account.
Q&A.11	Is LGHIB interested in establishing automated demographics and payroll interfaces with all 658 employers? If yes, how many unique payroll schedules and payroll files do you have currently?	No. See response to Q&A.2.
Q&A.12	Does LGHIB want to continue offering paper enrollment options to your employers or make all services available online. If paper is still offered does LGHIB need the new administrator to provide data entry support?	The LGHIB will need to continue to offer paper enrollment. However, the LGHIB will be responsible for any data entry support to enter such information into the system.
Q&A.13	Does LGHIB want the new benefits administration vendor to provide any back office support - process dependent verification, process payments, etc.?	No.
Q&A.14	On average how many Employer Units join or leave the LGHIB per year.	On average, less than 10 employer units join or leave the plan per year.
Q&A.15	Do you currently translate materials? If yes, which languages? How do you currently handle the translation process and what are your expectations going forward?	No, the LGHIB does not generally translate materials. The LGHIB is interested in the understanding the vendor's capabilities in this area, especially for Hispanic speaking members.

Q&A.16	Can employer units offer different eligibility rules for unique populations in their organization.	The eligibility rules for the LGHIP are determined by the LGHIB. However, a unit can choose to cover employees on their date of hire or the first day of the second month after their date of hire. In addition, if the unit has a probationary period impacting health insurance coverage, that would be calculated along with their unit's coverage date for employees (in keeping with Affordable Care Act rules).
Q&A.17	Do you want offer employer unit co-branding on the employee self-service sites or just LGHIB Branding?	LGHIB branding only.
Q&A.18	Pricing: we understand LGHIB want a fixed pricing for all services, does this include printing, fulfilment and postage cost? If yes, please provide the following: Average Number of mailings per month Number of pages printed per month Any special mailings - such a annual enrollment Samples of pieces mailed - to determine colors, paper quality etc.	No.
Q&A.19	What is the total estimated number of annual QMCSO qualifications that should be assumed?	Approximately 20 per year.
Q&A.20	Is it your desire for the new provider to provide QMCSO qualification services, administration only or both?	Administration only; however, the LGHIB would like to understand the vendor's capabilities in this area.
Q&A.21	What is the total estimated number of dependent verifications that should be assumed annually?	Approximately 1,500 per year
Q&A.22	It is understood that LGHIB support is required for LGHIB administrators - does the scope include supporting employer administrators or will that be handled by LGHIB?	The LGHIB will support the employer administrators.
Q&A.23	Does LGHIB want the new administrator to provide support for the employee calls or will that be retained by LGHIB?	Retained by the LGHIB.
Q&A.24	Are you using a CRM system today to track and manage incoming calls? If so please describe this flow.	No.
Q&A.25	Retiree Billing: Please explain how retiree benefits are funded/billed for today - are member direct billed by LGHIB?	No. Retirees are billed through their former employer unit for the total premium. The employer unit sets the portion of the premium to be paid by the retiree and is responsible for obtaining that portion from the retiree. The full amount of the invoice must be paid each month by the unit.

Q&A.26	LOA/Direct Bill: How many bills on average are sent per month? Are the bills sent for employees on LOA and Retirees? If LOA, what type of leaves are direct billed i.e. STD, LTD, etc.	Approximately 200 COBRA invoices per month are sent. No other direct bills are sent.
Q&A.27	Do you work with a communications firm or agency today on your HR/Benefits communications?	No.
Q&A.28	Do you have a distinct Benefits or Total Rewards brand?	Not currently. However, we are working toward developing such a brand.
Q&A.29	Do you wish to have strategic communications to be included in the benefits administration offering? These communications are not system generated materials (ex: confirmation statements), rather they are communications used to launch the new platform and market open enrollment. • If yes, do you require fully custom content and design work?	The LGHIB is interested in the vendor's capabilities in this area.
Q&A.30	What is your ideal go-live date?	Refer to the response to Q&A.1.
Q&A.31	The addition of voluntary products (Critical Illness, Hospital Indemnity, Cancer, etc.) and the accompanying commissions to a benefits program can strategically serve to help offset the cost of a benefits administration solution for those groups where it makes sense. Would the LGHIB's benefits strategy find value in a proposal that includes the potential addition of voluntary products?	No.
Q&A.32	Will LGHIB select a vendor who does not currently have 2 public sector clients using the proposed solution? Would LGHIB consider a private union plan with public employee participants to equate to the same experience and requirement?	Yes, the LGHIB will consider a vendor with this experience as meeting the minimum requirements.
Q&A.33	Does Alabama LGHIB have the ability to transmit one census file to the chosen vendor? Or is the expectation that each employer unit will transmit a file?	Refer to the response to Q&A.2. The LGHIB currently transmits census files to its Plan partners on a daily basis. There is currently no need for employer units to transmit to vendors.
Q&A.34	In regard to question 6.1.20 can you define "Ease of Use and Once and Done" processing for enrollments.	Participants or employers are able to enroll in a selected plan and submit all required documentation in a single instance utilizing a user-friendly interface.

Q&A.35	Are you able to provide a retirement date field on the regular census file to the benefits administration vendor?	Refer to the response to Q&A.25.
Q&A.36	Will we be sent a regular retiree file (e.g. from Pension system)?	Refer to the response to Q&A.25.
Q&A.37	Is Post-65 retiree administration in scope?	Yes, refer to the response to Q&A.25 for additional information.
Q&A.38	Can you please provide the employee rate sheets and Alabama LGHIB's rate calculation?	This information is available on our website: http://www.lghip.org/PDF/LGHIP/LGHIPRates2021.pdf
Q&A.39	Under section 1.2 outlining the principal system components, can you elaborate on what is meant by "delinquencies tracking and reporting" in this case? (e.g. Delinquent documentation, delinquent premiums?)	The LGHIB requires timely payment of monthly invoices for each employer unit. Late premium payments (delinquencies) affect a unit's ability to qualify for our preferred premium rates and therefore we need to be able to track payment history and provide reports to management.
Q&A.40	Under section 1.2 what banking institutions would the selected vendor be expected to interface with?	The LGHIB declines to answer.
Q&A.41	What is the expected date for the vendor to have the system live and available for employees to enroll?	Refer to the response to Q&A.1.
Q&A.42	What systems does LGHIB use to track all employers and employees other than the proposed vendor platform?	No other systems are used.
Q&A.43	Of the 1,265 retirees how many are pre-65 and how many are post-65/Medicare eligible?	The LGHIB declines to answer.
Q&A.44	How many files would be sent to the vendor system with employee data updates? Expected frequency of these files? How many files would need to be sent from the vendor system with payroll deduction updates?	Refer to the response to Q&A.2.
Q&A.45	How many entities would not send/receive data through files, but would make HR updates directly in the vendor system?	The LGHIB expects that each employer unit will have update capability for their unit and their employees. Additionally, we expect that employees will be able to make updates, subject to employer unit approval, that would be applied directly to the vendor system.
Q&A.46	References - can any of these be the same entity?	Yes.
Q&A.47	Are bidders able to provide deviations to the RFP requirements (including contract terms)?	Yes. If the proposal deviates from the detailed requirements of this RFP, the transmittal letter should identify and explain these deviations. The LGHIB reserves the right to reject any proposal containing such deviations or to require modifications before acceptance.

Q&A.48	Are off-shore resources able to access data stored within the US?	No.
Q&A.49	Can you provide more details on the expectations for the vendor to manage premium payments collection and carrier payments? How does payroll deduction / premium payment processing work today?	Refer to the response to Q&A.2 regarding premium collections. Carrier payments will be made by the LGHIB not the vendor. The system will need to calculate and track payments within the system as well as submit the payment transmission to the LGHIB's bank.
Q&A.50	Is this section referring to direct billing and payments for individual employees (COBRA or Unpaid Leave) or is it referring to payroll deductions / monthly premium payments from employer entities? Or is it both? Is there an expectation for the vendor to report, track, and manage all employer payments and then process payments to the carriers? Can you explain more how this works today?	Refer to the response to Q&A.2.
Q&A.51	6.7.17 Describe system's ability to facilitate, manage, and maintain employer participation in LGHIB. Include details regarding cost communication and the process for electing, changing, and withdrawing participation. Can you provide more details on this requirement? If a new employer wants to join the LGHIB or stop participating in the LGHIB, does that need to be managed by the vendor and in the vendor system? Or is that managed by the LGHIB administrators and updates just made with the vendor to add/delete employee information?	The system should allow the LGHIB to add employers, remove employers, merge employers, etc. without requiring the vendor assistance.
Q&A.52	Will the https://www.lghip.org/ website remain in place when the new vendor is live? Will members continue to log into that site, or will all information transition to the new vendor website?	Both alternatives are possible. The LGHIB is looking for the vendor's proposed approach.

Q&A.53	<p>5.4.3 Describe Proposer's Wellness module and its associated features.</p> <p>6.1.6 Is your system able to track Wellness Program screening events?</p> <p>How are employee's wellness actions being tracked today? Does LGHIP work with a wellness vendor currently? Are you looking for a new wellness vendor and wellness tracking process, or just that the new vendor can interact with the current wellness system?</p>	<p>The LGHIB's current system tracks the Wellness Program's screening events and the expectation is that the new system would provide the same functionality.</p> <p>Although the LGHIB is not actively searching for another wellness vendor and wellness tracking process, vendors are encouraged to provide their approach and capabilities.</p>
Q&A.54	<p>6.1.8 Is your system able to verify COB/previous coverage? What is being done today to verify COB or previous coverage? Is this information required to process eligibility or enrollment?</p>	<p>No, the current system does not have this capability. The LGHIB is looking for the vendor's proposed approach.</p>
Q&A.55	<p>6.1.9 Is your system able to track receipt of required Medicare retiree documentation and automatically generate follow up notifications?</p> <p>Is this referring to Medicare Advantage documentation or do you require other Medicare documents for eligibility and enrollment?</p>	<p>No, the LGHIB's current system does not track receipt of required Medicare retiree documentation and automatically generate follow up notifications. The LGHIB desires the functionality in its new system.</p> <p>Medicare Advantage enrollment information is handled by UHC. If the LGHIB does not receive a physical address or a copy of the RWB card from the retiree, then the LGHIB contacts the employer unit to let them know the LGHIB must have a copy of the card.</p>
Q&A.56	<p>Is ACA reporting (1095-C creation and distribution, IRS filing of Form 1094-C along with 1095-C data) in scope for this RFP? If yes, how many FEINs are there?</p>	<p>The LGHIB is interested in learning of the vendor's capabilities in this area. ACA reporting is not currently in scope for this RFP.</p>
Q&A.57	<p>Client references are requested as part of RFP sections 4.1, 4.2, 4.3, and 5.1.8. Are we correct in assuming that some named clients may overlap in our response to these sections (i.e., can the same clients be named in more than one section of our response)?</p>	<p>Correct.</p>
Q&A.58	<p>A key objective named in Section 1.8 is "Allow for end user ease of use". Please provide additional detail for this objective and define "ease of use" from Alabama LGHIB's point of view.</p>	<p>Refer to response to Q&A.34.</p>

Q&A.59	The transmittal requirements state that "all subcontractors should be identified". We assume that "subcontractor" is defined as a separate company (not an affiliate of ours) that is engaged to develop or deliver our software product in whole or in part. Is our definition correct?	Correct.
Q&A.60	In addition to the Plan Documents provided, can LGHIB provide additional documentation and definitions of rules, requirements, procedures, and calculations for our review?	Additional documentation will be provided to the awarded vendor.
Q&A.61	Please provide the initial Requirements Traceability Matrix (RTM) referenced in Section 8.5.	This will be created as part of the implementation.
Q&A.62	Our software product contains native imaging capabilities for image induction, transfer, and management. Please advise if hard copy scanning capabilities are also required by LGHIB.	The LGHIB currently has hard copy scanning capabilities. The LGHIB requires the ability to capture and store a variety of eligibility documents and is open to understanding vendor capabilities in this area.
Q&A.63	Would LGHIB accept a capped indemnification for the requirement stated in Section 5.3.9 ("Proposer will defend, indemnify and hold harmless LGHIB, and, at Proposer's expense, notify our employees and mitigate any harmful effects in the event Proposer or one of Proposer's business associates uses or discloses PHI in violation of HIPAA regulations.")?	Refer to the response to Q&A.47.
Q&A.64	For Section 5.5.2, please define "classes" and provide two business examples of "track, manage, and apply multiple classes and versions of business rules".	Classes of employees - Full-Time Employees, Elected Officials, Retirees, ACA Eligible; Different classes may have different eligibility rules. See Exhibit 1A - LGHIB Administrative Guide for additional information.
Q&A.65	Our software product contains native imaging capabilities for image induction, transfer, and management. If hard copy scanning capabilities are also required by LGHIB, a third-party scanning software provider would be engaged by LGHIB, and an integration point would be established as part of software implementation. Alternately, LGHIB may opt to integrate ImageQuest (current imaging system) with our software product as part of the implementation project. This would result in a reduced software subscription fee and reduced implementation costs. Does LGHIB have a preference?	The LGHIB desires to transform our business model from an ease of doing business perspective and by introducing as much automation and efficiency as possible into our processes. We are open to considering options within our implementation to leverage existing investments without compromising the objectives of our project.

Q&A.66	Please provide a description of LGHIB's current benefit administration platform and why LGHIB is aiming to replace their current platform.	The LGHIB's current platform is dated and does not provide the desired level of robust functionality.
Q&A.67	Please provide a description of the existing legacy source system(s).	There are no source systems of relevance to this RFP.
Q&A.68	What current challenges are you experiencing with the existing data (e.g., cleanliness, accuracy, and completeness)?	Existing data is clean, accurate and complete, however it is stored in an aging relational database that has been modified numerous times.
Q&A.69	Would LGHIB consider our standard SaaS agreement as the basis for a potential contract?	Refer to the response to Q&A.47.
Q&A.70	Our assumption is that the Statement of Work (SOW) referenced in Section 10.03 of the Contract Terms and Conditions would take precedence over our RFP response in negotiation. Is our assumption correct?	Yes, to the extent the SOW contradicts the RFP response, the SOW would take precedence subject to the LGHIB's approval.
Q&A.71	Please explain the reason for the user count increase ("currently 30 users - will be 45 users").	The LGHIB is a relatively new organization and is currently "staffing up" for the administration of its benefit programs. Projected ultimate staff level is approximately 45 users.
Q&A.72	Does LGHIB currently have a CRM system and/or marketing automation system in place?	No.
Q&A.73	Please provide an example of an employee's probationary period.	<p>The LGHIP allows employer units to cover new hires on either their date of hire or the first day of the second month after their date of hire. In addition, the LGHIB allows units to elect probationary periods impacting the effective date of LGHIP coverage. If the unit elects to have a probationary period, the following options apply:</p> <p>Date of hire effective date:</p> <ul style="list-style-type: none"> • 30-day probationary period. Coverage effective on the 31st day. • 60-day probationary period. Coverage effective on the 61st day. • 90-day probationary period. Coverage effective on the 91st day. <p>First day of second month effective date:</p> <ul style="list-style-type: none"> • 30-day probationary period.
Q&A.74	Does LGHIB allow Split Family elections (Retiree is Medicare UHC Plan and Spouse is Non-Medicare BCBS Plan)? If so, how does this impact premium calculations?	Yes, the LGHIB allows for split contracts. Refer to the response to Q&A.38.

Q&A.75	Please provide an example of the Preferred Premium Rate calculation.	Refer to the response to Q&A.38.
Q&A.76	Are the Vendor Interfaces HIPAA 834 EDI or proprietary interfaces?	The LGHIB would like to utilize standard HIPAA 834 EDI interfaces to exchange data with their vendors.
Q&A.77	Does BCBS handle claims management/adjudication for LGHIB?	BCBS is the claim administrator for medical benefits; OptumRx is the claims administrator for prescription drugs; and UHC is the claims administrator for Medicare Advantage. Southland Benefits Solutions administers a voluntary vision and dental plan for the LGHIB.
Q&A.78	Would LGHIB require our software product to process claims/reimbursements for the Tobacco Cessation and/or Weight Management programs, or would claims processing be performed by a third-party system?	The LGHIB is interested in learning the vendor's capabilities in this area.
Q&A.79	Reference: RFP section 2.4 Proposal submission, page 6-7 With respect to the hard copies expected to arrive at LGHIB offices no later than three days after the proposal deadline. Can you confirm that they are business days, leading to an October 5, 2021 deadline for the hard copies reception? Thank you	Confirmed.
Q&A.80	Reference: RFP section 2.2 Instructions, page 6 Many of our answers usually contain graphics and it's not possible to paste them in the answer boxes of the ProposalTech form. Can we provide these in attachment to the answers? Thank you,	Yes.
Q&A.81	Reference: Please clarify: "Hard copies are simply the paper version of Proposer final proposal submitted through ProposalTech". Can we provide a hard copy using our corporate graphics and visual that usually accompany most of our responses incorporated, or you just want us to use the "print this RFP from Word" option on the proposal Tech portal? Thank you	Hard copies can include corporate graphics and visuals.
Q&A.82	Please clarify what is meant by "Portal Details" from line 18 of the Cost Summary tab "** Excludes costs for Payment Processing and Portal Details"?	Pricing for websites/portals should be shown separately.

Q&A.83	Is there a budget in place for this project?	The LGHIB declines to answer.
Q&A.84	Will LGHIB definitely move to a new platform as a result of this RFP process?	Refer to Section 2.19 of the RFP.
Q&A.85	Can you please provide more detail on your expectation of the following? Is this from the Unit perspective or individual employee perspective? a. Describe your system's ability to facilitate electronic bank interactions. Include details regarding the system's ability to facilitate links to an outside banking e-payment site and to manage, exchange, process, and secure various electronic bank files.	The LGHIB would like to allow employers and those members who are self-paying (COBRA) to pay online.
Q&A.86	Please provide an example of the requested support for "application tracking" and/or define "application".	Refer to the response to Q&A.34. Another example is a dashboard/workflow report which provides information regarding work queues and applications in progress.
Q&A.87	Please provide an example of the requested support for "delinquency tracking" (e.g., direct billed individuals paying only a partial amount). Further, please confirm the purposes of the "delinquency notices" (1,484/year).	Refers to tracking of delinquent premiums and ability to auto generate follow up billings. Refer to the response to Q&A.39.
Q&A.88	Please provide an example of the support requested related to the "bulk processing of premium payments".	Refer to responses to Q&A.86 and Q&A.87 as examples of what is requested.
Q&A.89	Are there specific workflows LGHIB has in mind as it relates to "workflow automation" described in the RFP Background?	All standard health plan processes - enrollment, eligibility, premium collection, etc.
Q&A.90	Please describe the support requested as it relates to electronic exchange of data with banking institutions.	Refer to the responses to Q&A.39, 40, and 85.
Q&A.91	The contract effective date is noted as January 1, 2022. Please confirm the desired Go Live date for services.	Refer to the response to Q&A.1.
Q&A.92	Are specific weighting criteria assigned to each of the subsections of the Technical Proposal (total 150 points)? If so, what is that criteria?	The LGHIB declines to answer.
Q&A.93	Please describe LGHIB's desired support as it relates to verification of COB/previous coverage.	The LGHIB would like to understand the vendor's capabilities in this area.
Q&A.94	Please describe the documentation currently required for Medicare retirees and provide an example of the follow-up notifications requested.	Refer to the response to Q&A.55.

Q&A.95	If a paper enrollment form is currently used for the Medicare Advantage plan, is LGHIB open to transitioning to the CMS approved electronic enrollment mechanism?	The LGHIB is interested in learning the vendor's capabilities in this area.
Q&A.96	Please describe the type of correspondence requested related to a member's divorce.	Cancellation letters and notices for overpayments related to ineligible members. Email to employer unit notifying it that an employee's former dependents have been canceled.
Q&A.97	Please describe your requested support for "divorce audits".	Similar to death matching, the LGHIB receives monthly feeds listing divorces. The LGHIB then compares the listing to its participants to identify any potential matches. Notifications are sent to the participant for verification of divorce and the need for cancellation of coverage for any ex-spouses and dependents. The LGHIB notifies both the employer unit and the participant when canceling coverage and offers of COBRA are made at that time. The remainder of the process follows standard COBRA processing. The LGHIB is interested in learning the vendor's capabilities in supporting this process.
Q&A.98	Please provide an example of how LGHIB defines "Ease of Use and Once and Done processing for enrollments".	Refer to the response to Q&A.34.
Q&A.99	How does LGHIB define "system of differentiation" and "system of record"?	System of record is the system with the determining information for eligibility, enrollment, etc. System of differentiation is a best-in-class system that assists the LGHIB in its differentiation from other benefit programs through ease of use, functionality, and continual improvement.
Q&A.100	The RFP requests support for merging duplicate accounts/IDs and separating accounts that include multiple customer's data. Please describe the data, process, or business requirements that result in these scenarios current state.	Scenarios include: an employee moves to a new employer and the employer re-enrolls the current employee; an employee dies or is divorced and the dependents require the setting up of their own account.
Q&A.101	Specific to COBRA administration, how does LGHIB define the "benefit schedule" requested (e.g., management of COBRA initial enrollment period, SBC, other)?	The benefit schedule is the distribution and tracking of all required notifications within the required timeframes for COBRA processing.
Q&A.102	Please provide an example of how LGHIB would like Medicare coverage to be integrated with the benefits administered by LGHIB.	Medicare coverage integration is managed by UHC.

Q&A.103	The RFP requests support for calculating multiple premium rates based upon enrollment levels, years in the plan, timeliness of payment, and participation in LGHIB's wellness programs. Please clarify the support requested as it relates to enrollment levels, years in the plan, and payment status in particular as those factors are not described in the current premium charts (https://www.lghip.org/PDF/LGHIP/LGHIPRates2021.pdf).	The support request centers on the system's ability to produce ad hoc reports based on the listed factors or other factors the LGHIB deems relevant.
Q&A.104	Please describe how imaging functionality plays into the current administration of LGHIB's plans. What would be the primary purpose of the requested integration with Image Quest? a. Please also describe the documents currently imaged (document type, format, how documents are indexed, volume).	The LGHIB current administration system is largely paper driven. All enrollment documents and life event forms are scanned and indexed and maintained as a part of our permanent record keeping. Computer generated letters and documents for employer units and members are indexed and stored within Image Quest as a part of our permanent record keeping.
Q&A.105	Item 8.5.7 requests a completed work plan for the "first phase" of the project upon project initiation. Please confirm how LGHIB defines "first phase" for this purpose.	The LGHIB expects the vendor to define the phases of the project with agreement by the LGHIB.
Q&A.106	Please confirm how exceptions, if any, to the Contract Terms and Conditions should be supplied.	Refer to the response to Q&A.47.
Q&A.107	The addition of voluntary products (Critical Illness, Hospital Indemnity, Cancer, etc.) and the accompanying commissions to a benefits program can strategically serve to help offset the cost of a benefits administration solution for those groups where it makes sense. Would the LGHIB's benefits strategy find value in a proposal that includes the potential addition of voluntary products?	No, not at this time.
Q&A.108	The addition of voluntary products (Critical Illness, Hospital Indemnity, Cancer, etc.) and the accompanying commissions to a benefits program can strategically serve to help offset the cost of a benefits administration solution for those groups where it makes sense. Would the LGHIB's benefits strategy find value in a proposal that includes the potential addition of voluntary products?	No, not at this time.
Q&A.109	What are your members' perceptions/feedback on the benefits you currently offer?	The LGHIB declines to answer.

Q&A.110	Does LGHIB desire support to help drive enrollment or awareness of specific products or services you offer?	Yes. The LGHIB is interested in learning the vendor's capabilities in this area.
Q&A.111	What communication resources are being leveraged to ensure members see the value of your benefits and what's in it for them?	Currently, LGHIB utilizes internal resources and provider resources.
Q&A.112	Are you open to a holistic voluntary benefit evaluation to ensure you have best-in-class providers and an optimal enrollment and communication strategy?	The LGHIB is not interested in a voluntary benefit evaluation at this time.
Q&A.113	Would LGHIB accept electronic signatures on forms requiring signature, or is an original, ink signature required?	Electronic signatures are preferred in most instances as long as the process is secure and meets the requirements of the Alabama Electronic Signatures Act. Cancellations of coverage require a wet signature pursuant to Alabama law.
Q&A.114	User Base (Total system user licenses needed) <ul style="list-style-type: none"> • LGHIB: 30 today, will grow to 45 Should we interpret this to mean that LGHIB has a staff of 30 that will scale to 45 that will need access to each individual Employer unit within the system to support them? If so, does LGHIB have any expectation that the vendor provide direct contact support to the Employers (658 active employers noted) or will vendor interface with LGHIB, and LGHIB manage the Employers?	The LGHIB staff will scale to 45 and all staff will need access to the system. Each of the 658 employer unit administrators may also need access. The LGHIB will support the employer unit administrators.
Q&A.115	Are members allowed to transfer from one active Employer to another? If so, what is the process to transfer from an eligibility perspective?	If a member terminates employment with one unit and begins employment with another unit during the same month, the member will be considered a transfer and coverage is continuous. If the member does not start with the new employer until the following month, the new employer unit's eligibility rules apply and coverage may not be continuous. The former employer unit must provide a cancellation notice of the prior employment and the new employer unit must provide an enrollment form for the member.
Q&A.116	Do Open Enrollment dates ever vary across any active employer or will they always remain the same?	Open enrollment dates do not vary across active employer units.
Q&A.117	Do eligibility rules vary across employee classifications or sub-groups, for example new hire rules, termination rules, qualifying life events?	Yes. Refer to response to Q&A.73.

Q&A.118	Do these rules differ across the 658 active employers or are eligibility rules the same across all employers?	Yes. Refer to response to Q&A.73.
Q&A.119	Do employee classifications vary by active employer, primarily concerning those that drive eligibility?	Yes. Refer to response to Q&A.73.
Q&A.120	Will Medicare eligibility at age 65 be assumed?	Medicare eligibility is not assumed. The member must provide evidence of Medicare coverage. Refer to the response to Q&A.55.
Q&A.121	How do you calculate years in the plans currently. Is this a measurement of years participating in the LGHIB plan overall or within specific enrolled benefits (such as medical or optional dental)? Please describe how timeliness of payment impacts premium rate currently.	Years of participation for employer units are calculated from the date the employer unit joined the plan. Two late premium payments within a two-year period by the employer unit will cause an employer unit to lose any preferred premium rates. See Exhibit 1A - LGHIB Administrative Guide for additional information.
Q&A.122	Are interest assessments currently applied under LGHIB administration? If so, please explain to what parties and when.	No.
Q&A.123	Does LGHIB envision Proposer will be collecting (pulling) premium from entity account(s) and remitting premium to carrier(s) on LGHIB's behalf? Or will each local government entity be its own independent billing entity with supported payments and remittances? If workflow documentation to explain expectations is available, please provide.	The LGHIB collects premiums from employer units either by check, ACH, or, in some instances, by credit card. The system should have the capabilities to perform these functions. The Proposer is not expected to provide any administrative services in conjunction with the collection of premiums on behalf of the LGHIB.
Q&A.124	Please describe expected financial flow when a member is on direct bill and employing entity is billed for employer portion through consolidated billing. For example, will the consolidated billing continue to invoice the billing entity group for both the employee and employer contributions with remittance to the carrier(s) and premium collected via direct bill to member is remitted to the employer as recapture?	The employer unit collects and remits the entire premium to the LGHIB. The LGHIB does bill individuals directly for COBRA premiums and expects the system to allow an individual to remit payment via check or pay by credit card through a banking partner.
Q&A.125	For Medicare plan administration/ billing – what are the expectations of Proposer for supporting low income subsidy and/or late enrollment penalty through enrollment or billing processes?	UHC handles the low income subsidies and late enrollment penalties.

Q&A.126	<p>For Medicare plan billing – What are the current delinquency timeframes, and how many grace cycles for member direct billing for these plans before termination for non-payment?</p> <p>For Non-Medicare plan billing – What are the delinquency timeframes, and termination strategy for non-payment (retroactive, current, prospective)?</p>	Employer units are responsible for any delinquencies and non-payments, notifying the member, and terminating any members with the exception of COBRA members which are handled by the LGHIB. For Medicare members, each unit must certify to the LGHIB that it complied with all CMS regulations in regard to termination of Medicare Advantage coverage.
Q&A.127	What would LGHIB’s expectation be on how Administrator access is restricted? Should we expect that aggregate level access is needed for LGHIB direct staff to all Employers for support? Should we expect situations where Administrators within an Employer Group should be limited from viewing certain categories of members within their Employer Group?	Administrators at the employer unit will be restricted to viewing enrollment, coverage and basic wellness information (i.e., completed wellness screening) for their employees.
Q&A.128	How many administrators does LGHIB anticipate we would need to train and support on an ongoing basis? Should we expect one or more administrators that will need to be trained and supported for each of the 658 employers?	Refer to responses to Q&A.10 and 22.
Q&A.129	<p>Is it acceptable to LGHIB that all invoices are sent via email or submitted in portals as request by customer?</p> <p>Will we receive a PO?</p>	Today the LGHIB sends email notifications to employer units that their invoice is available on a web portal for review and download. Refer to section 10.23 of the RFP.
Q&A.130	<p>Are all benefits offered consistently across the 658 active employer entities or does plan design and/or benefit offerings differ among any?</p> <p>Are any employers offered additional benefits outside of what is captured here?</p>	Benefits can and do vary across the employer entities. All of the LGHIB's offered benefits will be administered through the new benefit administration platform.
Q&A.131	Is Post 65/Medicare enrolled Rx Commercial or EGWP?	EGWP.
Q&A.132	Do you file for Retiree Drug Subsidy? If yes, please describe the support you would request from the benefits administrator for this process.	No.

Q&A.133	Based on the LGHIB Admin Guide it appears that Medicare enrollment data will be provided from the local government unit. Please describe how LGHIB will communicate this information to the benefits administrator.	Refer to response to Q&A.55.
Q&A.134	Please confirm that the Wellness Premium Discount is applied when setting the premiums for each unit in advance of the upcoming plan year (e.g., if a unit meets participation requirements the monthly premium may decrease from \$100/month to \$90/month). If this is incorrect, please describe how the premium discounts are applied.	Confirmed.
Q&A.135	Does LGHIB intend to retain responsibility for the Declination of Coverage form for those waiving coverage? If no, is LGHIB open to alternative processes (e.g., online attestation).	The LGHIB is interested in learning vendor's capabilities in the support of the administration of this functionality.
Q&A.136	Please describe the current process related to retroactive premium payments for those failing to notify that other acceptable coverage has been lost. Is LGHIB looking to retain this process or transition to the benefits administrator?	The LGHIB is soliciting a system to be utilized to perform this and other administrative processes. It is not looking to outsource the actual administration of benefits.
Q&A.137	Please describe the current process for confirming continuous coverage for Medicare retirees reentering the LGHIB plans. What, if any, portions of this process are you looking to transition to the benefits administrator.	Refer to response to Q&A.136.
Q&A.138	Please describe the level of engagement (if any) requested with SprintBoard (SectQuote) and Employer Brokerage (Empower).	The LGHIB has minimal engagement with these.
Q&A.139	Please confirm if a change in employment status, or other notification via a LGHIB administrator, will be provided to indicate when an employee on leave should be considered COBRA eligible (e.g., Military Leave).	Refer to response to Q&A.136.
Q&A.140	Please confirm if support is requested for retiree direct billing, or will this process continue to remain on the local government unit's billing?	The process will continue to remain with the employer units.

Q&A.146	Does LGHIB anticipate retaining the process to confirm proof of Medicare Part A and B? If yes, how will this information be supplied to the benefits administrator (e.g., via file)? If no, is LGHIB open to a process where employees provide enrollment data as a part of the benefits enrollment process (no documentation required)?	Refer to responses to Q&A.55 and 136.
Q&A.147	Is LGHIB open to transitioning away from processes requiring paper documentation (e.g., cancellation form for new retirees, retiree reaching Medicare age, enrollment forms, ACA verification form, etc.)	Yes.
Q&A.148	Please confirm that the premiums associated with "dental" and "no dental" represent if the unit as a whole is offering dental coverage rather than an individual's election of dental.	Confirmed.
Q&A.149	Please describe the benefit administrator's role in the Tobacco Cessation and/or Wellness program administration, if any.	The LGHIB is interested in learning vendor's capabilities in the support of the administration of these programs.
Q&A.150	Are individual employee/retiree premiums variable based on completion of a Tobacco Cessation Program and/or for participating in the Wellness Program or are rates for an entire unit adjusted based on overall unit program engagement?	Both.
Q&A.151	Which address should we use for submittal of hard copies?	If you are using a delivery service, use the physical address. If you are mailing, use the PO Box.
Q&A.152	What is the average size of an employer unit? What is the employee size of the smallest unit and largest unit?	Refer to response to Q&A.8.
Q&A.153	Does LGHIB intend to replace the Coverage Election Form (LG05) within the online system? If a platform can manage eligibility and enrollment for members, would LGHIB consider a solution where LG05 remains a manual process for the time being.	Yes, the LGHIB intends to utilize the online system for coverage election. The LGHIB desires to transform our business model from an ease of doing business perspective and by introducing as much automation and efficiency as possible into our processes. We are open to considering options within our implementation to leverage existing investments without compromising the objectives of our project.

Q&A.154	Is the intention of LGHIB to replace the Provider Screening Form (LG12) within the online system? If a platform can manage eligibility and enrollment for members, would LGHIB consider a solution where LG12 remains a manual process for the time being.	Yes, the LGHIB intends to utilize the online system for Provider Screening. The LGHIB desires to transform our business model from an ease of doing business perspective and by introducing as much automation and efficiency as possible into our processes. We are open to considering options within our implementation to leverage existing investments without compromising the objectives of our project.
Q&A.155	Is there an approved budget for this project? If so, can you please share the annual amount and any separate budget amounts for implementation, ongoing change orders, etc.?	The LGHIB declines to answer.
Q&A.156	Our experience in managing wellness for other clients has been to accept data from their wellness provider, and use that data to drive rules within our solution such as rates and eligibility. Is the request for a wellness module within the proposer's solution a requirement for this project, or would LGHIB be open to a solution that leverages an integration with the existing LGHIB solution?	The LGHIB desires to transform our business model from an ease of doing business perspective and by introducing as much automation and efficiency as possible into our processes. We are open to considering options within our implementation to leverage existing investments without compromising the objectives of our project.
Q&A.157	It appears after reviewing the premiums table provided on LGHIP.org that employee rates are consistent across all employers for both non-wellness and wellness rates. Can you please confirm?	Confirmed. Employer units are classified into two premium categories: standard and preferred. The categories incorporate several criteria, one of which is a unit's wellness participation.
Q&A.158	What is the current source of enrollment and demographic data? How does LGHIB expect to produce these data sets for initial migration to the new provider? Is this data inclusive of both active employees and retirees?	The current source of enrollment/demographic data is the LGHIB's current system. The LGHIB will produce the data sets, inclusive of actives and retirees for initial migration.
Q&A.159	Does LGHIB intend to implement this project for Open Enrollment or for current benefits? Is Open Enrollment typically active or passive?	Refer to response to Q&A.1. Open enrollment is typically passive.
Q&A.160	Does each employer unit have the ability to determine different eligibility rules, termination rules and wait rules?	Yes. The employer unit determines the effective date of coverage based on LGHIP Rules. All other eligibility and termination rules are determined by the LGHIB. Refer to response to Q&A.73.

Q&A.161	Is it required that the new provider provide a solution which provides the ability to index and view documents? Would LGHIB be open to a solution which can export documents (such as birth certificates and other required documentation captured by the proposer's solution) to LGHIB's current imaging system, Image Quest?	Refer to responses to Q&A.62, 65, 104.
Q&A.162	Is LGHIB looking for the new provider to provide eligibility audit services or provide the technology to enable LGHIB staff to perform these audits?	The LGHIB is looking for a provider to provide the technology to enable the LGHIB to perform these audits.
Q&A.164	Does LGHIB expect to send a single demographic file containing all Unit and Employee data to the new provider? If yes, what system would be sending this information? If no, what is the expectation of the provider as it relates to receiving employee information? Would each Unit key in their employee population or would that be managed by LGHIB?	Refer to response to Q&A.2.
Q&A.165	What accounts are referenced in this question? Can LGHIB please expand upon this requirement?	Member enrollment and COBRA payment information; employer enrollment, billing, and payment information.
Q&A.166	Can you please provide examples of where electronic signatures are needed? Would attestations within the benefits enrollment experience be sufficient, or are there other processes which require electronic signatures?	Refer to response to Q&A.113.
Q&A.167	It has been our experience that our public sector customers are making an attempt to shift to more digital forms of communication. Is barcoding a requirement of this project, or is LGHIB open to alternative communication solutions?	The LGHIB desires to transform our business model from an ease of doing business perspective and by introducing as much automation and efficiency as possible into our processes. We are open to considering options and alternative solutions.
Q&A.168	Outside of the forms listed on the LGHIP website, are there any other forms that need to be supported by the new provider? Is LGHIB open to continuing to manage these forms as they are today?	Refer to response to Q&A.167.
Q&A.169	Is LGHIB open to the new system sending emails, texts and push notifications directly from the Benefits Administration tool, or is it a requirement to integrate with Microsoft 365?	Refer to response to Q&A.167.

Q&A.170	How many files does LGHIB project to be required to support each unit? Is there an expectation that each unit would submit a file to the new provider? Is LGHIB open to alternative solutions such as employer units keying in new employees and changes?	Refer to response to Q&A.2.
Q&A.171	How many deduction files does LGHIB project will be needed to support payroll for each employer unit? Would LGHIB be open to employer units pulling payroll reports for their population? What other third-party systems might the new provider interface with?	Refer to response to Q&A.2.
Q&A.172	What other sources are referenced in this question?	An example: members paying COBRA premiums.
Q&A.173	Does each employer unit need to elect to participate in LGHIB today? How frequently is this done? Are there those that choose not to participate? If so, how are their benefits managed, and would it be the expectation of the new provider to manage those groups as well?	An employer unit requests inclusion in the LGHIP. The LGHIP will determine whether the employer unit is eligible for the LGHIP. An employer unit can request inclusion at any time. Employer units that do not request inclusion in the LGHIP manage their own health benefits. Refer to responses to Q&A.14 and 130.
Q&A.174	How is wellness currently being tracked today? Does the current provider send a file feed to LGHIB with employee participation, or is LGHIB tracking that through a different method? Does each individual employer unit receive a standard rate discount, or does that vary by employer? If so, what drives this discount level? How frequently is participation evaluated?	Refer to responses to Q&A.53, 121, and 134. See Exhibit 1A - LGHIB Administrative Guide for additional information.
Q&A.175	What is the current ACA reporting process? Does each employer unit currently manage this themselves, or does LGHIB manage ACA reporting for all of the units? Will it be the expectation of the new provider to perform ACA reporting? How many different EINs will be required? How many 1095s were sent last year?	Refer to response to Q&A.56.
Q&A.176	Can LGHIB please clarify what IAS is?	Internet Authentication Service.
Q&A.177	How many payroll schedules/frequencies are supported across the employers?	Refer to response to Q&A.2.
Q&A.178	Are there any part-time or variable hour employees that will need to be included and tracked in the selected vendor's system?	Yes.
Q&A.179	How will wellness data be provided? Can you provide a sample of this information?	Yes, wellness data will be provided. Additional documentation will be provided to the awarded vendor.

Q&A.180	The RFP lists 1,265 retirees in the health plan. Are retirees eligible for any other benefits? Are there any additional retiree records that would need to be stored in the selected vendor's system (e.g., Medicare individuals who did not enroll at the time of initial retirement)?	Unknown if retirees are eligible for non-LGHIB benefits. There are no additional retiree records to be stored.
Q&A.181	How the ACA reporting process managed today? Is this service in scope as a part of this RFP?	Refer to response to Q&A.56.
Q&A.182	Are there any employees on a leave of absence that need direct billing? Is that service in scope for this RFP?	Refer to response to Q&A.26.
Q&A.183	Please confirm if any other data exports need to be accounted for outside of the listed carriers: BCBSAL, Optum, Southland Benefits Solutions, UHC	Additional data exports will be required for the LGHIB's bank/financial institution.
Q&A.184	Are any plan changes anticipated for annual enrollment this year?	Not at this time.
Q&A.185	Is the retiree population an open or closed population (e.g., grandfathered retirees only, eligibility frozen however actives previously meeting criteria who will retire in the future, ongoing employees are eligible to newly qualify for retiree benefits)?	Open. Refer to response to Q&A.25.
Q&A.186	Is support requested for the determination of retirement eligibility? If yes, describe the data elements that will be provided via the HRIS file in support of this calculation. Further, please provide a sample calculation (e.g. age + years of service, no rounding).	No.