



January 27, 2010  
Addendum #1

TO: ALL POTENTIAL OFFERORS

RE: **RFP #028-0-2010 – HEALTH INSURANCE BENEFITS FOR NHREC EMPLOYEES**

1. The above referenced RFP is hereby amended and clarified as follows:

- a. **Question:** On groups this size, we generally do not complete these types of extensive proposals due to the allocation of resources we have available. Would it be acceptable to provide our normal proposal along with the provider disruption reports, geo access reports, and as many of the other exhibits as we can fill out? We can include a “frequently asked questions” document that includes many of the answers to the questions in the questionnaire.  
**Response:** The solicitation dictates the type of information that should be provided with your proposal for evaluation and the format the proposal should take. Deficiencies in providing the information requested will be evaluated, accordingly.
- b. **Question:** In the RFP you included claims through June 09. Is it possible to get more recent claims experience? Perhaps an additional quarter?  
**Response:** Attached to this addendum is the updated experience for incurred claims through September 2009, paid through December 2009.
- c. **Question:** The RFP did not include any type of large claim report. Is it possible to get a large claim report that matches the claims review period provided?  
**Response:** This information is included in the attached updated claim experience for incurred claims through September 2009, paid through December 2009.
- d. **Question:** The Current dental rates are 5-tier, but the RFP request to quote 4-tier and the exhibit we need to complete shows only 4-tier?  
**Response:** NHREC wishes to have all employee benefit programs under a 4 tier rating structure, as presented in the RFP.
- e. **Question:** Question #50 under “Funding and Plan Design Alternative” asks for two alternative plan designs. Is this applicable to the dental or only the medical? If applicable to the dental: 1) Funding arrangement: Show both Fully Insured and Self Funded quotes; 2) Cost Containment: Increase deductible or decrease coinsurance as options  
**Response:** Yes, this is also applicable to the dental and vision plans. The offeror should show each funding and plan design alternative it proposes. It is the responsibility of the offeror to propose the best alternatives, to include cost containment measures, it can offer NHREC under this program.
- f. **Attachment G** has been posted in.xls format.
- g. Proposals should be submitted in the following formats with one (1) original and six copies. Each element in the table should be in each copy of the proposals:

<b>Proposal Checklist</b>	<b>Format</b>
The cover page of this Request for Proposal	Hard copy
Table of Contents for your proposal response	Hard copy
Executive Summary	Hard copy
A detailed outline of the offeror's ability to meet the Scope of Services as outlined.	Hard copy
A detailed outline and description of each plan offered, including a list of all limitations and exclusions. Deviations from the current health care program must be outlined in detail ( <b>Attachment D</b> ).	Hard copy & CD/Jump Drive
A narrative summary of all deviations from the RFP specifications	Hard copy
Price Proposal Exhibits for each funding arrangement requested. The detailed explanation and description of price quotation deviations should be submitted on the Deviations Exhibit ( <b>Attachment F</b> ).	CD/Jump Drive
Renewal Methodology Worksheet ( <b>Attachment H</b> )	CD/Jump Drive
The completed Quality of Services Supplement ( <b>Attachment E</b> )	CD/Jump Drive
The completed Provider Checklist ( <b>Attachment G</b> )	CD/Jump Drive
The completed Prescription Drug Checklist ( <b>Attachment G</b> )	CD/Jump Drive
The completed Performance Guarantees Exhibit ( <b>Attachment I</b> )	CD/Jump Drive
Original signature of an agent authorized to bind the company	Hard copy
Requested contact information	Hard copy
Company FEI/TIN number	Hard copy
Acknowledgment of any addenda on page one (1)	Hard copy
Completed and signed anticollusion/nondiscrimination clauses on page 2;	Hard copy
Copies of all documents requested in this RFP as well as samples of claim forms, additional reports, booklets, communication materials, etc. that may assist in the evaluation of the proposal.	CD/Jump Drive
Annual Reports and financial statements	Hard copy

e. The items to be provided in hard copy shall be organized in the following tabs:

Tab I	Executive Summary and requested contact information
Tab II	Table of Content, Cover page or RFP, Completed and signed anticollusion/nondiscrimination clauses
Tab III	A detailed outline of the offeror's ability to meet the Scope of Services as outlined.
Tab IV	A detailed outline and description of each plan offered, including a list of all limitations and exclusions. Deviations from the current health care program must be outlined in detail ( <b>Attachment D</b> ).
Tab V	Annual reports and financial statements.
Tab VI	A cover that includes a CD/Jump Drive with files on it that include: a detailed outline and description of each plan offered, including a list of all limitations and exclusions; Attachments D, F, H, E, G, I; and all documents requested in this RFP as well as samples of claim forms, additional reports, booklets, communication materials, etc. that may assist in the evaluation of the proposal.
Tab VII	Proprietary Information (in a separate sealed envelope)

All electronic files must be in a format compatible with Microsoft Office suite or Adobe Acrobat. Offeror is responsible for ensuring the electronic files are readable and compatible with the aforementioned software packages when proposals are submitted. Only proposal information that is

RFP #028-0-2010/AB

readable and submitted by the closing date and time will be considered timely. Proposals may not be submitted via email or fax.

2. As a result of this addendum, the closing date is extended to **February 10, 2010 at 2:00 P.M.**
3. All other provisions of the RFP shall remain unchanged. This provision shall become part of the RFP package, and Offeror shall acknowledge receipt of the Addendum by signing in the space provided below and returning it with the Proposal.

Signature: \_\_\_\_\_  
(Offeror)

Sincerely,

Angela Bright, C.P.P.B  
Purchasing Coordinator