

Administration of Tax-Advantaged Accounts (Flexible Spending Arrangements, Dependent Care Assistance Program Accounts, Health Benefit Accounts and Health Savings Accounts)

RFP No. 2020HCA2

Amendment No. 2

Date Issued: 10/8/2020

To: RFP Bidders

From: Julia Jacobs, RFP Coordinator

Purpose: Answer all questions received.

This amendment hereby modifies and is attached to RFP No. 2020HCA2. All other terms, conditions, and specifications remain unchanged.

Please note some questions submitted could not be answered at this time but Bidders are welcome to clarify their question and resubmit for the *Second Round of Bidder Questions* due October 14, 2020 at 2 p.m. PT.

RFP - 2020HCA2 - Administration of Tax-Advantaged Accounts

#	RFP Section	Subcategory	Bidder Questions	HCA Answers
1	N/A	Account Details	What is the structure of the account management team provided by the incumbents today?	The Administrator provides a full-time Account Manager who is accessible to HCA during business hours, supported by a second Account Manager as back-up to ensure consistent, ongoing coverage. Other Administrator personnel provide additional support (technical, legal, etc.) on an ad hoc basis.
2	N/A	Account Details	What is the structure of the customer service team provided by the incumbents today?	Refer to response to question 1.
3	N/A	Account Details	What is your assets under management?	As these accounts are individual employee accounts, they are not subject to investment management.
4	N/A	Account Funds	Describe the Billing & funding Process and Scope including: Claims Funding – EE and Err contributions – FSA, DCA, other– from each employer bank or HCA only Will billing and Funding all be Electronic and ACH? How many Banks and sources for Billings and Funding?	<p>Claims funding will be from HCA only. For funding claims costs, HCA is envisioning a prefunding arrangement, to include a weekly report from the Administrator of claims processed by the Administrator which would result in HCA replenishing the prefunded amount each week.</p> <p>Administrator will be expected to register as a Statewide Vendor with the State of Washington to receive payments from HCA – Administrator can register to receive ACH or check payments during that registration.</p> <p>Just one Washington state bank account will make payments to the Administrator, but each program (SEBB, PEBB, and COFA Islander Health Care) will need detail provided/billed separately. Administrative fees for the COFA program are prepared by a different accounting area than SEBB and PEBB administrative fees.</p>
5	N/A	Account Funds	Confirm that funding will be EDI – via ACH bank pulls	Refer to response to question 4.
6	N/A	Account Funds	Will each entity submit contributions to the administrator or will HCA collect the contributions and send it directly to the administrator?	HCA will collect the contributions throughout the year. For funding claims costs, HCA is envisioning a prefunding arrangement, to include a weekly report from the Administrator of claims processed by the Administrator which would result in HCA replenishing the prefunded amount each week.
7	N/A	Account Funds	What was the forfeiture information such as; a) The total number of participants who forfeited money in the last plan year for health care FSAs? b) The total amount of forfeited money for the last plan year for health care FSAs? c) The total number of participants who forfeited money in the last plan year for Dependent Care FSAs? d) The total amount of forfeited money for the last plan year for dependent care FSAs?	<p>Total unspent 2019 funds: FSA = \$818,000.00 DCAP = \$197,000.00</p> <p>Number of accounts with funds unspent (as of July 15, 2020): FSA = 2,400 DCAP = 290</p>
8	N/A	Account Funds	Do employees receive employer contributions? If yes, is the funding monthly or quarterly?	The Collective Bargaining Agreement FSA benefit is comprised of an annual \$250 Medical FSA contribution by the State of Washington for eligible, represented employees under a certain salary threshold. Otherwise, employers do not contribute to FSAs or dependent care FSAs.
9	N/A	Account Funds	Is billing handled as one entity or are there multiple billing arrangements? How many?	There are three (3) billing arrangements, one for each program (SEBB, PEBB, and COFA Islander Health Care), which will need detail provided/billed separately.
10	N/A	Account Funds	What is the claims funding arrangement and frequency of funding between the State and the vendor?	Refer to response to question 4.
11	N/A	Account Funds	Will the vendor have ACH access to a State bank account for claims? If not, will prefunding be provided?	No, vendor will not have ACH access. HCA is open to discussing a prefunding option.
12	N/A	Account Funds	Frequency of claims Processed funding for FSA, DCAP (ER and EE)	Refer to response to question 4.
13	N/A	Account Funds	Is claim settlement handled under one funding arrangement for all HCA employees, or if more than one arrangement, how many?	Refer to response to question 9.

14	N/A	Account Funds	Please outline the current funding process for payment of Flexible Spending Arrangement (FSA) claims.	HCA is aiming to change our current funding arrangement. Refer to response to question 4.
15	N/A	Account Funds	How are claims funded and on what frequency?	Refer to response to question 4.
16	N/A	Account Funds	Do PEBB, SEBB and COFA each provide separate claim funding?	Refer to response to question 9.
17	Draft Contract	Administrator	Will the State provide the current performance guarantees established with current TPA?	Performance Guarantees contained in the <i>Draft Contract</i> are the minimum but subject to negotiation.
18	N/A	Administrator	Are there any specific areas of concerns with your current administrator that you would like for us to address within our responses? Areas of improvement or changes needed?	Refer to section 1.5, <i>Objectives</i> , of the RFP. This procurement is due to an expiring contract.
19	Draft Contract	Administrator	Has the current TPA paid penalties for failing to meet performance guarantees? If so, which?	Refer to response to question 18.
20	N/A	Administrator	Who is the current administrator or provider for these account services today?	Navia Benefit Solutions is the current administrator for FSA, DCAP and HBA. HSA services are subcontracted through insurance carriers.
21	N/A	Administrator	What is the total contract length with the current Administrator?	The current contract began in 2014 and will end December 31, 2021.
22	N/A	Administrator	Why is the HCA going out to bid for member spending accounts?	This procurement is due to an expiring contract.
23	Section	Administrator	What is the primary reason for going out to evaluation on these services?	Refer to response to question 22.
24	N/A	Administrator	Why has the State decided to bid these services at this time (fees, service issues, standard due diligence, etc.)?	Refer to response to question 22.
25	N/A	Administrator	Are you looking for one administrator for all services or would you possibly choose different administrators for each service?	Per section 1.3, <i>Purpose and Objectives</i> , of the RFP, it is possible to have different administrators for different account types.
26	N/A	Background	Can the State provide the trend for growth in the last 5 years for the tax advantaged benefit accounts?	Since 2014, annual participation has increased 6.3%. 2020 showed an approximate 260% growth due to the implementation of SEBB and the CBA \$250 benefit.
27	N/A	Background	Approximately what percentage of your employee base has access to email?	Although all employees may have email access, not all share email information with HCA, therefore HCA cannot give a percentage.
28	Section 1.4	Background	Are PEBB and SEBB separate Plans? Or one Plan – 2 “divisions”?	See section 1.4, <i>Background</i> , of the RFP for the distinction between PEBB and SEBB.
29	Section 1.4	Background	Is there any administration required for retirees here?	See section 1.4, <i>Background</i> , subsection, <i>PEBB Program Population</i> , stating: approximately 130,000 members in the PEBB program are retirees or employees of political subdivisions who, generally, would only have access to HSA benefits included in this Proposal.
30	Section 1.4	CBA FSA	Please include the following information regarding Collective Bargaining Agreement (CBA FSA) Are these employees only under PEBB? Is the FSA negotiated agreement – the same for all CBA employees? Will Eligibility for this benefit be handled by HCA and sent prior to Plan Year effective Date? New hires enrollment? Terminated – Will funds not used be unavailable to employee Will funding be set up in a separate HCA account for ACH processing by ASB?	Participants in the CBA FSA are PEBB employees only. The agreement is the same for all CBA employees. Eligibility will be determined by HCA before the Plan Year and sent to the Administrator. FSA rules apply for terminated employees; the FSA is in existence through the grace period which runs to March 15 of the following year. Terminated employee can claim against only services completed prior to termination. The funding is not separate therefore is not a separate HCA account.
31	Exhibit C, Written Response	Claims	In Written Response, under Online Security - "Provide personal and family Claims history that complies with HIPAA privacy requirements (e.g., some family members may need to be masked on diagnosis or age-related Claims, accumulated status, deductible status, and expenses maximum status)" These questions seem to apply more for health insurance than for FSAs. Please elaborate.	Yes, this question would apply to HSAs, not FSAs.
32	N/A	Claims	Describe your current funding arrangement for claims settlement? Are there any restrictions on providing an initial impress balance?	HCA is looking to change the current funding arrangement. For funding claims costs, HCA is envisioning a prefunding arrangement, to include a weekly report from the Administrator of claims processed by the Administrator which would result in HCA replenishing the prefunded amount each week. HCA is open to discussing an initial impress balance.
33	N/A	Claims	Which HCA external vendors are required recipients of claims data and with what frequency/for what purpose would the data be sent?	There are no required recipients for Claims data.

34	N/A	Claims	Please explain what kind of additional eligible expenses would be included on an optional claim form.	Expenses that the employer could determine can be paid for via an FSA account. For example, travel to and from a provider's office.
35	N/A	Claims	Does the current TPA provide claims integration with the FSA plan?	HCA is unclear what the Bidder is asking. Bidder is welcome to clarify the question and resubmit for the <i>Second Round of Bidder Questions</i> due October 14, 2020 at 2 p.m. PT.
36	N/A	Claims	Does the current service provider provide claims integration with all the tax advantaged benefit accounts?	Refer to response to question 35.
37	N/A	Claims	Will the incumbent TPA handle the claims run-out administration for the final plan year of the contract?	Yes, the incumbent will handle the claims run-out administration.
38	N/A	Claims	What is the current administrator's claims processing turnaround time?	Claims processing and adjudication occurs within 10 days.
39	N/A	Claims	Will ASB be able to receive regular Payroll files – to link up deductions against Claims requests?	Yes, part of the information flow currently includes Administrator receiving payroll files for the PEBB and SEBB participants. COFA Islander Health Care is HCA funded only so there are no associated payroll files for that population.
40	Section 1.6	Claims	In SOW, under Account Administration - "Administrator should verify reimbursement Claims within thirty (30) days of receipt." What is meant by "verify?"	For this question, "verify" means the Administrator must determine if Claims can be paid and pay them.
41	N/A	COBRA	Does HCA expect the Administrator to administer COBRA for the health care FSAs and COFA? If so, what is the average number of qualifying event notifications sent each month?	There is no COBRA coverage available for the COFA population, as they do not participate in our medical coverage or supplemental benefits (like FSA). COBRA is not currently administered by the FSA contractor.
42	Exhibit C, Written Response	COBRA	Communication & Appeals Exhibit C # 5 E. COBRA "information" is listed. Please expand on this. Will ASB be sent COBRA eligible participants data, as part of the Eligibility/enrollment files from HCA? What entity or who is administrating COBRA?	Any and all information related to Participant enrollment or eligibility will be provided as part of enrollment file which is administered by HCA.
43	N/A	COBRA	What sort of COBRA communication is required under this RFP?	HCA sends the original COBRA notice, but the Administrator sends the Participant a COBRA booklet explaining the COBRA benefit.
44	Exhibit C, Written	Communication	Please provide additional descriptions for each of the items listed in Written Response, 3(E)	HCA is seeking the Bidders' formats for these documents.
45	N/A	Communication	What does the process look like today when an employee has a benefit-related question? Is there a primary concierge or call number?	All Participants have access to the Administrator's online portal and can call the Administrator directly about their account. As plan sponsor, HCA also encourages Participants to work through their payroll/benefits administrator to get their questions answered, who contact the Administrator, the benefit Account Manager at HCA, or other appropriate HCA personnel.
46	N/A	Communication	Do you currently work with an outside communications firm?	No, HCA does not currently work with an outside communications firm.
47	N/A	Communication	How many enrollment welcome packets were mailed to account holders in 2019? How many enrollment welcome packets have been mailed 2020 YTD?	All Participants enrolling in a tax-advantaged account for the first time receive a physical enrollment packet with a debit card; those who are returning do not receive a new debit card unless a replacement is requested. HCA does not know how many individual packets were mailed in 2020; however, with the addition of SEBB and the CBA benefit recipients for the 2020 plan year, the Administrator likely mailed between 20,000 and 30,000 in the 2020 plan year.
48	N/A	Communication	Is the expectation for enrollment packets to be mailed with hard copies, or is there an option for electronic welcome packets to be mailed?	Since HCA does not have access to all the PEBB and SEBB members' email addresses (this is voluntary), HCA cannot send electronic welcome packets. At the very least, the new Administrator would be expected to mail a letter to new Participants, letting them know where they could find information online or how to request it in print form. If, however, Participant has an email address and they request an electronic enrollment package, then no paper form is required.
49	N/A	Communication	Is the customer service requirements requesting separate and distinct staff for each account? For example, an FSA staff person could not respond to a DCAP question? Can you elaborate on this statement to describe expectations in detail?	No, there is no requirement customer service staff will be separate and distinct staff for each account type. The only requirement is that customer service staff must be trained to answer questions for each specific type of account, but could be same staff.
50	N/A	Communication	What is the "disenrollment letter" and can you provide a sample?	The disenrollment letter is sent to Participants who sign-up for a high deductible health plan AND enroll in an FSA for the same plan year. This letter informs the Participant of the rules and that they are being disenrolled from the FSA. No sample letter is available.

51	N/A	Communication	Customer service phone center: Please describe in detail the expectation for this. How is this handled now?	The Administrator maintains a Participant contact number, along with a customer service email address and a specific email address for questions regarding claim submissions. The center is open Monday through Friday, 5 AM to 5 PM and closed on holidays. Telephone response time is should be 30 seconds or less for 99% of calls; Administrator is expected to resolve the issue.
52	N/A	Communication	Please provide examples of an “account holder issue.”	Typical questions from account holders can include to following: "Why was my claim denied?"; "How do I deal with my FSA if I'm on furlough?"; "I should have received the \$250 through the CBA but I didn't."-- essentially the Administrator must be able to handle any question or issue stemming from holding a tax-advantaged account.
53	N/A	Communication	For Complaints and Appeals if additional material is requested by HCA, will HCA pay the additional postage costs? Will HCA accept an alternative method of delivery, such as email	No additional postage costs will be provided for Complaints and Appeals materials, however, additional materials can be submitted online or via email.
54	N/A	Communication	Are any communication/marketing materials being mailed directly to participant homes? If so, what is the quantity? Is this collateral being mailed to all eligible employees or current participants?	HCA does not generally allow external vendor mailings to our entire client base, i.e. all employees. Physical welcome packets to new tax-advantaged account enrollees are mailed to enrollee homes--which could easily total many thousands in any given year.
55	N/A	Communication	Is there any requirement for marketing material to be mailed? What was the quantity and number of locations for the most recent plan year? Can material be emailed or otherwise posted on the website?	HCA communicates with members through HCA-sponsored materials which are mailed throughout the year, and especially around annual open enrollment every fall. We also use the Administrator's access to Participant email (known through online enrollment process), and informational banners on the Administrator's website and portal.
56	N/A	Communication	Are all benefit account participants served from one call center today?	Pertaining to FSA and DCAP participants, to our knowledge yes.
57	N/A	Communication	Can Enrollment fulfillment/ welcome packets be sent electronically if we have emails? Collection of emails and cell phone number is part of our enrollment data we like to collect.	The HCA is open to most forms of secure and efficient communication with our members.
58	N/A	Communication	Send Copies of current enrollment, communication packets/materials	To access enrollment guides for FSA and DCAP, please refer to the HCA benefits site at pebb.naviabenefits.com/forms-documents/
59	N/A	Communication	Toward ensuring that Bidder “...provide[s] support for culturally and linguistically diverse communities...”, would HCA please identify the languages the ASB should anticipate accommodating, effective January 1, 2022?	For PEBB, please refer to the HCA Language Access website at www.hca.wa.gov/about-hca/language-access#pebb-coverage For SEBB please refer to the HCA Language Access website at www.hca.wa.gov/about-hca/language-access#sebb-coverage
60	N/A	Communication	What interaction will our firm have with the 522 agencies? How frequently?	The Administrator fields questions from payroll/benefits administrators at agencies and school districts as needed, pertaining to payroll deduction files and other issues. This interaction is ongoing.
61	N/A	Communication	How will plan documents be handled?	Administrator will draft plan documents, send them to HCA for review and approval, and then they are posted to the vendor website.
62	N/A	Communication	May we have a copy of the most recent Open Enrollment or Benefits Guide for purposes of understanding the messaging and options related to the overall benefits package?	PEBB Open Enrollment and Benefits Guide materials can be found at the PEBB website: www.hca.wa.gov/employee-retiree-benefits SEBB Open Enrollment and Benefits Guide materials can be found at the SEBB website: www.hca.wa.gov/about-hca/school-employees-benefits-board-sebb-program
63	Section 1.6	Communication	Does HCA expect the Administrator to distribute hard copies of all required communications to every eligible employee? Would HCA accept an alternative method of delivery, such as email and/or online?	No, HCA expects an opt-in system for the employee to accept email communications. The Administrator would need to ensure that these communications are either secure or link to an online portal that could house secure communications.
64	Section 1.6	Communication	Describe the current methods in place to “support culturally and linguistically diverse communities.”	Translation services are available upon request; Language access notices are available in print and online; web documents are accessible for screen readers.
65	Draft Contract	Contracting	What contracting requirements will there be – by employer group, such as BAAs, or will this be handled by HCA	There are no individual contracting requirements; HCA acts as the clearinghouse for participating entities.

66	Draft Contract	Contracting	Would HCA clarify the exact requirements for its subcontractor flow-down documentation?	HCA holds the primary contractor fully responsible for all contractual obligations. All standard subcontractor requirements are outlined in the <i>Draft Contract</i> . Bidder may elect to submit Contract exceptions with their response as outlined in RFP section 2.11, <i>Contract and General Terms & Conditions</i> .
67	Draft Contract	Contracting	Would HCA consider a general pass through to avoid undue responsibilities on subcontractors?	HCA is unclear what the Bidder is asking and is unable to provide a response at this time. Bidder is welcome to clarify the question and resubmit for the <i>Second Round of Bidder Questions</i> due October 14, 2020 at 2 p.m. PT.
68	Draft Contract	Contracting	There is language in the RFP about how HCA can terminate the contract. Is there similar language on how the administrator could terminate in certain circumstances?	To be discussed as part of contract negotiations, Bidder may elect to submit Contract exceptions with their response as outlined in RFP section 2.11, <i>Contract and General Terms & Conditions</i> .
69	Draft Contract	Contracting	Does the bidder have the ability to edit or propose alternate Performance Guarantees?	The Bidder can provide such language for HCA's consideration. Bidder may elect to submit Contract exceptions with their response as outlined in RFP section 2.11, <i>Contract and General Terms & Conditions</i> .
70	Draft Contract, Performan	Contracting	How will HCA measure success with a new partner?	See Exhibit F, <i>Draft Contract</i> , section 4, <i>Performance Guarantees</i> , for measures of success.
71	N/A	Contracting	Are there any restrictions on providing any portions of the administration services by global employees/sub-contractors?	Yes, we cannot share HCA data outside of the United States.
72	Section 1.1	Cost Proposal	Can you clarify your definition of "blended rates" as this is a term with a variety of definition?	For the purposes of the Cost Proposal file, the blended rate represents the weighted average rate (PPPM) that is derived by using the PPPM rates by account type, and the most up-to-date participant count.
73	Section 1.1	Cost Proposal	Qualified Medical Expense: the definition states that non-prescription medicines aren't considered qualified medical expenses. Will the HCA be changing this definition given the recent change in Federal law?	HCA maintains compliance with federal law while extending the greatest flexibility and applicability of the tax-advantaged accounts offered to members. Regarding OTC items, the HCA has already extended greater flexibility for members in this regard.
74	Exhibit C, Written Response	Enrollment	In Written Response, under Implementation and Emergency Response Management - "Describe the timeframe needed to build the eligibility structure and complete eligibility file testing." Please explain what is meant by "eligibility structure" in this question.	The eligibility structure is the technological structure needed by Bidder to accept the HCA enrollment files.
75	N/A	Enrollment	Will the State provide an electronic open enrollment and ongoing file for new hires, terminations and changes? If so, will the State conform to the vendor file specs?	HCA sends open enrollment files to the vendor. Refer to response to question 77 for details on enrollment changes. HCA can adjust the layout as long as we have the data and a format we can produce.
76	N/A	Enrollment	Is it the expectation of the HCA that the selected vendor will own the responsibility of enrolling participants in the applicable accounts?	Yes, the Administrator is expected to have responsibility for enrolling Participants.
77	Section 1.6	Enrollment	Under what circumstances would a paper enrollment or a phone-in enrollment occur and how is eligibility for coverage confirmed? Also, what products would this type of enrollment come into play?	Speaking with regard to FSA and DCAP, phone enrollments are not done by HCA. Most enrollments occur during annual open enrollment every fall, when members wishing to participate enroll online through the Administrator's enrollment portal; some agencies still take and submit paper enrollments as well. The Administrator knows who is eligible to participate after receiving a census file just prior to Open Enrollment, and therefore recognize participating members when they come to the enrollment portal. During the plan year (i.e. NOT annual open enrollment), enrollments are completed with paper forms since the Administrator may not be able to identify new employees. Benefits and Payroll administrators log the payroll deduction and send paper enrollments to the Administrator throughout the year.
78	N/A	Enrollment	How does enrollment work today with your current vendor?	Refer to response to question 77.
79	N/A	Enrollment	What options do members have to enroll with the vendor (e.g., online, phone app, paper, telephone, other)?	Most Participants enroll through the Administrator's online enrollment portal. Paper forms are also used, especially for ongoing enrollments throughout the plan year. HCA does not do phone enrollments.
80	N/A	Enrollment	What's the breakdown of member enrollment in the available enrollment options (percentage and/or numbers)?	PEBB: FSA 12,834, DCAP 1,257, Both 1,539. SEBB: FSA 10,127, DCAP 733, Both 802. CBA: Additional FSA accounts who did not open their own account: 17,357
81	N/A	Enrollment	How does enrollment work for the HSA today?	Currently HSA enrollment is via the medical plans and is not directly managed by HCA.

82	N/A	Enrollment	Will the employees enroll on MySEBB or will they use the administrators website to set up flex or HSAs? What kind of access will be permitted to the groups?	Ideally there would be a direct link from PEBB My Account and SEBB My Account to the Administrator's portal but that is not the current process.
83	N/A	Enrollment	Will ASB be able to get total eligibility sent via electronic transfer to load ASB system? What is the file format currently?	HCA does not currently send full eligibility files but can produce one if needed. Since HCA does not currently send these files, the file format does not exist.
84	N/A	Enrollment	Does the State desire or expect onsite FSA enrollment meetings? If yes, approximately how many and how many locations?	The expectation is that the new Administrator will desire to market tax-advantaged accounts to our memberships, and annual benefits fairs are an excellent place to do so. HCA sponsors about two dozen benefits fairs every fall. This year, all open enrollment "fairs" are virtual due to the pandemic. The specific expectation as to how many fairs the Administrator should attend will be negotiated.
85	N/A	Enrollment	On average how many health fairs will require an on-site representative?	This year our benefit fair strategy is entirely virtual. On average annually HCA holds 15 in-person fairs for PEBB and 15 in-person fairs for SEBB. In-person fairs include up to two dozen sites over the course of about 5-6 weeks, and Administrators are expected to be present to serve our members and increase Participants.
86	N/A	Enrollment	Is there an expectation that Customer Service Support be available during Annual Enrollment in 2021, or begin to take calls on 1/1/2022?	Customer Service call center should be in operation by fall 2021 in order to meet the needs of Open Enrollment.
87	N/A	Enrollment	How is the HCA handling your annual benefits enrollment in 2020 (e.g., all virtual, fairs, vendor webinars)?	In 2020, due to COVID-19, all activities are virtual.
88	N/A	Enrollment	Does HCA facilitate their own online enrollment during open enrollment; or is HCA looking for the administrator to handle this?	HCA has its own enrollment systems for PEBB, SEBB and COFA Islander Health Care and is not considering vendor solution at this time.
89	N/A	Enrollment	Can the State provide detailed information regarding any service provider expectations involved with annual open enrollment meetings, including the format the State might utilize as part of this process? How many days and locations will the new service provider be expected to attend?	HCA facilitates both virtual and in-person open enrollment benefits fairs; this year, our efforts are completely virtual. HCA expects all our vendors/carriers to be engaged in this effort to increase enrollment and participation. Carriers also conduct live informational webinars for interested members, which are recorded and posted to the virtual fairs and linked for wide access.
90	N/A	Enrollment	Does HCA facilitate mid-year enrollments online?	Currently, mid-year enrollments--stemming from new hires and qualifying events which lead to a special open enrollment--are handled by paper enrollment forms which go to the employer's payroll department and then forwarded to the Administrator.
91	Section	Enrollment	When is open enrollment?	See section 1.3, <i>Scope of Work</i> , for Open Enrollment date information.
92	Section	Enrollment	Please confirm that all enrollment information will be provide by HCA via an electronic file?	Yes, all enrollment information will be provided by HCA via an electronic file.
93	Section	Enrollment	How many enrollment files will the administrator receive and what is the frequency?	PEBB enrollment files: HCA receives a weekly file of enrollees from the vendor; annual file subscribers with a FSA balance; annual file of subscribers that have FSA and HSA. HCA sends a weekly file of enrollment changes; annual dual enrollees. SEBB enrollment files: HCA receives a weekly file of enrollees from the vendor; a monthly premium file; annual file subscribers with a FSA balance; annual file of subscribers that have FSA and HSA. HCA sends a weekly file of enrollment changes; monthly deduction files; annual dual enrollees.
94	N/A	Reporting	Detail the Weekly reconciliation of full eligibility. Will ASB receive HCA file to bounce against ASB file?	Refer to response to question 93.
95	N/A	Reporting	How many file feed sources will ASB receive? How often – for each one?	Refer to response to question 93.
96	N/A	FSA	Outside of the amount, does your employer contribution strategy change from year to year for the FSA and/or HSA? If yes, how would it change?	There is no overall strategy at this time but this can change due to legislation. Currently no changes are expected.
97	Section	FSA	Is there a Limited Purpose FSA available to employees? If not, is this something that is under consideration and would HCA like a quote?	A Limited Purpose FSA is not under consideration at this time.
98	Section	FSA	Are LPFSAs-limited-purpose health care FSAs offered? If so, how many participate in the LPFSA? If no, why are these accounts not offered?	Refer to response to question 97.

99	N/A	HBA	For HBAs, please clarify Eligible Expenses allowed Medical OOP for "Silver Plan SCHEDULE" Dental OOP? Is there a Dental Plan – or any Dental expense Premiums – Conflicting information – where one place says HBA can be used for Premiums and another says Premiums are not allowed Describe \$300 monthly Max and "advance authorization" for exceeding monthly Max amount Process	COFA Islander Health Care may include an additional dental plan (for which premiums can be paid) but this is currently under discussion. \$300 is the statutory maximum that can be in an account for a month; advance authorization requires permission from HCA and might include an extraordinary (but planned) medical expense.
100	Section 1.4	HBA	Does a COFA participant have a total of \$3,600 available during a year that can be used at any time? For example, could a participant be reimbursed for a \$3,600 medical expense that occurred in March or is the coverage limited to \$300 per month? If the coverage is monthly, please provide an example of a reimbursement request of more than \$300 that is submitted before the expense is incurred.	The COFA Participant is limited to \$300 per month for out-of-pocket expenses totaling no more than \$1,200 per year. However, these limits can be waived on a case-by-case basis. The Office of Medicaid Eligibility and Policy (OMEP) is responsible for this process. In general, HCA will add additional funds to the disbursement account throughout the year to maintain the funds used to pay for the COFA Participant's out-of-pocket expenses. Members occasionally receive bills for in-network services in excess of \$300. Rather than spread that charge out over multiple months, OMEP works with the Participant to identify the total funds needed to pay the bill and approves increases to the monthly limit on a case-by-case basis.
101	N/A	HBA	Regarding administration of the \$300 monthly HBA benefit, the RFP mentions that participants may request funds beyond the \$300 limit but must make this request in advance. Is there an overall cap on the amount that may be used from the account to pay for out-of-pocket expenses, such as \$3,600.00 per plan year?	Refer to response to question 98. The current annual cap is \$1200 per year; however, this can be increased after review by the Office of Medicaid Eligibility and Policy.
102	N/A	HBA	Can you provide a summary plan description or benefit overview for the HBA account?	For more information on the COFA Islander Health Care HBA, please refer to HCA website: https://www.hca.wa.gov/about-hca/apple-health-medicaid/cofa-islander-health-care
103	N/A	HBA	Can you provide plan documentation or an SPD with more information on the HBA?	For more information on the COFA Islander Health Care HBA, please refer to HCA website: https://www.hca.wa.gov/about-hca/apple-health-medicaid/cofa-islander-health-care
104	Section 1.4	HBA	Clarification on if HBA is another name for HRA. If not, how do they differ?	Yes, there is a difference between an HRA and an HBA. An HRA usually requires the Participant to pay out-of-pocket expenses upfront which are then reimbursed back to the Participant; for HBA, funds are provided to an account that is drawn from for out-of-pocket expenses preemptively to prevent Participant from waiting for a reimbursement of funds.
105	Section 1.4	HBA	Does "Health Benefit" have the meaning of "COFA Island Health Care" or could it include all HRA plans offered by other employers?	This term is specific to COFA Islander Health Care given the distinction from an HRA, refer to the response to question 104.
106	Section 1.4	HBA	Under the HBA account, is the monthly allocation of \$300 adjusted based on the member's account balance? Meaning if the member only spends \$150.00 in the month of January, do they only get \$150 for the month of February?	Yes, the Participant's disbursement account is brought up to \$300 each month. If the Participant did not use their account in month one (1), the \$300 rolls to the next month. If the Participant spends \$150 in month one (1), the account is brought up to \$300 for the next month. Again, the \$300 per month limit can be waived on a case-by-case basis, and the funds used to bring a Participant's balance back up to \$300 comes from the HCA-funded disbursement account. The expectation is that each Participant begins the month with \$300 for each administered benefit (health and dental).
107	Section 1.4	HBA	What is the process if the member runs out of funds in the HBA account and needs to request additional funds in advance of the next month's allocation? Does the member still get the \$300 the following month?	The Participant's account is reviewed by the Office of Medicaid Eligibility and Policy and additional disbursements beyond the \$300 per month is approved by them and funded by the HCA-funded disbursement account. The Participant still gets \$300 the following month.
108	Section 1.6	HBA	Question 1.E under Section 1.6 <i>Scope of Work</i> requires that "the Administrator must have the ability to refund Health Benefit Accounts when Participant inadvertently uses funds to pay for ineligible health plan premiums." Would you please elaborate on the source of funds used to refund the Health Benefit Account in situations where there was a prohibited debit card payment? Is it the expectation of the HCA that the Administrator will work with the Participant to obtain a return of the premium payment in order to refund the Health Benefit Account?	HCA funds the disbursement account which is used for the COFA members' out-of-pocket expenses. If, for example, a COFA Participant inadvertently pays their premiums using their debit card, HCA's expectation is that the insurance carrier refund that payment to the original source of payment, i.e., the disbursement account. The Administrator is expected to credit that disbursement account to reflect the carrier's refund.

109	HBA	Who is the Plan Sponsor for COFA?	HCA is the Plans Sponsor but the COFA program is not affiliated with Public and School employee benefits; the COFA Islander Health Care is an additional element to this contract, utilizing th Administrator's debit card issuance capabilities.
110 N/A	HSA	Do you currently have an HSA program?	Yes. HCA has multiple high deductible plans with HSAs. Currently, HCA does not have a direct contract for HSA services, which are provided through our medical carriers who have subcontracts with Health Equity. For purposes of this RFP, the HCA is looking for relevant HSA information from bidders, which HCA may use to change how it provides HSA services to eligible members. Potentially, HSA services could be added to the new FSA/DCAP contract in the near future, if HCA decides to contract directly rather than working through the subcontracts of its medical carriers.
111 N/A	HSA	Are HSAs part of the overall financial wellness discussion or strategy with HCA employees?	Refer to response to question 110.
112 N/A	HSA	With regard to the HCA HSA program, is there an objective to have more employees participating in an HSA? Is there an interest in more employees contributing and investing?	Refer to response to question 110. Generally speaking, HCA maintains an interest in expanding member participation and personal investments in their own health care coverage.
113 N/A	HSA	Is there interest in having increased flexibility in HSA investment options?	Refer to response to question 110. Generally, additional flexibility in most of our medical and supplemental benefits is desired.
114 N/A	HSA	Is there interest in the HSA investment options mirroring those offered in the retirement investment line-up or HCA being able to customize a line up?	Refer to response to question 110.
115 N/A	HSA	Is there interest in having greater decision support, advocacy, guidance or other services around the CDHP and HSA that would further assist employees?	Refer to response to question 110. HCA would like more information about possibilities.
116 N/A	FSA	Does HCA offer a limited use FSA to participants enrolled in the HSA? If yes, please provide the number of limited use FSA participants.	No; at this time Participants can only have HSAs.
117 N/A	HSA	What is the average HSA goal amount (average HSA account balance) and the total amount of assets under the HSA plan?	Refer to response to question 110.
118 N/A	HSA	Can the current HSA account be used by all dependents of the employee, or is it limited in any way?	Refer to response to question 110.
119 N/A	HSA	What are the total HSA assets of all current account holders?	Refer to response to question 110. Annual average employee contribution was \$793.67 in 2019.
120 N/A	HSA	Can employees invest HSA funds? If so, what are their current investment options and what is the total amount of HSA assets invested?	Refer to response to question 110.
121 N/A	HSA	What is the total value of HSA assets in dollars?	Refer to response to question 110.
122 N/A	HSA	What is the average HSA account balance?	Refer to response to question 110. According to information from subcontractor, in 2019 the average was \$2,450.00
123 N/A	HSA	How much of the HSA total value is in cash vs investment balances?	Refer to response to question 110.
124 N/A	HSA	How many HSA account holders are investing?	Refer to response to question 110.
125 N/A	HSA	Is there a HSA cash threshold before investing is possible?	Refer to response to question 110.
126 N/A	HSA	Any employer contribution outside of the \$700.08 (Individual) and \$1,400.04 (Family)? What is the intended change in employer contributions for 2022?	Employees enrolled in a High Deductible Health Plan who participate in the Wellness program can earn a financial incentive of \$125 which is deposited into their HSA annually. Currently there are no plans for increasing the employer HSA contribution for plan year 2022.
127 N/A	HSA	How many employees invest HSA funds in mutual funds? What is the average investment account balance?	Refer to response to question 110.
128 N/A	HSA	What current dollar balance is held today in HSA accounts?	Refer to response to question 110.
129 N/A	HSA	What are the average balances for your HSA program?	Refer to response to question 110.
130 N/A	HSA	What are the contribution amounts made by the employees in the HSA program?	Refer to response to question 110. Average monthly contributions (2019) was \$196.60.
131 N/A	HSA	What percentage of HSA dollars are invested?	Refer to response to question 110.
132 N/A	HSA	How many HSA investors versus non-investors?	Refer to response to question 110. In 2019, 26.12% members invested.
133 N/A	HSA	Do you have an HSA investment committee or appointed an investment advisory firm for investment related services? If so, what is the name of the firm or entity? Can the State	Refer to response to question 110.

134	N/A	HSA	How many participants in the HSA program do not contribute to their plans?	Refer to response to question 110.
135	N/A	HSA	Is there a current investment threshold for the HSA accounts?	Refer to response to question 110.
136	N/A	HSA	Who is the Plan Sponsor for HSA?	HCA is the Plan Sponsor.
137	N/A	HSA	1.For the HSA can you please disclose: a.Total Number of Assets Under Management	Refer to responses to question 110.
138	N/A	HSA	Who administers the HSA today?	Refer to response to question 110. Health Equity is a subcontractor to PEBB and SEBB medical plans.
139	N/A	HSA	What bank or financial institution is the current custodian of HSA funds?	Refer to response to question 110.
140	N/A	HSA	What is the number of HSA accounts without employee contribution election amounts? Also, only with the employer seed?	Refer to response to question 110.
141	Section 1.6	HSA	What is the considered Scope of Work for HSA?	See section 1.6, <i>Scope of Work</i> of the RFP.
142	Draft Contract	Insurance	Industrial Insurance Coverage - Does HCA consider this level of coverage a mandatory requirement?	Industrial Insurance Coverage is mandatory to administer the services requested in this RFP, but HCA can consider other forms of insurance coverage to meet this requirement. Specific information would need to be provided for HCA review and approval. Please refer to RFP section 2.11, <i>Contract and General Terms & Conditions</i> , for direction on submitting proposed Contract exceptions.
143	Draft Contract	Insurance	Would HCA accept Employer Liability / Workers Compensation lines of coverage in the amount of \$1M per each incident?	Employer Liability and Workers Compensation (referred to as Industrial Insurance Coverage in Washington State) are two different forms of insurance coverage. For this reason, HCA is unclear what the Bidder is asking and is unable to provide a response at this time. Bidder is welcome to clarify the question and resubmit for the <i>Second Round of Bidder Questions</i> due October 14, 2020 at 2 p.m. PT.
144	N/A	IT Management	Does the State have new technological objectives for administration of these services?	No, HCA does not have new technological objectives for administration of these services.
145	N/A	IT Management	Would it be possible for us to get a copy of the "OCIO IT Security Policy and Standard" document?	The OCIO IT Technology Standards document is included in the RFP as Exhibit G
146	N/A	IT Management	Does the state provide templates for the IT Risk Assessment (Section 1.2), IT Security Assessment (Section 1.3), the IT Security Checklist agency level documents, if so can copies be provided?	Please consult the OCIO website found at this address: www.ocio.wa.gov
147	N/A	Objectives	Do you anticipate any plan design changes in the next three years?	Our FSA currently operates with a grace period; a discussion may ensue regarding a switch to a carry over option instead.
148	N/A	Objectives	What amenities or service features do you like the most about the current administrator?	Ease of online enrollment, rapid and effective customer service, available account management staff, professional online presence, and technical professionalism.
149	N/A	Objectives	What is the expectation / projections for increased participation?	See section 1.4, <i>Background</i> , for growth information.
150	N/A	Objectives	Are there particular features or processes the State is seeking in the chosen vendor?	See section 1.6, <i>Scope of Work</i> , of the RFP for desired features and processes.
151	N/A	Objectives	How important is it to for the State to have a solution that offers a single debit card for all the account with an online portal and mobile app that provides full account functionality for participants?	A single debit card that serves all of a Participant's accounts is becoming the industry standard. An effective online portal and multiple e-methods for claiming are very valuable to our members. The COFA Islander population has their own debit card, as this program does not access tax-advantaged accounts.
152	Cost Proposal	Participant Counts	Please verify the counts for the accounts: FSA = 43,000 Collective Bargaining Agreement FSA = 18,654 DCAP = 4,200 HBA = 1,700 HSA = 3,000	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.
153	Cost Proposal	Participant Counts	Total PEBB Eligible in FSA and in DCAP Total SEBB Eligible in FSA and in DCAP Total COFA Eligible in HBA	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.
154	Cost Proposal	Participant Counts	How many active HSA accounts are on record?	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.

155	Cost Proposal	Participant Counts	Are the 18,654 CBA FSA participants included in the 43,000 FSA participant count or are they in addition to the 43,000 resulting in a total count of 61,654?	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.
156	Cost Proposal	Participant Counts	Please confirm the current number of HSAs. In one section you state 3,000 but in the cost proposal document it states 19,320.	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.
157	N/A	Participant Counts	How many HSA eligible employees do you have?	In 2019, according to data supplied by Health Equity, there were 14,800 unique Participants enrolled.
158	N/A	Participant Counts	Please confirm actual enrollment counts, there are different numbers quoted within the documents provided and the enrollment counts in the grids?	See Exhibit D, <i>Cost Proposal</i> , for most accurate Participant counts per account type.
159	N/A	Payroll	What is the technology or who is the vendor partner for Payroll?	Depends on the agency or entity involved, most use HRMS administered by the Office of Financial Management.
160	N/A	Payroll	What is the technology or who is the vendor partner for Benefits?	HCA uses various vendor partners to administer Benefits.
161	N/A	Payroll	With how many payroll centers will our firm interact?	For PEBB, the majority of payroll centers interface with HRMS but there are approximately 12 that have no interface with HCA. Higher education entities have their own system. For SEBB, HCA acts as the central hub of payroll information via SEBB My Account.
162	N/A	Payroll	Will ASB be working with Payroll files and data from Each employer group – or a single Payroll system that manages all Eligible employees and employer groups.	Refer to response to question 161.
163	N/A	Payroll	Payroll File Feeds, needed for DCAP processing and testing – from Each employer – or HCA?	Refer to response to question 161.
164	N/A	Payroll	How many payroll files will the administrator receive and what is the frequency?	Refer to response to question 161.
165	N/A	Payroll	Who is your benefit administration platform provider and payroll vendor? Does the State anticipate any changes to these platforms or replacement of current systems?	HCA uses various vendor partners to administer payroll and is not looking to replace these platforms at this time.
166	N/A	Payroll	Is there An HRIS administrative system in operation today – Who is the vendor?	HRMS is the vendor for HRIS administrative systems.
167	N/A	Payroll	Does the State work with a benefits consultant or broker? If so, who (name, company)?	No, HCA does not work with a benefits consultant or broker.
168	N/A	Plan Information	What are the medical plan options available to employees? What are the respective employee premiums, deductibles, etc.?	Please refer to the information provided at the link before for 2020 benefit comparisons: https://www.hca.wa.gov/employee-retiree-benefits 2021 benefit comparisons will soon be available on the same web address.
169	N/A	Plan Information	Any planned changes in the 2022 plan year for medical plan options? If so, what is under consideration?	At this point, there are no changes planned to the medical plans offered in 2022.
170	N/A	Plan Information	Send Copies of each Plan Document	PEBB Plan Document materials can be found at the PEBB website: www.hca.wa.gov/employee-retiree-benefits SEBB Plan Document materials can be found at the SEBB website: www.hca.wa.gov/about-hca/school-employees-benefits-board-sebb-program
171	N/A	Plan Information	Do you offer any additional benefits like tuition reimbursement, wellness accounts, or adoption assistance?	These benefits are not provided through these accounts.
172	N/A	Plan Information	Will there be a single plan document for all entities or will each entities have their own plan document?	This is up to Bidder preference as long as each account type needs are addressed.
173	N/A	Plan Information	Please provide associated carriers.	PEBB carrier information can be found at the PEBB website: https://www.hca.wa.gov/employee-retiree-benefits SEBB carrier information can be found at the SEBB website: https://www.hca.wa.gov/about-hca/school-employees-benefits-board-sebb-program
174	N/A	PPPM	What is the current pricing structure for all of the tax-advantaged accounts with the current provider?	Pricing structure is proprietary information.
175	N/A	PPPM	What is the current Per Participant Per Month FSA administrative fee? Does this fee include the debit card or is that an additional fee?	Pricing structure is proprietary information.
176	N/A	PPPM	What is the current Per Participant Per Month HBA administrative fee? Does this fee include the debit card or is that an additional fee?	Pricing structure is proprietary information.

177	N/A	PPPM	What is the current Per Participant Per Month HSA administrative fee? Does this fee include the debit card or is that an additional fee?	Pricing structure is proprietary information.
178	N/A	PPPM	Are you currently paying for custom communications? If so, are those fees part of the PPPM or billed outside? If outside, what's your current budget?	No, HCA does not currently pay for custom communications.
179	N/A	PPPM	What is the current costs to each employer (entity) for FSA, DCAP, HBA, and HSA? Do the employer pay the HSA fees?	Pricing structure is proprietary information.
180	N/A	PPPM	What is the current administrative fee for the benefits which the State is seeking (i.e. FSA, DCAP, HBA and HSA)? Is the current fee structure blended or Tiered? Does the State cover the cost of these benefits or do participants pay the fee?	Purpose of the RFP is to determine a blended rate for all accounts. The state pays for the benefit costs.
181	N/A	Reporting	Will the State supply the vendor with a payroll file of actual FSA payroll deductions? If so, will the State conform to the vendor file specs?	HCA does not provide a payroll file but format requirements can be discussed as part of contract negotiations.
182	N/A	Reporting	Does this require Administrative separation by employer group/entity, class of employees, etc.?	There is PEBB and SEBB separation and account type separation.
183	N/A	Reporting	What are the individual employer group reporting requirements – or is Enrollment, Eligibility, Funding, Billing, Reporting and Administration an aggregation of all groups under either SEBB or PEBB?	PEBB and SEBB are aggregations.
184	N/A	Reporting	Who will own and manage Eligibility and Payroll data?	HCA owns and manages Eligibility and Payroll data.
185	N/A	Reporting	Are there 2 Audits – SEBB and PEBB? If not – what is the break down – by employer, by Plan, Etc.? What is to be Audited and “matched up”?	There are three (3) audits – PEBB, SEBB, and COFA Islander Health Care. The Administrator receives payroll/employer reports of all the payroll deductions, by Participant, that are deposited to the HCA bank account, throughout the plan year. The Administrator tracks and pays the FSA/DCAP claims submitted by participants. After the end of the plan year grace period, the Administrator makes available a final report of the forfeited funds (deposits minus claims for each plan year). HCA compares this forfeiture report to our records. Additionally, we receive quarterly reconciliations of the claim amounts submitted by the vendor to HCA and the amounts paid by HCA, so we can correct any errors found (underpayments/overpayments).
186	N/A	Reporting	Please provide us with some history of your expected annual audit support needs.	Refer to response to question 185.
187	N/A	Reporting	Can you provide some examples of the types of reports you are requesting?	Enrollment by tax-advantaged account; annual forfeitures; balances by member; ad hoc reporting when requested.
188	N/A	Reporting	Please describe the contents of the daily eligibility file sent to HCA.	Daily change file is sent by HCA, no to HCA.
189	N/A	Reporting	Total Number of employer groups or entities Do each have separate TIN # ASB will have and report on	PEBB – 968 agencies/entities. SEBB – 322 districts No, each entity or agency does not have a separate TIN for reporting.
190	Section	Reporting	Reporting Needs, Weekly, Monthly, Quarterly, and Annually?	See section 1.6, <i>Scope of Work</i> , subcategory 4, Data and Reporting.
191	Section 1.6	Reporting	In SOW, under Reporting Requirements, HBA - "The enrollment report(s) should be separated by population type." Can you please describe the “population type?”	"Population type" in this question refers to account type.
192	Section 1.6	Reporting	For HBA please explain this reporting requirement including frequency. How does HCA use this data?	Finance and the Office of Medicaid Eligibility and Policy (OMEP) uses monthly reports which show the COFA Participants' individual disbursements for each month. This data needs to be available in a format that allows filtering by month or by any other span of time within a calendar year. Finance also needs access to the monthly invoices for the administrative fees to include the Participant count used to calculate the total admin fee. OMEP uses individual Participant reports that provide a running total of claims, disbursements and contributions for tracking members total benefits and when reviewing for case-by-case allocation adjustments.

193	Section 1.6	Reporting	What data should be included in the eligibility transaction file and who should be included? What is the "numeric field?"	The Administrator sends these data points to HCA: SSN Benefit Code (numeric field) HCA sends these data points to the Administrator: SSN First Name Benefit Code Eligibility Date Term Date
194	N/A	Solicitation	Who else has been invited to participate in the RFP?	This RFP is considered an "open solicitation" and is open to anyone who is registered for the WEBS for Vendors website.
195	N/A	Solicitation	Was this bid posted to the nationwide free bid notification website at www.mygovwatch.com/free?	No, this bid was not posted at the provided website information.
196	N/A	Solicitation	Other than your own website, where was this bid posted?	This RFP was posted on the WEBS website and the HCA Contracts and Procurement website.
197	N/A	Solicitation	What criteria will you use to determine if you will award an HSA contract as part of this bid?	See section 1.3, <i>Purpose and Objectives</i> , for HCA's statement for awarding and HSA as a part of the RFP process. Additionally, see section 4, <i>Evaluation and Contract Award</i> , for evaluation criteria.
198	N/A	Solicitation	Who is included in this bidding?	This RFP is considered an "open solicitation" and is open to anyone who is registered for the WEBS for Vendors website.
199	N/A	Solicitation	Under Section 3.2 relating to Proposal Format and Length instructions, would you please clarify the direction under Section E? If the page limit is counting single-sides, does that mean that a 2 page document printed on both sides equals 4 pages? Or would front and back printing of a single piece of paper be 1 page?	Yes, a single side is considered a page. A two (2) page document printed on both sides would be considered four (4) pages.
200	N/A	Solicitation	Did the HCA receive a sufficient number of Letters of Intent to Propose ("LOIs") to anticipate a vibrant and competitive bidding process? If so, how many LoIs did HCA receive, and from whom?	HCA received a total of 19 Letters of Intent to Propose.
201	N/A	Solicitation	Given the detail of "Exhibit E – Workers' Rights", does HCA anticipate a preference for an ASB with a collectively bargained workforce, presently or upon award?	See section 4.2, <i>Evaluation Weighting and Scoring</i> , subsection D. Exhibit E is Scoring Element of the RFP.
202	Section 1.2	Solicitation	Do you anticipate extending the bid due date?	HCA intends to adhere to the schedule provided in section 1.2, <i>Estimated Schedule of Procurement Activities</i> , of the RFP.
203	Section 4	Solicitation	What additional details are you willing to provide, if any, beyond what is stated in bid documents concerning how you will identify the winning bid?	HCA intends to adhere to the details provided in section 4, <i>Evaluation and Contract Award</i> , of the RFP.
204	Section 1.6	SOW	What is HCA most concerned with in a potential new partner implementation?	See section 1.6, <i>Scope of Work</i> , subcategory 6, <i>Implementation</i> , of the RFP for implementation requirements.
205	N/A	Website	RFP requires an On-Line web based enrollment system that can be a "link" or portal on the existing HCA web site, we believe. Is this a correct assumption – if not, clarify.	Yes. Currently, members can do most of their enrollments on SEBB and PEBB MyAccount, but for FSA/DCAP they must exit and enroll online at the Administrator's site. Ideally HCA prefer the Administrator's enrollment site to be linked out from the MyAccount application so that members don't have to exit and do something separate from the rest of their enrollment activities.
206	N/A	Website	Will the benefit Plans administrated for this RFP be a separate enrollment portal or link to ASB system or in conjunction to an existing enrollment system or process being used?	Refer to response to question 205. Administrator can be linked-to from HCA enrollment functionalities.
207	N/A	Website	Are all benefit accounts hosted on one unified platform with single sign in capabilities?	Refer to response to question 205.
208	N/A	Website	Is there an existing web based "all benefits" enrollment system in use today? If yes – is this system owned & managed by HCA or a vendor – If an outside contracted vendor – who is this? If not – would an "all benefits" single source web based system, which would include the Plans associated with this RFP, be of interest?	HCA has its own enrollment systems for PEBB and SEBB and COFA Islander Health Care and are not considering vendor solution at this point.
209	N/A	Website	What does HCA consider a microsite? Would HCA intend for a person to have to sign in to different websites for their health care FSA and their DCAP?	Microsite would be secured part of vendor website. This microsite could be one microsite that covers both FSA and DCAP accounts.