COFFEE COUNTY BOARD OF COMMISSIONERS

REQUEST FOR PROPOSAL

VOLUNTARY EMPLOYEE BENEFITS

ALL SUBMISSIONS ARE DUE AT THE ADDRESS BELOW NO LATER THAN

3:00 P.M. OCTOBER 27, 2021

Coffee County Board of Commissioners
Attention: Human Resources
101 S. Peterson Avenue
Douglas, GA 31533

Section I: GENERAL OVERVIEW

A. Purpose

Coffee County Board of Commissioners is issuing this Request for Proposal (RFP) to seek offers from qualified insurance professionals to provide brokerage services in support of the County's Voluntary Employee Benefits programs. The County is looking for one firm to fulfill the needed services. The use of subcontractors is permissible but requires the approval of the County. Approval shall not be unreasonable withheld.

The County has over 200 full-time, benefit eligible employees and historically holds annual enrollment in October.

B. Services

Services will include, but are not limited to:

1. Broker for Voluntary Employee Benefits
2. Marketing and placement of voluntary insurance products
3. Acting as liaison and an advocate for the County with carriers
4. Reviewing and advising on appropriate insurance coverage
5. Reporting on industry trends
6. Provide recommendations for enrollment support and technology
7. Ensuring continuity of service to plan members

Current Voluntary Benefits Offering

Plan Name
Allstate Group Voluntary Accident
Allstate Group Critical Illness
Allstate Group Cancer
Allstate Group Hospital Indemnity
Allstate Group Whole Life
Allstate Disability (STD & LTD)
OneAmerica Voluntary Term Life

The County anticipates awarding a single contract to one proposer for a period of three (3) years plus optional additional one-year renewals.

C. Timetable and Submission Requirements

The anticipated schedule for the RFP is as follows:

RFP released:	October 13, 2021
Deadline for questions:	October 20, 2021
Submission deadline:	3:00 p.m. October 27, 2021
Tentative Award Date:	November 2, 2021

All questions or concerns regarding this RFP should be made via email only to princess.porter@coffeecounty-ga.gov by October 20, 2021. No attempt shall be made to contact other County employees or elected officials concerning this RFP opportunity. The County reserves the right to reject the submittal of any vendor violating this provision.

Upon Receipt of the RFP, representatives from the County would like to schedule a meeting to discuss the proposal. Tentative Dates for Meeting will be October 28, 2021, and October 29, 2021. A representative will contact you with date and time of meeting.

One (1) original and six (6) copies of the Proposal shall be submitted in a sealed envelope, plainly marked on the outside "PROPOSAL FOR VOLUNTARY EMPLOYEE BENEFITS." Submittals received after the due date and time will not be considered. Modifications received after the due date will not be considered.

Products and/or services shall be in keeping with the specification as prescribed in this proposal. Designation of a particular brand or make is not meant to restrict the proposal but merely to indicate the type and quality desired.

The Board reserves the right to reject any or all proposals, request new proposals, consider alternate proposals which meet the general specifications set forth herein, and waive any informality. It also reserves the right to award proposals on such items and/or services it deems will best serve the Coffee County Board of Commissioners' interest from the standpoint of price, quality, and suitability for the intended purpose and any other determining factors. In addition, the County reserves the right to create, and select suppliers from, a "short list" to enter into negotiations with one or more suppliers, with the intent of awarding a contract.

D. Qualifications

The County desires a dedicated firm and representative to serve as a liaison between insurance carriers and the County, providing service as needed to support employees and retirees enrolling in, or enrolled in, the voluntary benefit coverages. Any individual representative providing service should possess an exceptionally service-minded attitude with the ability to effectively communicate and interact in one-on-one meetings with new and current employees, as well as employees planning to retire and retirees.

The following requirements are necessary for proposals to be considered for evaluation:

1. Proposer shall be a licensed insurance broker in the State of Georgia. A copy of the license shall be included in the proposal.
2. Proposer must be full service and provide consulting and brokerage. Proposer's letter of transmittal shall indicate the services provided by the proposer, exclusive of subcontractors.
3. Proposer must either provide existing enrollment technology, or build and maintain such technology, to support the voluntary benefit program.

Section II: SPECIFICATIONS/SCOPE OF WORK

A. Administrative Services

The following is a list of administrative services being provided as commission based:

1. Voluntary benefit plan design, support for the development of administrative procedures, coordination with the County payroll and Human Resources functions, enrollment, communications, reporting, etc.
2. Day-to-day assistance with issues and claims for contract compliance.
3. Proactive communication with providers to resolve issues for members.
4. Administrative support for invoice reconciliation.
5. Designated representative assigned to communicate with Human Resources, and to provide on site problem resolution for members.
6. Prepare annual enrollment communications.
7. Coordinate with Human Resources to schedule on-site visits and enrollment.
8. Online access to enrollment data.
9. Provide discrepancy reports to payroll prior to payroll runs.
10. Communicate with carriers as need to ensure eligibility and enrollment file transfers are completed accurately and efficiently.
11. Data file transfers to carriers and electronic form submission.

B. Online Voluntary Benefits Administration and Enrollment Platform Services

The County currently receives this service through Benefit Focus. Respondents are permitted to retain the service of Benefit Focus to facilitate transition and implement an alternate solution later.

1. The platform shall:

    a. Be a self-service online enrollment platform for employees to enroll and modify their selection of voluntary benefits
    b. Pass data to carriers and the County
    c. Meet current security standards and ensure HIPPA compliance for the data it collects
    d. Provide super user functionality such to allow manual enrollment and modification by the Human Resources staff

2. Respondents shall:

    a. Provide a procedures manual, or appropriate set of written guidance, for the County staff reference purposes and training
    b. Explain the full range of their services available to the County and state their experience, expertise and data processing capability
    c. Be responsible for implementation and transition services that include but are not limited to:
        (1) In person training of Human Resources staff
        (2) Development and implementation of participant training
        (3) Communication with participants on behalf of the County
        (4) Transferring or importing data from the County and the current platform

It is of utmost importance to the County that there is no disruption of services to members.

Section III: CONTENT OF PROPOSAL

Having carefully examined the general requirements and detailed specifications, provide the following in your response:

A. Background of Proposing Firm

1. Briefly describe your firm's background, history, and ownership structure, including any parent, affiliated or subsidiary company, and any business partner.
2. Please describe the services your firm provides.
3. Within the past three years have there been any significant developments in your firm such as changes in ownership, restructuring, or personnel reorganizations? Do you anticipate future significant changes in your firm?
4. Please give the address of the firm's corporate office and the office that will service the County.
5. State clearly any exceptions taken to the County's standard terms and conditions concerning liability, indemnification, and insurance requirements. Describe the levels of coverage for errors and omissions insurance and any fiduciary or professional liability insurance your firm carries. Explain if the coverage is on a per client basis, or if the covered amount applies to the firm as a whole. List the insurance carriers.

B. Standard of Conduct

1. Does your firm have a written code of conduct or a set of standards for professional behavior? If so, how are they monitored and enforced?
2. How are consultant's recommendations to clients reviewed and monitored by your firm? Does your firm adhere to a level of consistency in consultant recommendations?

C. Conflicts of Interest

1. Are there any potential conflict of interest issues your firm would have in providing services to the County? If so, describe them.
2. How does your firm identify and manage conflicts of interest?

D. Assigned Team

1. In a format as shown below, please provide information for each team member that will be assigned to the County.

Name	Title	Business Address	Business Phone	Email Address

2. Describe the role of each team member; include individual biographies.
3. Describe your firm's approach to account transition.

E. Fees

Describe your firm's proposed form of compensation (i.e., commission, annual retainer, fee-for-service); include specific percentages and/or rates.

F. Proposal Requirements

1. Describe your firm's approach to providing the specific services requested.
   a. Activities and timelines should be specific, measurable, achievable, realistic, and time oriented.
   b. Include a timeline of major tasks and milestones.

2. Provide a detailed overview of the benefit enrollment process during annual enrollment and for new hires.
3. Provide a detailed overview of your claim process, how do employees file claims, and how are claims reimbursed to the employee. Include average claims turnaround time for each product.
4. Please provide a detailed description of the billing process and what is expected from the County.
5. In addition, all plans must provide:
    a. Guarantee issue
    b. Waived participation requirement and/or minimum participation requirements
    c. Eligible to all full-time employees working 30 hours per week, as well as elected officials
    d. Qualifications of proposer, including experience working with municipalities
    e. Plan descriptions and details

IDENTIFICATION OF PROPOSAL

Cut along the outer border and affix this label to your sealed proposal envelope to identify it as a "Sealed Proposal". Be sure to include the name of the company submitting the proposal where requested.

SEALED PROPOSAL ▪ DO NOT OPEN

TITLE OF PROPOSAL:	PROPOSAL FOR VOLUNTARY EMPLOYEE BENEFITS
DUE DATE:	OCTOBER 27, 2021
TIME:	3:00 P.M.
SUBMITTED BY:	
	(Print Name of Company)

DELIVER TO:

Coffee County Board of Commissioners
Human Resources
101 S. Peterson Ave.
Douglas, GA 31533

PLEASE NOTE DELIVERY ADDRESS
This is a secured facility. Ensure enough time if choosing to hand deliver the proposal.