

SPECIFICATIONS AND SPECIAL CONDITIONS

VOLUNTARY EMPLOYEE DENTAL AND VISION INSURANCE ANNUAL CONTRACT EVENT #5341

- 4.0 The purpose of these specifications is to describe the requirements for qualified insurance companies to provide voluntary dental and vision insurance for the City of Savannah, including the Metropolitan Planning Commission.

To submit pricing electronically for this event, enter pricing for each line item shown under the lines tab on the event summary. To enter pricing manually, complete the attached bid proposal form. Manually submitted bids must be submitted on the bid proposal forms contained in these specifications in order to be considered.

A pre-bid conference has been scheduled to be conducted at the Purchasing Office, City Hall, third floor, 2 East Bay Street, Savannah, Georgia 31401. This meeting will allow contractors to discuss the specifications and resolve any questions and/or misunderstandings that may arise with City staff. You are invited to attend.

- 4.1 **Background Information:** The City of Savannah is considered an employer of choice within the southeast, and offers benefits to approximately 2,500 employees. Employees and eligible family members are able to voluntarily participate in dental and vision insurance coverage. The City does not guarantee a percentage of employee participation.

4.1.1 **Dental:** The City currently offers a dental plan to employees through United Concordia Insurance Company (UCCI). UCCI has provided this coverage since January 1, 2006. There are two (2) plan options, both of which are PPO network-based plans. Currently the City has approximately 4,150 eligible employees and retirees. Of those, 2,450 employees and retirees participate in one (1) of the two (2) dental plans. The premiums are fully paid by employees and retirees.

4.1.2 **Vision:** The City currently offers a vision plan to employees through National Vision Administrators (NVA). NVA has provided this coverage since January 2, 2011. There is one (1) plan option which is a PPO network-based plan. Currently the City has approximately 2,742 eligible employees. Of those, 1,586 employees participate in the vision plan. The premiums are fully paid by the employees.

- 4.2 **Historical Data:** The following attachments are included to provide historical data and information.

Attachment 1 Census Data – Dental

Attachment 2 Census Data - Vision

- Attachment 3 Dental Benefits Summary Basic Option
- Attachment 4 Dental Benefits Summary High Option
- Attachment 5 Dental Claims Experience
- Attachment 6 Dental Policy
- Attachment 7 Dental Rate History
- Attachment 8 Vision Benefits Summary
- Attachment 9 Vision Claims History
- Attachment 10 Vision Policy Amendments
- Attachment 11 Vision Rate History
- Attachment 12 Vision Policy

4.3 Insurance carriers under this plan shall:

- 4.3.1 Provide eligible participants with a quality, affordable dental and/or vision care program with access to an adequate selection of PPO network providers.
- 4.3.2 Provide timely, accurate, responsive claim and customer service to plan participants and plan administrators.
- 4.3.3 Minimize disruption for current dental and vision plan participants and provide a seamless transition into the new plan.
- 4.3.4 Provide a dual option for dental that allows employees a choice of plans, and a single plan option for vision.
- 4.3.5 Meet or exceed the plan design specifications provided herein.

4.4 **Eligibility**

Employees who work 20 or more hours per week in a regular position and have completed one (1) month of continuous service will be eligible for election of coverage. Spouses and dependent children are also eligible for coverage. Dependent children may be covered through the end of the month in which they reach the age of 26. Employees are eligible to continue dental coverage into retirement. There is no benefit waiting periods, other than the eligibility period noted above. Both timely and late enrollees are afforded full coverage on their effective date.

4.5 **Program Marketing**

The provider selected shall be responsible for providing all certificates, forms, and descriptive materials to be distributed to employees. These documents will be subject to review and approval by the City prior to distribution. The provider for dental and vision will furnish representation for sessions during the City's annual open enrollment period, which is traditionally held the first two weeks of November.

4.6 **Identification Cards**

The provider will produce the initial identification cards to all covered members prior to the effective date of the plan. This is required for dental and vision. During the contract year, identification cards shall be provided to new members within ten (10) days of receipt of their enrollment data.

4.7 **Benefit Booklets and Forms**

The provider will furnish each enrolled employee a hard copy benefit booklet outlining and defining all covered services, limitations and exclusions, and schedule of benefits. The initial booklet proofs must be provided to the City on a timely basis, but not later than four (4) weeks following the contract award date. The City shall review and approve booklets prior to distribution. Booklets must be reprinted if changes are required at no cost to the City. All claim forms, enrollment forms, network directories, and any other necessary forms will be provided at no additional cost.

4.8 **Reporting**

The provider will furnish plan utilization data and claims experience to the City on a quarterly basis.

4.9 **Implementation**

The provider will meet with the City within fifteen (15) days after the contract award date to review the dental and vision programs, to present the proposed communication material, and to jointly establish a preliminary implementation plan, open enrollment program, and schedule.

4.10 **Contact Information**

The provider shall assign an account executive responsible for resolving problems, answering claim, administrative, or billing issues, and expediting services related to the overall performance of the contract. The provider shall also furnish an organizational chart and list of contacts to include phone numbers and relevant functional areas of each contact person, and provide updates as changes occur.

4.11 **Electronic Data**

The provider shall receive enrollment data from the City in a mutually agreeable electronic format.

4.12 **Claims Processing**

The provider shall provide accurate, timely claims processing within ten (10) working days for a perfected claim.

4.13 **Licensing**

The provider shall be an insurance carrier licensed to do business in the State of Georgia. Vision providers that are not insurance companies, shall provide full information for the underwriter with the underlying risk.

4.14 **Commissions**

Premiums quoted for both dental and vision coverage shall include the percentage of commission. Indicate on the Fee Proposal page the percent commission for each level of coverage.

4.15 The City will select a single carrier for dental and vision, or one (1) carrier for dental and one (1) for vision. The contract for services is scheduled to begin January 1, 2018 with renewal options for four (4) additional years. The provider will guarantee rates for a minimum of two (2) years which include the initial contract period for the 2018 calendar year and the following year for the

first renewal option if exercised.

5.0 **General Specifications**

5.1 The bid response must include the following documents in this order:

- Bid Proposal Form (as a cover sheet)
- Exception Sheet
- Non-Discrimination Statement
- Proposed Schedule of MWBE Participation
- Other submittals as stated

All referenced documents must be completed and returned in their entirety to constitute a complete bid.

5.2 Original invoices should be sent to:

City of Savannah
Accounts Payable
P.O. Box 1027
Savannah, GA 31402

5.3 Vendor is responsible for determining and acknowledging any addenda issued in connection with this bid solicitation. Bidders must acknowledge all addenda issued for this event in order for their responses to be considered.

5.4 To be awarded bids, vendors must be registered as suppliers on the City of Savannah's website at www.savannahga.gov.

5.5 This contract will be awarded to the vendor offering the lowest net price to the City, and meeting or exceeding all specifications herein.

**EXCEPTION SHEET
EVENT #**

If the commodity(ies) and/or services proposed in the response to this bid is in anyway different from that contained in this proposal or bid, the bidder is responsible to clearly identify by specification section number, all such differences in the space provided below. Otherwise, it will be assumed that bidder's offer is in total compliance with all aspects of the proposal or bid.

Below are the exceptions to the stated specifications:

Date

Signature

Company

Title

BID PROPOSAL FORM

(SUBMIT AS THE COVER SHEET)

City of Savannah Purchasing Department
3rd Floor, City Hall
P. O. Box 1027
Savannah, Georgia 31402

EVENT NUMBER:
Business Location: (Check One)
 Chatham County
 City of Savannah
 Other

ATTN: Purchasing Director

ALL BIDDERS MUST BE REGISTERED SUPPLIERS ON THE CITY'S WEBSITE TO BE AWARDED EVENTS. PLEASE REGISTER AT WWW.SAVANNAHGA.GOV. ALL MANUALLY SUBMITTED BIDS MUST BE SUBMITTED ON THIS BID PROPOSAL FORM CONTAINED IN THESE SPECIFICATIONS TO BE CONSIDERED.

Name of Bidder: _____

Street Address: _____

City, State, Zip Code: _____

Phone: _____ Fax: _____

Email: _____

DO YOU HAVE A BUSINESS TAX CERTIFICATE ISSUED IN THE STATE OF GEORGIA?
(CHECK ONE) YES: _____ NO: _____

FROM WHAT CITY/COUNTY _____
TAX CERTIFICATE #: _____ FED TAX ID #: _____

INDICATE LEGAL FORM OF OWNERSHIP OF BIDDER (STATISTICAL PURPOSES ONLY):
CHECK ONE: CORPORATION PARTNERSHIP
 INDIVIDUAL OTHER
(SPECIFY: _____)

INDICATE OWNERSHIP STATUS OF BIDDER
(CHECK ONE):
 NON-MINORITY OWNED ASIAN AMERICAN
 AFRICAN AMERICAN AMERICAN INDIAN
 HISPANIC OTHER MINORITY
 WOMAN (non-minority) (describe) _____

Do you plan to subcontract any portion of this project? Yes _____ No _____
If yes, please complete the attached schedule of M/WBE participation. Also complete the schedule if you will be using any M/WBE suppliers.

ADDENDA ACKNOWLEDGEMENT

My signature below confirms my receipt of all addenda issued for this proposal.

Signature Date

***This acknowledgement is separate from my signature on the fee proposal form. My signature on the fee proposal form will not be deemed as an acknowledgement of addenda.**

THE UNDERSIGNED PROPOSES TO FURNISH THE FOLLOWING ITEMS IN STRICT CONFORMANCE TO THE BID SPECIFICATIONS AND BID INVITATION ISSUED BY THE CITY OF SAVANNAH FOR THIS BID. ANY EXCEPTIONS ARE CLEARLY MARKED IN THE ATTACHED COPY OF BID SPECIFICATIONS:

DENTAL CARE – TABLE A

ITEM NO.	DESCRIPTION	MONTHLY RATE	ESTIMATED QUANTITY*	TOTAL
1	Dental Plan Standard Option for Employee Only - Single Coverage _____ % commission		500	
2	Dental Plan Standard Option for Employee plus One (1) – Two-Party Coverage _____ % commission		500	
3	Dental Plan Standard Option for Employee plus Family _____ % commission		500	
4	Dental Plan High Option for Employee Only – Single Coverage _____ % commission		500	
5	Dental Plan High Option for Employee plus One (1) – Two-Party Coverage _____ % commission		500	
6	Dental Plan High Option for Employee plus Family _____ % commission		500	

*Estimates are for bidding purposes only. Reference Section 4.1

BID SUBTOTAL \$ _____

VISION CARE –TABLE B

ITEM NO.	DESCRIPTION	MONTHLY RATE	ESTIMATED QUANTITY*	TOTAL
7	Vision Care – Single Coverage _____ % commission		500	
8	Vision Care – Employee plus One (1) _____ % commission		500	
9	Vision Care – Employee plus Family _____ % commission		500	

*Estimates are for bidding purposes only. Reference Section 4.1

BID SUBTOTAL \$ _____

GRAND TOTAL \$ _____

(TABLE A + TABLE B)

I certify this Bid complies with the General and Specific Specifications and Conditions issued by the City except as clearly marked in the attached copy.

Please Print Name

Authorization Signature

Date

NON-DISCRIMINATION STATEMENT

The prime contractor/bidder certifies that:

- (1) No person shall be excluded from participation in, denied the benefit of, or otherwise discriminated against on the basis of race, color, national origin, or gender in connection with any bid submitted to the City of Savannah or the performance of any contract resulting therefrom;
- (2) That it is and shall be the policy of this Company to provide equal opportunity to all business persons seeking to contract or otherwise interested in contracting with this Company, including those companies owned and controlled by racial minorities, cultural minorities, and women;
- (3) In connection herewith, We acknowledge and warrant that this Company has been made aware of, understands and agrees to take affirmative action to provide such companies with the maximum practicable opportunities to do business with this Company;
- (4) That this promise of non-discrimination as made and set forth herein shall be continuing in nature and shall remain in full force and effect without interruption;
- (5) That the promises of non-discrimination as made and set forth herein shall be and are hereby deemed to be made as part of and incorporated by reference into any contract or portion thereof which this Company may hereafter obtain and;
- (6) That the failure of this Company to satisfactorily discharge any of the promises of non-discrimination as made and set forth herein shall constitute a material breach of contract entitling the City of Savannah to declare the contract in default and to exercise any and all applicable rights and remedies including but not limited to cancellation of the contract, termination of the contract, suspension and debarment from future contracting opportunities, and withholding and or forfeiture of compensation due and owing on a contract.

Signature

Title

PROPOSED SCHEDULE OF M/WBE PARTICIPATION

Any M/WBE listed in this completed form must be certified by the City of Savannah and/or other certifying agency such as USDOT, GDOT, SBA 8(a) or GMSDC prior to the due date of this bid. Proof of M/WBE certification such as a certificate or letter from the certifying agency is required to accompany the bid. A firm that has submitted an application for M/WBE certification or an application for M/WBE certification under review but has not been certified is not qualified as a certified M/WBE and will not be recognized as such during the City's evaluation process.

Name of Proposer: _____

Event No. _____

Project Title: _____

NOTE: Unless certified through the City of Savannah's MWBE Program, proof of MWBE certification must be attached to this completed form for all firms listed in the table below.

Name of M/WBE Participant	Name of Majority Owner	Telephone	Address (City, State)	Type of Work Sub-Contracted	Estimated Sub-contract Value	MBE or WBE	City Certified Y or N
					%		
					%		
					%		
					%		
					%		
					%		

MBE Participation Value: _____ %

Women Participation Value: _____ %

The undersigned will enter into a formal agreement with the M/WBE Subcontractors/Proposers identified herein for work listed in this schedule conditioned upon executing of a contract with the Mayor and Aldermen of the City of Savannah. The Prime's subcontractors' subcontractors must enter into a formal agreement with the tier subcontractor identified herein for work listed in this schedule. It is the responsibility of the Prime contractor to ensure compliance by all subcontractors.

Joint Venture Disclosure

If the prime bidder is a joint venture, please describe below the nature of the joint venture and level of work and financial participation to be provided by the Minority/Female joint venture firm.

Joint Venture Firms	Level of Work	Financial Participation

Printed name (company officer or representative): _____

Signature: _____

Title: _____ Email: _____

Telephone: _____ Fax: _____

NOTE: The Minority/Women Owned Business Office is available to assist with identifying certified M/WBEs. Please contact the M/WBE Office at (912) 652-3582. The City of Savannah's certified M/WBE registry is posted on its website @ www.savannahga.gov.

Developing a Strong M/WBE Participation Plan

Key facts every bidder/proposer needs to know prior to developing their M/WBE Participation Plan:

1. All bidders/proposers must submit a “Proposed Schedule of M/WBE Participation” which identifies the minority and/or woman-owned companies that have agreed to participate in the project if awarded. All companies listed on the form must be certified as either minority-owned and controlled or woman-owned and controlled. The City does not accept a company’s “self-identification” as minority or woman-owned.
2. **Proof** of M/WBE certification from the certifying agency is required to accompany the bid; and certification must have been completed by the City of Savannah, a federally-recognized or a state-level certifying agency (USDOT, State DOT, SBA 8(a) or GMSDC) utilizing certification standards comparable to the City of Savannah.
3. The certification must have been approved prior to the due date of this bid. A firm that has submitted an application for certification but has not been certified will not be counted toward the M/WBE goal.
4. The M/WBE Office **will be contacting all M/WBE firms** included in the bidder’s M/WBE Plan to confirm each: a) was contacted by the bidder/proposer; b) performs the type of work listed; and c) agreed to participate.
5. To expedite the verification process, bidders/proposers need to: provide accurate phone numbers for all M/WBEs listed; ensure M/WBEs know to expect to be contacted by phone and email; request M/WBEs be accessible during the critical period before bid-opening; and advise M/WBEs that City staff **must** receive the M/WBE’s confirmation that the firm agreed to participate in the bid/proposal in order for the prime contractor to receive credit toward their proposed M/WBE participation goals.
6. If a proposed M/WBE cannot be confirmed as certified, performing the type of work described or agreeing to participate, the bidder/proposer will be notified and given a pre-determined period to submit a correction. If an M/WBE still cannot be confirmed or replaced, the proposed percentage of participation associated with the unverified M/WBE firm will **not be counted** and **will be deducted** from the overall proposed M/WBE goal.
7. Any tier of M/WBE subcontractors or suppliers that will be utilized in the contract work may count toward the MBE and WBE goal **as long as the tier subcontractors/suppliers are certified M/WBEs**. Work that an M/WBE subcontracts to a non-M/WBE firm does **not** count toward the M/WBE goal.
8. M/WBEs must perform a “**commercially useful function**” which is the provision of real and actual work or products, or performing a distinct element of work for which the business has the skills, qualifications and expertise, and the responsibility for the actual management and supervision of the work contracted.
9. Per the *Proposed Schedule of M/WBE Participation* “the undersigned (bidder/proposer) will enter into a formal agreement with the M/WBE Subcontractors/Proposers identified herein for work listed in this schedule, conditioned upon executing a contract with the Mayor and Aldermen of the City of Savannah.” **This signed commitment is taken seriously by the City**, so do not list M/WBEs you do not plan to utilize. Any proposed changes must be pre-approved by the M/WBE Office, be based on legitimate business-related reasons, and still meet the M/WBE participation goals per the City’s contract.
10. A bidder who is a certified M/WBE may count toward the goal the portion of work or services on a City contract that is actually performed by the M/WBE, including: the cost of supplies/materials purchased or equipment leased for contract work, fees for bona fide services such as professional or technical services, or for providing bonds or insurance specifically required for the performance of a City contract.
11. If awarded the contract, the MWBE Office **will be reviewing your company’s subcontracts, invoices and payment records** to substantiate the completion of work and payment of M/WBEs. If the prime contractor is an M/WBE that is being included in its M/WBE goal, the prime contractor must maintain records **that will be inspected** to prove the portion of work performed, cost of work, and payments to the prime company.
12. Most bids for goods and materials do not have specific MWBE goals established for the contract. If no goals are include in the scope of work or General Specifications, you are not required to submit MWBE participation but encouraged to do so when the opportunity is available. The City maintains this information for statistical purposes only and it is not reflected in the award decision.