

**RFP #25020 responses should be emailed to:**  
**E-mail:** [BVSD-RFP-25020@holmesmurphy.com](mailto:BVSD-RFP-25020@holmesmurphy.com)  
Attention: Michelle Ohlde  
Holmes Murphy  
1828 Walnut Street, Suite 701  
Kansas City, MO 64108

**RFP No.:** 25020  
**Release Date:** Wednesday, March 12, 2025  
**For:** Medical Benefits Plan 2026  
**RFP Due Date:** Wednesday, April 9, 2025  
**Time:** By 5:00 p.m.

**CONDITIONS UNDER WHICH RFPs ARE REQUESTED ARE INCLUDED. PLEASE REVIEW THOROUGHLY.**

You are invited to bid prices for the services outlined as **Medical Benefits Plan 2026** for the Blue Valley Unified School District No. 229, Johnson County, State of Kansas herein referred to as the "District".

The District is soliciting proposals to provide professional services related to the administration of our medical benefits plan with an effective date of **January 1, 2026**.

The District reserves the right to reject any or all proposals received if such action is considered to be in the best interest of the District. This request does not obligate the District to pay any cost incurred by vendors related to submission of proposals in response to this RFP.

**Unauthorized communication by potential vendors about this RFP to District representatives, other than via the email address of our consultants handling the bid process shown below, may result in vendor disqualification.**

**Deadline for any questions regarding RFP procedures or questions regarding RFP specifications should be sent in writing to: [BVSD-RFP-25020@holmesmurphy.com](mailto:BVSD-RFP-25020@holmesmurphy.com) by 5:00 p.m. on Wednesday, March 26, 2025.** Be sure to have RFP No. 25020 in the subject heading. Questions and answers will be distributed to all responding/registered parties via email. **Please only respond with Holmes Murphy via this shared email inbox. To maintain the integrity of the RFP process all correspondence will be through this shared email.**

Action	Deadline	Method
Confirm Receipt of RFP	Upon Receipt	<a href="mailto:BVSD-RFP-25020@holmesmurphy.com">BVSD-RFP-25020@holmesmurphy.com</a>
Questions to Holmes Murphy	Wednesday, March 26, 5:00pm	<a href="mailto:BVSD-RFP-25020@holmesmurphy.com">BVSD-RFP-25020@holmesmurphy.com</a>
Q&A Responses to Market	As soon as possible	Email to Carrier Contacts
Proposal Due Date/Bid Opening	Wednesday, April 9, 5:00pm	<a href="mailto:BVSD-RFP-25020@holmesmurphy.com">BVSD-RFP-25020@holmesmurphy.com</a>
Finalists Identified	**Wednesday, April 23	Email to Carrier Contacts
Finalists Interviewed	**Friday, May 9	District Office Presentation

Note: \*\* The dates for identifying finalists and scheduling interviews may change subject to committee and attendee availability.

Final results of the RFP will be sent via email once the RFP process has been completed.

RFP number and name of bidder must appear on the front of your proposal.

**THIS RFP IS NOT TRANSFERABLE**

## TERMS & CONDITIONS

1. The Board of Education reserves the right to reject any or all RFPs, to accept any item or items in the RFP and to waive any informality in RFPs.
2. Each RFP must be priced.
3. Prices quoted must remain firm through December 31, 2026.
4. Each proposal must include the company name and address of the bidder, RFP number and RFP opening date/due date.
5. Contracts entered into on the basis of submitted RFPs are revocable if contrary to law.
6. Please include illustrated descriptions of all items RFP that are deviations from specified items.
7. Kansas State Law prohibits smoking in or on any District property. Compliance is required.
8. The supplier shall provide the standard patent infringement indemnity clause which shall hold and save the School District and its officers, agents, servants and employees harmless from liability for patent infringement of any patented invention, process, article, or appliance manufactured or used in the performance of the contract, including its use by the School District.
9. Indemnity and Hold Harmless: The supplier agrees to protect, defend, indemnify, and hold the School District, its Board members, officers, employees and agents, free and harmless from and against any and all losses, penalties, damages, settlements, costs, charges, professional fees, reasonable attorneys' fees, or other expenses or liabilities of every kind and character arising out of or relating to any and all claims, liens, demands, obligations, actions, proceedings, or causes of action of every kind and character in connection with or arising directly or indirectly out of the error, omission or negligent act of the contractor. The supplier further agrees to investigate, handle, respond to, provide a defense for and defend any such claims at supplier's sole expense and agrees to bear all costs and expenses related thereto, even if such claim is groundless, false or fraudulent.
10. Tax Exempt: School District is exempt from state and local sales taxes by virtue of Kansas Statutes Annotated 79-3606.
11. The service provider shall observe the provisions of the Kansas act against discrimination (K.S.A. 44-1030) and shall not discriminate against any person in the performance of work under the present contract because of race, religion, color, sex, disability, national origin or ancestry.
12. Supplier understands that the School District is subject to the Kansas Open Records Act, K.S.A. 45-215 et seq., as amended (the "Act"), and that any proposals made in response to a request for bid may be disclosed as required, in the sole opinion of the District, by the Act or other applicable law or judicial order. School District assumes no responsibility for such disclosure and will not be held liable for any damage or injury that may result from any disclosure that may occur. By submitting a response to a request for bid, Supplier agrees to defend, indemnify, and hold School District harmless from and against any and all claims, demands, costs, and expenses, including reasonable attorneys' fees, arising as a result of School District's disclosure or refusal to disclose response information provided by Supplier.

## **I. INTRODUCTION**

The District is issuing this request for proposals (RFP) to provide services related to the District's medical benefits plan. This document is a Request for Proposal. It differs from a Request for Bid/Quotation in that the District is seeking a solution as described in the following information, not a bid/quotation meeting firm specifications for the lowest price. As such, the lowest price proposed will not guarantee a recommendation of an award of service. The District reserves the right to select and recommend for award the proposed service that best meets its required needs, quality levels of service and budget constraints.

## **II. PURPOSE**

The District is soliciting proposals to administer and provide risk protection for their medical and prescription drug program. The successful proposer shall provide administrative services and risk protection for the District's Medical Benefits Plan with a **January 1, 2026**, plan year effective date.

The District currently maintains a Cost Plus plan administered by BlueCross BlueShield of Kansas City (BlueKC). The medical benefit plan has not been marketed since 2020 for the 2021 medical benefits plan year. There are currently no service issues. The District strives to secure the optimal price and plan offerings for employees and family members for medical plan benefits in 2026.

## **III. BACKGROUND INFORMATION – DISTRICT OVERVIEW**

**A. Please visit [bluevalleyk12.org](http://bluevalleyk12.org) for information and details related to the history of the district, their leadership, the families and children they serve as well as other important academic content.**

### **B. Claim History and Plan Information**

See separate attachments. Monthly claims and enrollment by product are provided for YTD 2025, 2024, 2023 and 2022. Please refer to the separate Word document outlining all the attachments we've included in this RFP to aid you in your proposal response.

Two census files are attached: one for active employees (3,347 eligible) and one for non-actives (48 enrolled COBRA/RETIREE/Leave of Absence LOA subscribers).

## **IV. REQUEST FOR PROPOSAL (RFP) TIMELINE**

Deadline for questions (emailed):	Wednesday, March 26, 2025 (by 5:00 p.m.)
Proposals Due:	Wednesday, April 9, 2025, (by 5:00 p.m. Central Time) to: <a href="mailto:BVSD-RFP-25020@holmesmurphy.com">BVSD-RFP-25020@holmesmurphy.com</a>
Finalist Interviews/Presentations:	Determined by Wednesday, April 23, 2025
Anticipated Award of RFP #25020	Summer 2025

## **V. SERVICE AGREEMENT / CARRIER EXPECTATIONS**

### **A. Operational**

1. The client service agreement is renewable annually. The agreement can be terminated if the District feels the CARRIER is not servicing the District up to the District's standards. The District's desire is to retain the services of the selected CARRIER for a period of 1 year with 4 annual extensions (5 years max). The services will begin on January 1, 2026. The award of contract will not be final until the District and the prospective contractor have executed a service agreement which is signed by both a binding representative of the CARRIER and representatives of the District.
2. CARRIER represents that it has or shall secure at their own expense, all personnel required in performing the services under this contract. Such personnel shall not be employees of or have any other contractual relationship with the District. All personnel engaged in the work shall be qualified according to the laws of the United States, the State of Kansas, and the provisions of this contract. Should the District object to an individual employed or engaged by the CARRIER to perform the services hereunder, CARRIER agrees to promptly replace that person with an individual approved by the District.
3. CARRIER shall establish safeguards to prohibit employees from using their positions for the purpose that is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
4. CARRIER shall maintain all licenses, permits, certifications, bonds, and insurance required by federal, state and local authority for carrying out this contract. CARRIER shall notify the District immediately if any required license, permit, bond or insurance is canceled, suspended or is otherwise ineffective.
5. None of the work or services covered by this contract shall be subcontracted without the prior written approval of the District. All approved subcontracts must conform to applicable requirements set forth in this contract.
6. The parties agree that this Agreement and the relationship it represents requires that exchange of confidential information over the course of normal business. Confidential information is information not generally known by non-party personnel, including but not limited to financial information, marketing information and other proprietary business information. Neither party shall use, duplicate or divulge to others any confidential information disclosed to that party by the other party in the course of performance of this agreement without first obtaining written permission from that party to the extent allowed by law. Full HIPAA compliance is required, whenever applicable.
7. The CARRIER guarantees that in connection with this proposal the prices and /or cost data have been arrived at independently, without consultation, communication, or agreement for the purpose of restricting competition. This does not preclude or impede the formation of a consortium of companies and /or agencies for the purpose of engaging in jointly sponsored proposals.
8. The CARRIER must disclose any corporate relationships or additional sources of income as a result of acting as the District's medical benefit plan administrator.

### **B. Procedural**

1. The District is not responsible for any costs associated with the preparation or submittal of this RFP. All proposals submitted become the property of the District. It is understood and

agreed that the prospective contractor claims no proprietary rights to the ideas and written materials contained in or attached to the proposal submitted.

2. **All questions** shall reference RFP #25020 Medical Benefits Plan Administration and be directed by email to: [BVSD-RFP-25020@holmesmurphy.com](mailto:BVSD-RFP-25020@holmesmurphy.com) **Questions must be submitted by Wednesday, March 26, 2025 by 5:00 p.m.** Questions as they are drafted along with the District's response will be distributed to all invited vendors within a week of the deadline.

**To maintain the integrity of the process, all correspondence regarding this RFP must be handled via the shared email in-box shown below:**

[BVSD-RFP-25020@holmesmurphy.com](mailto:BVSD-RFP-25020@holmesmurphy.com)

**We kindly request no direct or separate contact with Holmes Murphy regarding this RFP.**

***Please Note: We are unable to provide the 2026 renewal rates. BlueKC has been requested to respond to this RFP also.***

3. The District reserves the right to reject any and all proposals if the information is incomplete and does not address all the required items. Unsigned and late proposals will not be given consideration.

## VI. PROPOSAL REQUIREMENTS

To be considered, each proposal shall contain the following information.

### A. CARRIER's Capability:

1. Organization: State the full name and address of your organization, include the name, address and telephone number of the person in your organization who has primary responsibility for developing this proposal and to whom technical questions may be addressed.
2. Experience: Proposals shall include a description of the CARRIER's overall experience in handling similar medical benefits plan administration services. A list of not fewer than **three different references that are preferably public sector entities** that you have done work with in the last four years. Include the following: listing the organization's name, address, telephone number, contact person, detailed description of work performed, and length of similar services provided shall be included within the proposal.
3. Personnel: Proposals shall identify each member of the carrier's staff who would work on the account, the role they will be performing, and qualifications of personnel in the area of medical plan administration services. Please list as best as possible all persons that would be assigned to this account and include work history and experience for each.
4. Volume of Business: Describe your firm's annual volume of business and identify how much of this business is directly related to medical benefits plan administration and/or insurance.

5. Insurance Certificates: Include proof of Commercial Liability insurance and proof of insurance for Errors and Omissions coverage.
- B. Approach: Demonstrate ability to respond efficiently to requests for services. Describe availability, processes and provide examples used for other clients.
- C. Support Services Available: Describe the support services available by CARRIER to the District.
- D. Answers to Mandatory Questions: Proposals shall include answers to all the questions provided in the Mandatory Questions Section IX.
- E. Sample Contract: Include a digital draft of a contract agreement for providing the services within this RFP proposal. Be sure to not include any pricing information in the sample contract. Failure to provide a sample contract in an unrestricted Microsoft Word format will result in a reduction in points for this requirement.
- F. Deviations: Identify any deviations to the terms and conditions outlined in this RFP document. If none, simply state "None" for this section. **In addition, fully divulge any corporate relationships or additional sources of income** as a result of acting as the District's medical benefits plan administrator. If none, simply state "None" for this section. You are encouraged to also highlight any innovations, approaches, tools and technologies that you would recommend the District consider.
- G. Contract Price: The proposal shall include fixed pricing per the instructions outlined in this RFP. The term of the contract is annual with four annual renewals. The max length is five years total. This determination will be made before the contract is awarded. **ALL PRICING INFORMATION SHALL BE IN SEPARATE DIGITAL DOCUMENTS per instructions in Section VIII.**
- H. Consultant Appointment: Holmes Murphy is the District's appointed consultant/broker/advisor on specified health/welfare and employee benefits programs and functions as a benefit outsource service. Blue Valley School District does not pay Holmes Murphy directly. **The District's service agreement with Holmes Murphy calls for annual compensation (in order to provide administrative and supportive resources) in the amount of \$370,000 for 2026 with no contingencies. Therefore, please build this compensation (where applicable and appropriate) into your pricing as a part of the retention.**

*Holmes Murphy has been and will continue to be committed to acting in our clients' best interest by providing services and products that meet our clients' needs as communicated to Holmes Murphy. From time to time, Holmes Murphy may participate in agreements with one or more insurance companies or third-party vendors, in connection with the insurance related transactions, to receive additional compensation or consideration. These compensation arrangements are provided to Holmes Murphy as a result of the performance and expertise by which products and services are provided to the client and may result in enhancing Holmes Murphy's ability to access certain markets and services on behalf of Holmes Murphy clients. More information regarding these agreements and the consideration received pursuant to these agreements is available upon written request.*

The current medical carrier is Blue Cross/Blue Shield of Kansas City (BlueKC). The District has been with BCBS for over twenty (20) years. The last time the medical plan was marketed was in 2020 for 2021 coverage. There are currently no service issues. The District strives to secure the optimal price and plan offerings for employees and family members for medical plan benefits in 2026.

- I. The District is currently insured through BlueKC with a Cost Plus contract. The District pays monthly fixed costs for risk protection and administration and then reimburses BlueKC for monthly claims, variable ACA, stop loss and network access fees. The District does also receive a PBM Rx Rebate Credit in the amount of a fixed PMPM amount paid quarterly as a claims credit.

**The District is interested in seeing the following quotes:**

**Note: This RFP is being distributed to a variety of vendors – Fully Insured Carriers, Self-Funded Carriers, TPAs with an unbundled program for Stop Loss/PBM/Network services, Stop Loss Procurement, PBM pricing and Individual Coverage HRA. Please respond with proposals to the most appropriate quote(s) applicable to your company/organization for 1-6 below.**

1. **Self-Funded quote:** preference would be to remain in a similar funding arrangement to Cost Plus. That is, a contract that has the cash flow advantages of self-funding claims up to a specific pooling point of \$175,000 and an aggregate attachment point of 105% of expected claims. Please match the benefits and plan designs of the current six medical plans as closely as possible. Realizing a 105% corridor is unique, please quote the lowest (most appropriate) aggregate attachment offered by your company. Please include pricing for large case management, disease management, prior authorizations, etc. The District would never accept stop loss proposals that include lasers.
  2. **Fully-Insured quote:** Please also provide a fully insured medical/prescription quote. Please include services for large case management, disease management, prior authorizations, etc. Please match the benefits and plan designs of the current six medical plans as closely as possible. Please indicate if you can match the pooling level of \$175,000.
  3. **TPA Services:** Please provide PMPM fees for medical claims management, stop loss interface fees, network access fees, UM, complex care coordination, PBM interface fees, medical and pharmacy integration, telemedicine, behavioral health fees, advanced claim review, plan document fees, reporting, MHP RxDC, ID card services, member portal, subrogation, claims appeal, Gag Clause, as well as any additional fees you feel are worth considering.
  4. **Stop Loss Quote:** Please provide an option for carve-out stop loss protection services if not already in a self-funded quote under #1 above. The current contract is Cost Plus which includes a 105% corridor and individual pooling protection of \$175,000 per member. The current contract also includes run-out and terminal liability protection for 2025 claims incurred and paid in 2026. Please consider this when providing a stop loss proposal, a 12/12 contract may be optimal. Realizing a corridor of 105% is unique to education groups in the Kansas City market, please offer the next most optimal option for aggregate protection. Please indicate if an aggregate maximum is needed.
  5. **PBM Services:** Please provide an option for carve-out prescription management services if not already provided in a self-funded quote under #1 above. Please include how rebates will be shared. Please also complete the Rx and Pharmacy Disruption Analysis (attachment #13)
  6. **Individual Coverage HRA (ICHRA):** Please provide an ICHRA option using the current employer subsidy of \$860 per employee as the building foundation for securing purchasing among the District membership with individual options in the marketplace for the currently available health carriers. We realize 2026 rates are not public knowledge until November 1, 2025.
- J. The District currently offers six medical plans: All SBCs, Plan Summaries and Certificates have been provided. HDHP Blue Select Plus network including the Spira Care Centers, EPO with Spira Care Centers using the Blue Select Plus network, EPO Plan Blue Select Plus network, HDHP using the

Preferred Care Blue network, a PPO plan using the BlueSelect Plus network and a Closed and Grandfathered PPO plan using the Preferred Care Blue network. The benefit schedules for these six plans are in the attachments. UMB is their HSA administrator, the District does not need a quote for HSA services. The HSA program will remain with UMB.

- K. The District pays 100% of the cost for employee-only coverage on three of the six plans (the BlueSelect Plus HDHP with Spira Care, BlueSelect Plus Spira Care EPO Plan and PPO BlueSelect Plus plan). The District no longer contributes to the employee HSA accounts for those enrolled in the HDHP plans. All rates and employee cost sharing have been included.
- L. Full-time and part-time classified employees who work a minimum of 20 hours per week are eligible to be covered under this plan. Any certified employee who is covered under the terms of the negotiated agreement, working 0.60 FTE+ hours per week, is eligible for coverage. Pre-65 retirees are also eligible for coverage (per the state mandate, KPERS 12-5040 statute).
- M. Dependent children are covered through the end of the calendar year when they reach age 26 or the month they are no longer an eligible dependent, whichever is first.
- N. Census data with home zip codes has been provided to you in two attachments (one for Actives and one for COBRA/RETIREE/LOA).

We have also included in the attachments a list of the top utilized professional providers. In your proposal, please indicate if each of these providers is an in-network or out-of-network provider for each network you are proposing for the District.

- O. The District has adopted a wellbeing strategy focused on many elements of wellbeing: community, financial, physical, social and career. **The District utilizes the wellness services provided by BCBS's "A Healthier You" program which is included in the monthly BCBS rates.**
  - 1. The District partners with A Healthier You (AHY) for their wellbeing/wellness program. If an employee (and spouse, if applicable) chooses to participate, they would complete AHY registration, complete an online health risk assessment, complete a fasting health screening with their physician using the Physician Screening Form found on the AHY member portal and complete a digital tobacco cessation program (if attesting to using nicotine/tobacco). If these steps are completed members are entered into drawings for a variety of raffle prizes and awards.
  - 2. The Wellbeing Coordinators at the District are responsible for the communication of the wellbeing program and resources provided by BlueKC and the District.
- P. Medical Value-Adds:
  - 1. Blue KC designates certain primary care physicians as Patient-Centered Medical Homes who benefit members by providing greater engagement with them through enhanced communication with Blue KC as to their claims history, prescription compliance, visits to other providers, etc. Please indicate whether your network includes similar providers, indicating BVSD members' access to them, and the features and services that distinguish these doctors from others. Please note if you can administer a plan design with a separate copay to encourage utilization similar to this PCMH structure.
  - 2. Blue KC also provides the value adds of Telehealth program. For Telehealth, they have partnered with American Well (Amwell) to offer care from your home or wherever they may be.
  - 3. Blue KC also provides a few Prescription Savings Plans. Pharmacy and prescription plans implemented with BCBS include:
    - i. *Select Step Therapy* – empowers members to reduce prescription waste. This means they may need to first try a proven, cost-effective medication before progressing to a more costly treatment.

- ii. *OptumRx Specialty Medications* – members who take a specialty medication receive a letter explaining the benefits of using Optum’s specialty pharmacy. Access to specialty-trained pharmacists and nurses 24/7, medication delivery, safety checks and refill reminders are some of the benefits.
  - iii. *Rx Savings Solutions* – offering members to online tools and resources to determine if changing to a generic or alternative is viable, as well as cost savings when changing to a different pharmacy and learning if different forms of the medication (capsules or splitting) may provide savings.
- Q. Your proposal should include your complete cost containment and utilization review provisions including those in the present benefit structure as well as any other features you may wish to include.
- R. Please confirm the availability of detailed enrollment/management reports, as well as monthly paid premium/paid claim reports.
- S. **All deviations from the requested plans must be indicated. All deviations from current must be indicated.**
- T. The District submits all enrollment and eligibility information electronically Selerix Online enrollment system that provides self-administered premium administration and direct employee online enrollment. ***The proposed vendor must be willing to help coordinate and accept data from Selerix. Enrollment file feeds are sent weekly to capture adds/terms.***

#### **Electronic Enrollment Services**

At initial enrollment and annual open enrollment / re-enrollment (if making changes), each employee is asked to go to the enrollment website to re-elect or confirm their benefit elections.

#### **Eligibility Maintenance**

The Selerix database should be recognized as the “master” eligibility source. This means that no other entity aside from Selerix is responsible for keeping track of who is eligible or not as of a given point in time. Each week Selerix will send to all vendors the current eligibility file. This includes updated addresses, changes in employee status, location changes, etc.

#### **Premium / Billing Invoicing Method**

Performing the role of the master eligibility source will allow Selerix to produce supporting documentation for the carriers and service providers monthly invoices. A “snapshot” of the eligible group is taken around the middle of each month. Premium is billed by division and by product, by Selerix based on this snapshot. **Billing for COBRA/RETIREES and those employees on Leave of Absence (LOA) is handled slightly differently. Only those premiums collected from those participants is what is paid to the medical (and ancillary) carriers.**

#### **U. ADMINISTRATIVE SERVICES SPECIFICATIONS**

1. The following services must be provided:
  - Claim adjudication and claim payment including all necessary investigation and analysis.
  - Appeals – ACA required appeal procedures.
  - Application of Reasonable and Customary (allowable expense for non-par charges).
  - Subrogation services.
  - Apply coordination of benefits
  - Monthly financial reports, by plan, medical separate from pharmacy
  - Eligibility verification.
  - Identification cards.
  - Monthly management reports.

- Underwriting and actuarial services.
  - Plan document (certificate of coverage) writing services.
  - Design of administrative forms necessary to administer the plan (i.e. claim forms, EOB forms, etc.).
2. Describe the performance guarantees your company is willing to offer. These guarantees should include:
- Claim turnaround time
  - Claim financial accuracy
  - Call response standards
  - Report delivery
  - Fee cap guarantees
  - Network savings guarantees

**V. STOP LOSS/POOLING SPECIFICATIONS**

- Medical and Rx charges both apply to the specific and aggregate protection.
- Please quote a specific stop-loss deductible of \$175,000. Please specify the timing of spec claim reimbursements in your proposal.
- The BlueKC 2025 contract is Cost Plus that includes terminal liability protection with the obligation to pay run out claims for twelve months throughout 2026.
- Please quote an aggregate stop loss where maximum claims are 105% of expected, if possible. Otherwise, quote the lowest corridor possible (110%, 115% or 120%).

**VII. SCORING AND SHORTLISTING**

**Evaluation of Proposals:** An evaluation committee comprised of District employees and board members, as well as representatives from Holmes Murphy, shall evaluate proposals received.

**1. Phase I Evaluation and Shortlisting:**

All proposals will be evaluated according to the point schedule listed below. Proposals not short-listed will not be further considered.

<b>Section</b>	<b>Section Title</b>	<b>Total Possible Points</b>
Section 1	Price/Rate Guarantee	35 Points
Section 2	Benefits Provided/Plan Design	35 Points
Section 3	Network Options/Strength	17 Points
Section 4	Wellness Resources/Technology	10 Points
Section 5	Adherence to RFP Requirements	3 Points

**The District retains the right to end the RFP and base award of the RFP after the Phase I scoring or continuing on to Phase II Optional Finalists Interview. Vendors are encouraged to put their best proposals forward since award can be made after Phase I.**

**2. Phase II Optional Finalists Interview:**

The District retains the right to interview some, all or none of the RFP Finalists identified in the Phase I Scoring. Necessary interviews will be scheduled and or completed by Friday, May 9th. Companies invited for the interview will be notified with at least one week notification for coordination of availability. Interviews may be conducted in person or via video conference. Upon completion of the interviews the District reserves the right to adjust the phase I scoring of a phase II participant based on the review of additionally provided information.

Scores from Phase I will carry over and be combined with the following:

**Total Possible Points**

Phase I 100 Points *(May be adjusted pending outcome of Interview.)*

**Scoring from Phase I will not be made available until Phase II has been completed or ruled out.**

**VIII. RFP RESPONSE INSTRUCTIONS**

1. Emailed RFP responses are to be sent to:

[BVSD-RFP-25020@holmesmurphy.com](mailto:BVSD-RFP-25020@holmesmurphy.com) by the due date of Wednesday, April 9, 2025, by 5:00 p.m. All proposals received after the date and time set for receipt will be REJECTED. Proposals received after the time and date set will not be considered.

2. **The District requires electronic copies of the entire proposal in Excel for the Excel attachments and in Word format for the responses to questions for ease of transferring responses to a summary comparison.**

3. Neither the District nor Holmes Murphy is responsible for identifying proposals submitted that are not properly marked.

6. Official RFP responses shall be signed by an official authorized to legally bind the Proposer.

7. **IMPORTANT!: Pricing (rates, fees, premium cost, etc.) MUST be submitted in separate digital documents within the main submission documents and be clearly labeled "Pricing Response, RFP # 25020".**

8. Proposers are to reply with information in the following order:

- Letter of transmittal indicating the firm's interest in providing the service and any other information that would assist the District in making their selection. This letter must be signed by a person legally authorized to bind the firm to a contract. **Please refrain from including specific financial or savings information in this transmittal letter. All financial references and exhibits should be separate from the proposed terms.**
- Answers to Section IX, Proposal Requirements in the order requested.
  - Answer "Mandatory Questions" in the order asked. Efforts have been made to provide this section electronically. Please answer each question under the question asked.

- RFP Signature Page, signed by a person that can legally bind the proposing company. **Official version of the proposal should include an actual signature to be valid.**
- Any additional information that may be helpful in evaluating services offered.

**IX. MANDATORY QUESTIONS**

1. Name of CARRIER/TPA/VENDOR: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Telephone: \_\_\_\_\_
4. Name of producer/account executive: \_\_\_\_\_
5. The District's Benefits Department would like one main contact at carrier/vendor for any issues (i.e. claims, eligibility, general questions, etc.) that may arise during the year. This contact would not be made available to all District employees, but would rather be available only for the Benefits Department's use. Please state your acceptance of this request and name the individual.  
\_\_\_\_\_
6. Office servicing this account: \_\_\_\_\_
7. Date founded/opened: \_\_\_\_\_
8. Total Number of Employees: \_\_\_\_\_
9. Number of public entity clients: \_\_\_\_\_

**Complete the following information with regard to company and firm.**

10. Provide a very brief history of your firm and its overall capabilities.
11. What is the name of provider networks you are proposing? Is the cost to access the network included in your fee?
12. Is medical management provided by your company, or by an outside vendor? If there are additional costs to the District for these services, be sure to include the descriptions and unit costs in your proposal.
13. **Please state your willingness to provide final renewal rates by March 1st of each year for an effective date of January 1 of the subsequent year** (this includes the first-year renewal). If you are unable to provide this notice, confirm when you commit to delivering renewal notice each year.
14. If your proposal does not comply with the specifications in any way, please explain all deviations in detail.

15. Please provide a copy of your most recent financial report, as well as any other information you feel is reflective of your company's financial strength. **We are required to know your A.M. Best Rating if you have one.**
16. Please provide the name, title and telephone number of three of your clients as references that are similar in size to the District.
17. Please confirm that your administration, Information Technology systems, security and all documents and electronic transactions are compliant with HIPAA.
18. Information Technology – please confirm your compliance with appropriate security and firewalls.
19. Will you provide performance guarantees? If so, please include them with your proposal. Be sure they include a list of the services on which you are willing to guarantee your performance.
20. Are you anticipating any major network renovations of any of your networks which would be accessed by the District?
21. Do you provide Large Claim Negotiation Services for non-network expenses? How do you charge for this service?
22. Please confirm which hospitals in the KC metro area are in your network. We've provided a listing of the in-network BCBSKC hospitals in the KC metro area for their two networks, Preferred Care Blue and Blue Select Plus. **See attachment #7. Please indicate if these hospitals are in your network.**
23. A current Provider Listing by name, TIN and address has been included for the most recent trailing twelve months. **Please indicate with a Yes or No as to whether that provider is in your proposed network. See attachment #6.**
24. A current Drug and Pharmacy Listing with NDC codes and TINs has been included for the most recent trailing twelve months. **Please indicate with a Yes or No as to whether the state drug is in your proposed formulary and what Tier of copay it corresponds with Tier 1, 2 or 3. See attachment #15.**
25. **We are awaiting a Claims Repricing File. Once received it will be provided to you if applicable for repricing. We do need a claims repricing report to be completed.**
26. Please include a listing of which disease management programs you currently have in place to help manage chronic illness.
27. Do you offer a program for in the moment 24/7/365 behavioral health management, urgent help and support that can be accessed directly by employees and their dependents via the telephone or online? Is there a separate fee for this program or is it included in the pricing?
28. The District currently utilizes BlueKC's A Healthier You Wellness Program for online health and wellness education, HRAs, routine preventive exam completion and routine cancer screening completion. Points can be earned by members for completing these activities and redeemed for raffle gift awards. Please describe the programming that will be available to employees and dependents to maintain and improve their health. Please indicate if you can provide a similar wellness program.

29. Part of the wellness program is encouraging employees and covered spouses to complete their annual routine preventive exam. Members who complete this activity are entered into District raffles for additional prizes. Please confirm if completion of the exam can be captured by claims feed and reported back to the District simply noting if the employee/covered spouse completed the exam. Biometric values are not captured by the District, only the completion of the exam.
30. Blue Connect – a higher level of customer service department is offered by BlueKC. The District pays an additional cost for this concierge white glove level of customer service of \$2.00 PEP. Can your company offer a higher level of customer service beyond the normal customer service call center? If so, please confirm the PEP cost for this program and what your higher level of customer service provides.
31. Do you offer Virtual Care / Telehealth resources? If so, is there an additional cost for those services outlined in your proposal?
32. Identify your proposed PBM and Specialty drug program vendor.
33. Please explain how Rx rebates will be shared with the District. In the contract you have proposed will the District be eligible for Rx rebates?
34. Can you offer a Prescription Savings Program to alert members for savings opportunities for the medications they are taking.
35. Can you match the current Pooling Level of \$175,000? What fixed fee or percent of premium do you assess for this specific level?
36. Do you agree to provide a firm notice of each annual renewal the first week of March for an effective date of the following January?
37. Do you have the ability to provide a 2<sup>nd</sup> year rate cap or rate guarantee?
38. Are infertility services (diagnosis, testing & treatment) covered on your plan(s), and if so, what is the benefit?
39. Presently, dependent daughters are not covered for maternity. Please confirm if your contract can cover dependent daughter maternity claims to include the birth of the child, but not specific claims for the baby after birth.
40. Please confirm you can cover dependent children to the “end of the year” in which they turn 26.
41. Holmes Murphy uses a claims data warehouse (Artemis) to analyze a variety of claims data. If the District wishes to use this platform can your company support the one-time set up cost of \$15,000 to establish file feeds for the claims data transmission?
42. The District requires the presence of the several members from their medical carrier to attend the two-day Employee Benefit Fair during Open Enrollment in October to visit with and answer employee questions and provide presentations on the benefits. Your presence is also required in August during New Teacher onboarding days to visit with employees and answer questions related to benefits. Please confirm if this service can be met. The Holmes Murphy team is also in attendance at both events.
43. Please provide any information that you feel has not been adequately addressed to give your proposal its best opportunity, or any information you feel we need to better understand your recommendations.

**X. Signature Page**

In compliance with this Request for Proposal and subject to all Terms and Conditions thereof, the undersigned offers and agrees, if the Proposal is accepted, to furnish any or all of the items or services listed herein at the fees and terms stated except as stated as a deviation in Section VI, F.

Name of Authorized Person: \_\_\_\_\_ (Print)

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone number: \_\_\_\_\_