

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG**

INITIAL POSTING 4/4/2013

Question 1:

Fully insured rates: Please advise how the monthly premium rates should delineate health care reform riders. The tables currently delineate basic medical, prescription drug rider, mental health/substance abuse, and total.

Answer 1:

The table has been updated to include a row for identifying the total cost included in the rates for health care reform. Please itemize these costs by utilizing the space in Question #2.

Question 2:

Please expand on the question, Prescription benefits covered the same as medical, refer to question #70 under Active PPO groups. Does the term "covered the same" refer to eligibility coverage or benefit coverage relative to member liability, formulary, prior authorization/clinical programs?

Answer 2:

The term "covered the same" refers to the benefit design for each specific plan. For example, if Medical is covered at 80% and Rx is the same at 80%, then the answer would be 'yes'. If Rx has a separate co-pay the answer would be 'no'.

Question 3:

Under the Fee Request PPO, please define Immature year 1 vs. Mature year 1.

Answer 3:

This refers to the two methods of calculating premium rate equivalents for year 1 should the City elect a self-insured arrangement effective January 1, 2014.

Question 4:

Under the Fee Request PPO, the RFP is asking for 3 year guarantee but columns exist for Year 4 and Year5. Is the City considering a 5 year contract?

Answer 4:

Please disregard Years 4 and 5. The RFP is based on a 3-year contract arrangement. A comment has been added to the RFP advising to enter zeros for years 4 and 5.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG**

Updated April 8, 2013

Question 5:

Top Rx Disruption Report: We were unable to locate the Top Rx drug file needed to provide an Rx disruption report in the attachments. Please provide.

Answer 5:

The Rx data is forthcoming as a part of the request for a prescription drug/cost formulary analysis. The analysis should be based on the top 50 generic and 50 brand name medications utilized (see page 10 of Attachment A).

Question 6:

Please provide a copy of the following designs: 12720-23, 53 and 12199-12, 92 and 12199-22, 52

Answer 6:

#12720-23, -53: FF Non-Medicare Eligible Retired in 1/1/2011 -12/31/12) – Same grid as Active #12720-03 with exception of Women’s Health or 100% Preventive

#12199-12, -92: Police Officer Non-Medicare Eligible Retired in 1/1/2008 – 12/31/2010) – Same grid as Active #12199-01 with exception of Women’s Health , 100% Preventive and unlimited LTM (\$1,000,000 In / \$500,000 Out)

12199-22, -52: Police Office Non-Medicare Eligible Retired in 1/1/2011 – 12/31/2011) – Same grid as Active #12199-01 with exception of Women’s Health or 100% Preventive.

Question 7:

Please provide clarification on which employees need to be included on the fire and police retiree census. Also, please provide gender as well.

Answer 7:

An updated retiree census, including gender, for both the firefighters and police officers was posted 4/8/18. The retiree census includes all Non-Medicare Eligible Retirees as well as those retirees who have elected “Other” coverage. These individuals currently opted out, however, they are eligible to elect the City plan they were enrolled in at the time of retirement during any future open enrollment or due to a qualifying event.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
Updated April 8, 2013**

Question 8:

Please provide a copy of the City's premium rates for the last 3 years and their 2014 renewal if available.

Answer 8:

A file entitled City of Pittsburgh Fully Insured Premium History has been posted to the site under the Manage Attachment tab. The 2014 renewal is not available.

Question 9:

Please advise if the two tier formulary programs are open or closed.

Answer 9:

The two-tier formulary Rx programs are closed.

Question 10:

There are benefits showing on the plan grid that are not compliant with PPACA (regardless of grandfathered or non-grandfathered status) example: lifetime max. Please confirm we have the most current grids.

Answer 10:

The retiree plans mirror the corresponding active plan that was in effect at the time an individual retires. Therefore some of the retiree plans were not required to be updated for PPACA.

CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
Updated April 8, 2013

Question 11:

Are the plans considered grandfathered?

Answer 11:

The retiree plans mirror the corresponding active plan that was in effect at the time an individual retires. Therefore some of the retiree plans were not required to be updated for PPACA.

UPDATED April 12, 2013

Question 12:

What is the contribution strategy?

Answer 12:

Please reference page 10 of Attachment A – General Information. Contributions for actives are currently on a fixed basis, however are subject to change based upon future CBA negotiations. Retiree contributions are currently on a fixed basis based on date of retirement.

Question 13:

What medical management and/or disease management programs are included today?

Answer 13:

Disease and Medical Case Management programs include an outreach program and are voluntary.

Question 14:

Please confirm the HMO and Indemnity claims information includes Medical and Pharmacy claims.

Answer 14:

The Medical and Rx claims data is combined for the HMO and Indemnity plans.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 15:

Please provide updates census files which include group number.

Answer 15:

A group # category is not available on the census data. Please refer to the benefit plan charts on pages 7- 9 of Attachment A which includes a description of employees covered by plan and corresponding group #.

Question 16:

What level of MBE/WBE and Veteran owned business is included in the rates today? What companies are being utilized? Is Highmark meeting the goal?

Answer 16:

The current MBE/WBE participation is not available.

Question 17:

What level of MBE/WBE is requested to be included in our proposal?

Answer 17: 25% Total – 18% MBE and 7% WBE

Question 18:

Please confirm that the MBE/WBE/Veteran owned participation percentages are based on account retention and does not apply to projected claim costs.

Answer 18:

The participation percentage should be based on administrative costs.

Question 19:

Please confirm the MBE/WBE/Veteran Owned Businesses do not need to be located in the City of Pittsburgh.

Answer 19:

Correct

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 20:

Please provide updated claims data for all groups broken out by Medical, RX and Mental Health.

Answer 20:

Please utilize the claims data provided. The file can be sorted by Group # and Product columns. Mental Health claims are not broken out.

Question 21:

What plan are the subscribers in the URA census enrolled in?

Answer 21:

The URA participants are offered the City's Active PPO Plan # 12199-xx.

Question 22:

Under Submission Requirements on the HHR Requests Website, we are asked to provide references as outlined in the questionnaire but we do not see the questionnaire. Please provide guidance.

Answer 22:

References can be included under the Plan Contact Information section.

Question 23:

Please confirm there is no an AON excel workbook which includes a questionnaire to be completed.

Answer 23:

Please note that the RFP wording regarding a questionnaire does not apply to this particular RFP template. A separate questionnaire does not exist.

Question 24:

Under the Requested Attachments Section on the HHR Request Website, #4 asks for a Completed Network Statistics table. Is this referring to the information in the Access **Summary** section (questions 12, Geos, & Disruption)?

Answer 24:

Please disregard Item #4 Completed Network Statistics table.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 25:

Would AON be willing to accept an electronic copy of our proposal and information uploaded to the HHR Request website on April 25 by 12:00 PM ET with binders to follow?

Answer 25:

Proposal submissions can be submitted electronically up to the deadline with hardcopies to follow after the due date.

Question 26:

Please advise if a non-officer individual with the authority to bind a contract will be sufficient to sign all applicable RFP documents?

Answer 26:

Yes, that is acceptable.

Question 27:

Please provide the disruption documents with TINs, Provider Name, City, State and Zip. Please provide these in excel if possible.

Answer 27:

We have requested updated reports to include the providers' TINs and addresses and will post when available. If we need to provide an extension for receipt of the disruption analysis we will advise accordingly.

Question 28:

There is a benefit summary included in the Active City Employee folder for the Laborers' District Council of W. PA Welfare Fund. Please confirm if we need to quote this plan. If so, please confirm you have provided their claims information.

Answer 28:

The benefit summary is for the PJCBC labor union plan which is currently through the Laborers' Trust Fund. However, effective 1/1/2014, they are considering being included under the City.

Please quote the current plan design for the Laborers' District Council of W. PA Welfare Fund. Claims data for this group of approximately 330 employees is not available.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 29:

Is the City planning to keep 3 tier - “open” formulary in place going forward?

Answer 29:

Yes, the current Rx plan designs will remain.

Question 30:

Does the City currently have mandatory mail (members have to go to mail-order pharmacy for maintenance medications) in place after a certain number of fills at retail?

Answer 30:

No, the current Rx plan designs do not include mandatory mail order.

Question 31:

Does the City currently have mandatory specialty (members have to go to specialty pharmacy for injectable/specialty medications) in place after a certain number of fills at retail?

Answer 31:

No, the current Rx plan designs do not include mandatory specialty.

Question 32:

Does the City currently cover Smoking Cessation Medications?

Answer 32:

No

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 33:

Does the City currently cover Erective Dysfunction Medications?

Answer 33:

No

Question 34:

Does the City currently cover Fertility Medications?

Answer 34:

No

Question 35:

Please provide an updated high claimant report for the Police and Fire Retirees which is broken out by plan or includes a plan indicator.

Answer 35:

There are separate high claim reports as follows:

Active Fire

Active Police

Active City including the Non-Medicare Eligible Police and Fire Retirees)

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 36:

Are the retiree plans grandfathered?

Answer 36:

Yes, the retiree plans are grandfathered.

Question 37:

Please elaborate more on the response to question #6 about the missing plan designs (12720-23, 53 and 12199-12, 92 and 12199-22, 52). We are unclear on the differences outlined.

Answer 37:

The plan designs referenced are for the retiree participants. The retiree plans are not subject to the PPACA. The retirees have the same plan they were enrolled in when they retired. The retiree PPO plans referenced are essentially the same as the Active PPOs without the PPACA updates.

Question 38:

Please confirm the amount we are requested to fund for a pre-implementation audit. The questionnaire states \$35,000 and the Performance guarantees state \$50,000.

Answer 38:

The amount applicable to the pre-implementation audit is \$35,000.

Question 39:

Please confirm the City is truly looking for a 90 day grace period as Client Specific Admin Requirements question 22 states that premium will be paid by the end of the current month. If a 90 day grace period is truly being requested please confirm it is being asked for on both the fully insured and ASO proposals.

Answer 39:

Yes, a 90 day grace period is requested for the fully-insured proposal, as well as the fee portion of the ASO proposal.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 12, 2013**

Question 40:

Claims information is provided for a +65 group/plan for both the Fire and Police groups however there is only 1 subscriber listed in the Police Retiree census. Please either provide the census information for the Fire and the rest of the Police group, or advise how we are to address that claims experience.

Answer 40:

Please disregard the claims data for the +65 groups as they are not included in this RFP.

Question 41:

Please confirm when we should expect to receive the Prescription Drug Cost/Formulary Analysis document. To complete this information, we normally need around 5 business days (depending on complexity) and want to ensure we will have enough time to complete.

Answer 41:

We expect to provide the information by Friday, April 19th. If we need to provide an extension for receipt of the Rx analysis we will advise accordingly.

Question 42:

Please advise as to which product/funding we should respond to questions on the HHR Request website if there is only room for 1 product/funding.

Answer 42:

Please complete the rate sheets based on a fully-insured arrangement. Please provide premium rate equivalents for the ASO arrangement on a separate attachment labeled "ASO Premium Rate Equivalents"

Question 43:

Please provide the contract referenced in Attachment A, question 6.

Answer 43:

The City contract was not attached as part of the RFP and will be addressed during the Finalist phase.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 15, 2013**

Question 44:

Is it permissible to use 3rd party stop vendors to provide stop loss proposals? This would include sharing data submitted in the RFP.

Answer 44:

Yes, it is our assumption that most carriers partner with a preferred stop-loss vendor. The medical/rx carrier will need to assume responsibility for the transfer of this data to their preferred vendor and for ensuring confidentiality and secure protection of the data.

UPDATED APRIL 16, 2013

Question 45:

Within the Client Information and Instructions document, section Network Disruption and Cost / Discount Data- please provide the utilization documents referenced below:

We are also requesting prescription drug cost / formulary information for the top 20 generic and 20 Brand name medications utilized by this population. Utilization data is included in the attachments to this document.

Answer 45:

Please refer to Question #41.

Question 46:

Requested Attachments-4. Completed Network Statistics Table- please provide the document that we are to complete.

Answer 46:

Please refer to Question #24.

Question 47:

Requested Attachments-3-Copy of the contract with the Health Plan and City of Pittsburgh- can you clarify what is needed for this Attachment .

Answer 47:

Please provide a sample contract.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 16, 2013**

Question 48:

For the MWBE Requirement, is there a specific percentage we should achieve?

Answer 48:

Please refer to Question #17.

Question 49:

Please confirm if you are requesting any Pharmacy guarantees.

Answer 49:

Yes.

Question 50:

Can we obtain Pharmacy Claims utilization data? Will pharmacy full claims data be made available?

Answer 50:

Additional Rx utilization is forthcoming.

Question 51:

What is current rebate arrangement with incumbent?

Answer 51:

Current arrangement is insured. This information is not available.

Question 52:

What type of pricing structure is the plan looking for specific to Rx?

Answer 52:

A pricing structure based on Rx guarantees is requested.

**CITY OF PITTSBURGH
MEDICAL/RX CARRIER QUESTION LOG
UPDATED APRIL 16, 2013**

Question 53:

As this is an online Hewitt submission can we deliver the hard copy binders 4/26?

Answer 53:

Please refer to Question #25.

Question 54:

Can you confirm that the +65 claims on the utilization reports provided should be included with this bid, or are these claims for the Medicare +65. Is there a way to delineate between the Non Medicare claims and +65 that you can provide?

Answer 54:

Please refer to Question #40.

Question 55:

There is no place to respond for out of network benefits in the 12720-13 plan design.

Answer 55:

Please note that the plan design for plan #12720-13 inadvertently excludes space for the out-of-network level of benefits. Please note that the plan design is essentially the same as #12720-23 and the out-of-network benefits can be noted under that group's plan design.

