



SOQ NO. 22-037

**Group Medicare Advantage Plan with a Nationwide Provider Network
for all Medicare Eligible Retirees and Dependents**

Deadline for Submissions: 3:30 p.m., August 18, 2022

ATTENTION VENDORS!!!

Please review all pages and respond accordingly, complying with all provisions in the technical specifications and Jefferson Parish Instructions for Bidders and General Terms and Conditions. All bids must be received on the Purchasing Department's eProcurement site, www.jeffparishbids.net, by the bid due date and time. Late bids will not be accepted.

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**Statements of Qualifications Requested
For Group Medicare Advantage Plan**

Requested by:
Jefferson Parish Government



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Statement of Qualifications for Fully Insured Medical Plan

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PUBLIC NOTICE
SOQ 22-037

**Group Medicare Advantage Plan with a Nationwide Provider Network for all
Medicare Eligible Retirees and Dependents**

Deadline for Submissions: 3:30 p.m., August 18, 2022

Jefferson Parish Government (referred to herein as JPG or the Parish) authorized by **Resolution No. 140001**, wishes to obtain proposals from qualified and licensed insurance carriers for the following medical plans:

- A Group Medicare Advantage Plan with a nationwide provider network for all Medicare Eligible retirees. The plan must provide the same benefit structure for retirees in and out of the state of Louisiana and must include prescription, dental, and vision benefits.

The enrollment period is approximately mid-October through mid-November 2022.

JPG consists of approximately thirty departments providing services for the citizens of Jefferson Parish. Services provided include but are not limited to water, sewage, drainage, streets, fire and supporting departments. Included in the employee benefit plans are employees of the 24th Judicial District Court, Juvenile Court, two Parish Courts, the District Attorney's Office, the Coroner's Office, the Justices of the Peace and the Constables Offices. There are currently approximately 1,100 retirees participating in the Retiree Medical Plan.

JPG will provide the following information upon email request to jpalermo@jeffparish.net

1. 2022 Census
2. Current plan documents

MINIMUM QUALIFICATIONS

The following are mandatory requirements for all proposers that cannot be delegated to another entity and must be met by the actual entity submitting the proposal. Failure to meet any of these requirements at the time of the submission deadline will result in the disqualification of a proposal:

1. Proposer must be properly licensed in Louisiana. Please provide copies of all licensing credentials.

2. Proposer must have at least five (5) years of experience in providing the type of plans and services requested in this SOQ.
3. Proposer must offer the type of plans and services as described in this SOQ to at least two (2) similar employer groups or municipalities with similar total members as Jefferson Parish Government, and provide as references

EVALUATION CRITERIA

1. Financial Proposals – 30 points maximum;
2. Demonstrated experience providing quality medical and pharmacy plan benefits for large groups (1,000+ members) – 20 points maximum;
3. Company's financial strength – 10 points maximum;
4. Demonstrated ability to provide excellent customer service to the Plan Administrator and Members – 20 points maximum;
5. Benefit Structure, Nationwide provider network, Dental Benefits, Vision Benefits, Other Value Added Benefits – 20 Points maximum

The person or firm submitting a Statement of Qualification (General Professional Services Questionnaire) must identify all subcontractors who will assist in providing professional services for the project, in the professional services questionnaire. Each subcontractor shall be required to submit a General Professional Services Questionnaire and all documents and information included in the questionnaire. (Refer to Jefferson Parish Code Ordinance, Section 2-928)

All persons or firms (including subcontractors) must submit a Statement of Qualifications (General Professional Services Questionnaire) by the deadline. The latest professional services questionnaire may be obtained by contacting the Purchasing Department at (504) 364-2678 or via the Jefferson Parish website at www.jeffparish.net. This questionnaire can be accessed by hovering over "Business and Development" on the website and clicking on the Professional Services Questionnaires option under "Doing Business in Jefferson Parish".

Submissions will only be accepted electronically via Jefferson Parish's e-Procurement site, Central Bidding at www.centralauctionhouse.com or www.jeffparishbids.net. Registration is required and free for Jefferson Parish vendors by accessing the following link: www.centralauctionhouse.com/registration.php.

No submittals will be accepted after the deadline.

Affidavits are not required to be submitted with the Statement of Qualifications, but shall be submitted prior to contract approval.

Disputes/protests relating to the decisions by the evaluation committee or by the Jefferson Parish Council shall be brought before the 24th Judicial Court.

SCOPE OF SERVICES

General Services

Mail all plan related materials to all covered retirees to be received prior to commencement of open enrollment meetings on an annual basis. Materials will include plan summary, all inclusive network provider list/booklet, prescription drug coverage information, material describing ancillary coverage, such as dental, vision, etc.

Will comply with all applicable Federal, State, and Local laws, rules and regulations. These laws, rules and regulations will be deemed to be included in the contract the same as though herein written in full.

The healthcare provider must mail subscriber and dependent ID cards annually prior to the first of each year after open enrollment.

Provide annual open enrollment support by providing a speaker at each retiree meeting upon request. Provide representatives to meet with retirees individually upon request for possible enrollment when the retiree reaches age 65.

Professional Services

Provide a network of physicians, hospitals and ancillary medical providers. Maintain a thorough, well documented credentialing procedure, and conduct an ongoing quality assurance program under the purview of a peer review committee.

Provide utilization management services designed to authorize care with the fewest number of hospital days and/or elective surgeries such that quality of care and patient satisfaction are not reduced. Reviews to be conducted by staff consisting of registered nurses and a panel of physician advisors including specialists.

Provide information on all programs that target treatment of chronic diseases, i.e., disease management. Discuss health assessment surveys, nurse interventions and health outcome data, different therapies used to treat different diseases and dissemination of data to network physicians.

Administrative Services

Establish, maintain, and update Master Record file(s).
Prepare and print all plan documents:

- Group Policy/ Plan Document
- Summary Plan Description (SPD)

- Other documents as may be required by federal state and local laws

Furnish all standard forms to be used in connection with the administration of the plan:

- Enrollment Forms
- Claim Forms
- ID cards
- EOBs

Review, in a consultative capacity, summary plan descriptions and other similar material to be distributed to plan participants.

Consult on plan provisions, plan design, impact of local, state, or federal legislation, new medical procedures/technology, emerging benefits trends, cost containment, and other ongoing services issues.

Performance Standards

Proposer shall maintain the following performance levels, as applicable:

Eligibility Loading- Load all eligibility files into system within five (5) business days of receipt.
 Measurement Criteria- Elapsed time from date file received to the date upon which the file is loaded to the eligibility system.

ID Cards -mailed within ten (10) business days after final member eligibility is received, system loaded and passes a quality assurance check. Measurement Criteria - Date ID cards are mailed.

Electronic "Claim Ready Date"- Electronic Claim Ready by the effective date or within twenty (20) business days after account structure is entered into the system, final member eligibility is received, and benefit plan design is finalized. Measurement Criteria - Date plan benefits and employee and dependent eligibility data is system loaded.

Claim Operations: Measurement Criteria- by standard claim operations reports:

Time to Pay- 90% of "non-controversial" or "clean" claims paid in ten (10) business days

Financial Accuracy- 99% of submitted charges processed correctly

Procedural Accuracy- 95% of claims processed without non-financial error

Penalties: The annual penalty for failure to maintain the performance levels above shall be:

Eligibility Loading	\$20,000
ID Cards	\$50,000
Electronic "Claims Ready Date"	\$50,000

Time to pay \$50,000 for failure to pay 90% of claims within 10 days; Increase \$5,000 per extra day to meet 90% standard to a maximum of 15 days and maximum of \$100,000.

Financial Accuracy \$100,000 for failure to process 99% of claims correctly; Increase \$5,000 per 25% reduction in accuracy to 98% and maximum of \$200,000

Procedural Accuracy \$20,000 for failure to process 95% of claims without a Non-financial error; increase \$5,000 per .50% reduction in accuracy to 93% and maximum of \$40,000.

Claims Processing Services

Maintain and update eligibility file.

Administer the plans' Coordination of Benefits (COB) provision.

Review claims submitted for medical services that appear excessive and/or establish medical necessity for services rendered or expenses incurred.

Make available the services of field claim consultants and/or professional services resources for the evaluation of complex claims.

Maintain peer review relations.

Discuss disputed charges with providers when appropriate.

Must notify JPG of any and all PPACA changes and updates that will impact JPG financially and administratively.

Maintain and store claim detail data elements for statistical analysis.

Provide online and mobile claim viewing access to participants.

New Business Installation Services

Consult on new products, alternate health care delivery system, and healthcare cost management techniques.

Participate in and/or conduct retiree meetings as requested.

Act as a liaison with administrative, technical services, and claims departments.

If you are awarded the contract, you will be responsible for developing, printing and distribution of the required ID cards, claim forms, provider directories and employee booklets. Any cost for these services must be absorbed by the proposer.

Other Services

Provide a network of physicians, hospitals and other health care professionals and providers offering discounts or special fee arrangements to their normal service fee schedules.

A dedicated nationwide toll free customer service line specifically for retirees of the Parish is required.

JPG reserves the right to return to the top candidates to request a final proposal based on one or more components of the initial proposal. JPG reserves the right to negotiate certain terms and conditions relative to the contract.

SCHEDULE OF EVENTS

Action	Target Date
Released to Insurance Carriers	7/20/2022
Proposal Submitted to JPG	8/18/2022
Successful Carrier Selected	TBD
Successful Carrier Contract Ratified	TBD
Effective Date	01/01/2023

Note: Jefferson Parish reserves the right to deviate from these dates.

LIST OF ATTACHMENTS

The following attachments are made a part of this SOQ. Please respond completely to all as indicated.

- Attachment A General Professional Services Questionnaire
- Attachment B Insurance Requirements and Indemnification
- Attachment C Proposed Rate Form
- Attachment D Carrier Questionnaire
- Attachment E SOQ Affidavit

ATTACHMENT A

General Professional Services Questionnaire

The most current **General Professional Services Questionnaire** must be submitted. A copy of the questionnaire may be obtained by calling the Jefferson Parish Purchasing Department at (504) 364-2678 OR (504) 364-2682 or the Jefferson Parish website at www.jeffparish.net by clicking on “Business with the Parish” under Business Services, and then click on “Prof. Services Questionnaire”.

[https://jefferson-parish-government.azureedge.net/JPGeneralProfServicesQuestionnaire-2016-11-22\(New%20Image\).pdf](https://jefferson-parish-government.azureedge.net/JPGeneralProfServicesQuestionnaire-2016-11-22(New%20Image).pdf)

The submitting firms must identify all subcontractors who would assist in providing professional services for the project.

Each subcontractor must submit a General Professional Services Questionnaire and all documents and information included in the questionnaire.

ATTACHMENT B

INDEMNITY

To the fullest extent permitted by law, Proposer, agrees to protect, defend, indemnify and save the Parish, its agents, officials, employees, volunteers or any firm, company, organization, or individual, or their Proposers, or subcontractors with whom the Parish may be contracted harmless from and against any and all claims, demands, actions, and causes of action of every kind and character including but not limited to claims based on negligence, strict liability, and absolute liability which may arise in favor of any person or persons on account of illness, disease, loss of property, services, wages, death or personal injuries resulting from acts or omissions of Proposer, its agents, employees, assigns, or subcontractors, during the operations contemplated by the contract.

This indemnity does not extend to the sole negligence of the Parish and the Proposer shall not be liable to the Parish for its lost profits or revenue or consequential damages except claims advanced in tort and/or claims advanced in contract due to the bad faith of Proposer. Bad faith shall mean a breach of some motive or interest of ill will on the part of the Proposer.

Further, Proposer hereby agrees to indemnify the Parish for all reasonable expenses including but not limited to all fees and charges of attorneys and other professionals and all court or other dispute resolution costs incurred by or imposed upon the Parish in connection therewith for any such loss, damage, injury or other casualty. Proposer further agrees to pay all reasonable expenses and attorneys' fees incurred by the Parish in establishing the right to indemnity pursuant to the provisions in this agreement."

The insurance requirements shall be as follows:

All insurance requirements shall conform to Jefferson Parish Resolution No. 113646 dated 12/09/2009.

The proposer shall not commence work under this contract until it has obtained all insurance and complied with the insurance requirements of the specifications and Resolution No. 113646.

WORKER'S COMPENSATION INSURANCE

As required by Louisiana State Statute, except Employer's Liability, Section B shall be \$1,000,000 per occurrence when Work is to be over water and involves maritime exposures to cover all employees not covered under the State Worker's Compensation Act; otherwise, this limit shall be no less than \$500,000 per occurrence.

COMMERCIAL GENERAL LIABILITY

Shall provide limits not less than the following: \$1,000,000.00 Combined Single Limit per Occurrence for bodily injury and property damage.

COMPREHENSIVE AUTOMOBILE LIABILITY

Bodily injury liability \$1,000,000.00 each person; \$1,000,000.00 each occurrence. Property Damage Liability \$1,000,000.00 each occurrence.

DEDUCTIBLES

No insurance required shall include a deductible greater than \$10,000.00. The cost of the deductible is borne by the Proposer.

PROFESSIONAL LIABILITY

Shall provide Combined Single Limit of \$1,000,000.00 per Occurrence.

UMBRELLA LIABILITY COVERAGE

An umbrella policy or excess may be used to meet minimum requirements.

SUBCONTRACTOR INSURANCE

The Proposer shall include all subcontractors as insured's under its policies or shall insure that all subcontractors satisfy the same insurance requirements stated herein for the Proposer.

ATTACHMENT C

Proposed Rate Form

JPG wishes to maintain the following:

Medicare Advantage

- Retiree
- Spouse/Dependent

ATTACHMENT D

CARRIER QUESTIONNAIRE

1. Name and address of parent company and local office.
2. Is your company a wholly-owned subsidiary or a division of another company? If so, please identify the company name and address.
3. How many members are currently being served nationally and in Louisiana? How many employers with over 1000 retirees are currently being served?
4. Provide three references that have similar dynamics to Jefferson Parish Government. At least one reference group should have gone through the respective enrollment process within the last two years. Include contact names, phone numbers and email addresses.
5. How long has your company been in business?
6. What is your AM Best Rating? If applicable.
7. What is the size of your local staff?
8. Provide a resume for each key employee in your organization who will be handling our account.
9. List three references of over 1,000 retirees' who you administer the health plan. Please provide employer, contact, address and phone number of references.
10. Describe the account management services and the team that would be responsible for handling the Parish account.
11. Describe the support you would provide as part of a change in vendors. Provide an implementation and communication schedule showing tasks, allocation of responsibilities and personnel.
12. Do you agree to comply with all of the proposal assumptions and requirements as outlined in this SOQ? If not, specifically explain how your proposal deviates from this.
13. Do you agree to administer the requested benefits plan as described? If not, specifically identify any variations in plan designs.
14. Describe your enrollment process.
15. What is your administration charge as a percentage of premiums for JPG?
16. What is the JPG pooling level and estimated pooling charge for 2021?
17. What unique services or support does your organization provide that you believe sets you apart from your competition?
18. Please provide results from the following surveys for 2020 or 2021:
 - Member Satisfaction
 - Provider Satisfaction
 - Benefits Manager Satisfaction
19. For which services, and whom, do you outsource the following:
 - Mental Health
 - Laboratory
 - Vision
 - Prescription drug
 - Network management

- Utilization management
20. What are your weekday and weekend hours of telephone member services availability?
 21. For member services, what was the 2020 or 2021 telephone average speed of answer?
 - Member Line
 - Provider Line
 - Combined Medical/Utilization Review Line
 22. What is your Website address and what member information can be accessed from the Website?
 23. What is your 2021 target Per Member per Month (PMPM) medical cost for your network?
 24. For what procedures do you offer a Centers of Excellence program? Please provide a listing of locations utilized by procedure.
 25. A provider network is a critical part of the medical plan; therefore, include provider directory with your proposal. Also, provide a GEO Access report using a standard of two (2) providers within ten (10) miles.
 26. Is MD Anderson in Houston a network provider?
 27. What disease management programs do you currently have in place?
 28. Describe your current Wellness Program options and results, including what programs are provided to assist in healthy living.
 29. Describe your pharmacy network.
 30. How many Prescription Drug Lists (PDL's) does your company administer?
 31. If more than one PDL, what is the pricing differentials for each PDL and what is the impact on premiums and co-pays?
 32. Based on the top 100 drugs based on prescriptions filled, please identify which tier each drug falls under in your company's PDL.
 33. Describe your mail order capabilities.
 34. What is your market share in your local market based on membership for 2019, 2020 and 2021?
 35. What was your Louisiana profit/loss in 2020 and 2021? Please provide your 2020 or 2021 financial report.

ATTACHMENT E

SOQ Affidavit

You may download a copy of Jefferson Parish's SOQ Affidavit at www.jeffparish.net

Click on Business & Development. Under "Doing Business in Jefferson Parish" Click on Professional Services Questionnaires. Scroll down and click on "Affidavit Form"

Executed Affidavit is not required for submission but is required prior to Contract Approval.

<https://jefferson-parish-government.azureedge.net/documents/departments/purchasing/forms/3-affidavits/07-SOQAffidavit-2014-02-27.pdf>