



**ADDENDUM #1**  
**ITB/RFP NUMBER: 2022016-FN-P**  
**Group Health Insurance Coverage RFP**

DATE: January 20, 2022

TO: All Potential Bidders/Offerors

City of Harrisonburg's RFP, is modified as follows:

On Attachment I, paragraph A., the RFP # is incorrectly listed as 2015026-FN-P and should be corrected to 2022016-FN-P.

1. Question: For paper copies, we plan to include large documents such as sample agreements and financial statements on USB instead of hard copy. Please confirm if this is acceptable to the City.

Answer: Refer to Section 8.0 INSTRUCTIONS TO OFFERORS of the RFP for deliverable requirements.

2. Question: Will the City accept electronic signatures in lieu of a wet signature?

Answer: The City prefers an actual signature, however, electronic will be acceptable.

3. Question: Please confirm if the accumulators are on a calendar year basis (January – December) or a plan year/contract year basis (July – June).

Answer: The accumulators are on a calendar year basis. The City expects that the carrier to whom the contract is awarded will provide deductible and out-of-pocket credit for claims incurred from January 1, 2022 thru June 30, 2022.

4. Question: Please confirm if the current pharmacy network is open and if an open pharmacy formulary should be quoted.

Answer: The City's plan currently utilizes Anthem's National Formulary which we consider an open formulary.

5. Question: How is the Rx rebate administered? Reduction in the ASO fee or 100% credited to the group? If a credit to the ASO fee, what was the Rx credit PEPM for the 2021 plan year?

Answer: Currently, a credit to the Administration Fee is provided to approximate anticipated Rx Rebates with a subsequent quarterly settlements occurring to fully pass-thru all rebate dollars received.

6. Question: Please provide the most current 12 months of Rx claims with Rx name, paid amount copay, frequency, tier and channel.

Answer: The City will not be providing the Rx file requested. Information provided in *Attachment J* (Claims Experience & Enrollment Data) details Rx claims by month for a 36 month period. In addition, a list of the City's Top 25 prescriptions by Paid Amount was also provided.

The City will provide a Pharmacy Key Indicators report which provides much of the requested information on an aggregate basis. Contact McGriff Insurance Services for this information:

Mr. Scot Chancy via email at [SChancy@mcgriff.com](mailto:SChancy@mcgriff.com) or via phone at 540-470-8253

Ms. Renee Yates via email at [Renee.Yates@mcgriff.com](mailto:Renee.Yates@mcgriff.com) or via phone at 540-649-2771

7. Question: Please provide a copy of the current stop loss contract.

Answer: Contact McGriff Insurance Services for this information (see answer to #8 above for contact information).

8. Question: Please provide the current stop loss fees for the current 2021 period as well as prior periods 2020 and 2019.

Answer: Contact McGriff Insurance Services for this information (see answer to #8 above for contact information).

9. Question: Please provide a copy of the current ASO contract.

Answer: There is no current ASO contract. The most recent ASO contract is from 2018 with subsequent updates for annual fees. If there are specific questions regarding services currently provided, the City will make efforts to clarify.

10. Question: Please provide the current administrative fee to include the pharmacy rebate credit PEPM (if applicable) broken out for the current 2021 period as well as prior periods 2020 and 2019.

Answer: The City will provide the current 2021 period. Contact McGriff Insurance Services for this information (see answer to #8 above for contact information).

11. Question: Please confirm the current Network Access Fee billed as a percentage of savings.

Answer: The Network Access Fee is calculated generally as the difference between billed charges for covered services and the negotiated amount.

12. Question: Are there any existing allowances or credits included in the current contract?

Answer: None that the City is aware of.

13. Question: Please confirm if the rates should be provided in a 5 tier (employee, employee/spouse, employees/child, employee/children, family) or 4 tier structure (employee, employee/spouse, employee/child(ren), family)?

Answer: The City is requesting a 5 tier quote for rates. Refer to C.4. in Section 3.4 PRICE QUOTATION of the RFP.

All other requirements, terms and conditions of the ITB/RFP remain unchanged.

Addendum page must be signed and returned with your bid/proposal to acknowledge receipt of this addendum.

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Authorized Signature

By: Shane B. Smith  
Procurement Manager