

Vision Plan

Final Response to Questions

12/9/15

No.	Question	Response
1	Can the carrier elect to offer the product to small business and not individuals/families?	No, we are considering employer sponsored Vision Plans for Small Business.
2	Can you share estimated current enrollment in the medical coverage broken out by individual and small business?	You can find enrollment information on our website http://hbex.coveredca.com/data-research/ Look in 2015 Active Member Profiles - June 2015 Profile (xlsx)
3	Specific to individual/families market, can the carrier require that the adult/guardian always be enrolled and covered if a dependent is to be covered as well?	This will not be a requirement in this program.
4	Confirm the live date for members to access coverage is January 15, 2016.	We are planning to go live January 15, 2016.
5	Page 3 of California Health Benefit Exchange RFP 2015-15, Estimated Term Dates: January 15, 2016-December 31, 2016 - If vision is not to launch until January 15, 2016, how will Covered CA members know vision is an option? Our current public exchange clients allow for enrollment throughout the year. Would Covered CA be the same considering medical enrollment has closed?	Currently we are planning to allow enrollment year round
6	Std. 213 Standard Agreement: Please confirm that this form is included for illustration purposes only and is not meant to be completed until contract award.	Confirmed. The Std 213 is intended for illustration purposes only.
7	Page 2 Exhibit A, D.4: State-requested revisions to any deliverable shall be incorporated by the Contractor within seven (7) calendar days - Please clarify "deliverable" as it pertains to vision care administration.	An example of a "deliverable" would be a required report. This would also include Vision Plans being offered to Enrollees under this Contract.
8	Page 2 of Exhibit A, B.8: Send a survey created by Covered California to all Enrollees in this program. The survey will be used to determine the overall Enrollee experience with the Vision Plan. The survey shall be sent to enrollees in the last quarter of 2016 with results submitted to Covered California in a mutually-agreed format by January 31, 2017. - Our organization currently deploys our own patient satisfaction surveys to members electronically. This is based on VSP's book of business, which would include Covered CA members using statistically valid sampling methodology. Would this suffice for Covered CA?	If we agree on the survey format in content and questions, bidders may use their own survey, as long as it is a statistically valid sample of Covered California enrollees. We would require bidders to report on the Covered California enrollees separate from the bidder's existing book of business.
9	Page 2 of Exhibit A, B.10: Pay market-level agent commissions at the same rate for products sold via the Exchange link as for all similar "off Exchange" products. - Are these commissions to be paid out of the required 5% of annual policy premium or in addition to? Also, we currently pay our exchanges the commission and the exchange pays their agents. Would this be the same arrangement for Covered CA?	Any commission paid to agents is in addition to Covered California's 5%, not in place of it. Covered California will not be paying agents.
10	Page 2 of Exhibit A, B.11: During the term of this agreement, Contractor shall offer the Vision Plans(s) identified in Exhibit A, Attachment 1 – Vision Plan Design(s). Contractor shall provide the benefits and services as described. - A defined benefit option is not identified in Exhibit A. Is the vendor to identify/quote suggested plans or will a defined plan be identified by Covered CA?	We are asking bidders to submit their proposed vision plans for this program.

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11	Page 3 of Exhibit C, I: Recycling Certification – Please clarify how this requirement would pertain to vision plan administration. What products specifically is Covered CA looking to have certified? VSP has a waste diversion report that we receive from our waste hauler that includes our corporate headquarters campus waste diversion. We also have a Purchasing Policy. This policy provides requirements for purchasing activities at VSP to maximize the purchase of sustainable products, recycled content products and/or products that are recyclable and reduce waste. Would this suffice for Covered CA? If no, please clarify what else Covered CA is looking for?	These are general terms and conditions in our State Contract. We do not anticipate this item being applicable to this program.
12	Attachment 1, Response Checklist - The checklist refers to an “Exhibit F - Privacy Addendum.” This document seems to have been omitted from the initial posting, is Covered CA planning to provide this at a later date?	Exhibit F - Privacy Addendum will not be used for this contract. It was inadvertently left on the checklist.
13	The proposed launch date of January 15 th will miss the vast majority of enrollment and marketing activities. The intent to award date of December 21 st only allows 3 weeks of time for carriers to implement the technical and operational items needed to support this enrollment. With the holidays, as well as the current focus on successful medical open enrollment, we are unlikely to be able to successfully implement/test for a successful go live. We strongly recommend Covered California consider a launch date some time in advance of 2017 Open Enrollment such as summer 2016. As such, we have the following related questions:	
14	1. Is Covered California able to extend the RFP Submission due date?	We will move the RFP submission due date to 12/14/2015. We will also move the Notice of Intent to award date to the week of 12/28/2015.
15	2. Can a carrier submit an application, be awarded and not go live until mid-year 2016?	Yes.
16	The additional 5% commission for Covered California, on top of current broker commissions, will cause the market pricing for these vision plans to be 5% higher than the rest of the market – which will be the same products and commission schedule off exchange. 1. Does Covered California expect or require the “market price” for plans to be the same as off-exchange? Additionally, what is the value proposition to support the same plan sold via Covered California to be priced 5% higher than off-exchange?	We do not currently require off Exchange products to be the same as on Exchange products. We expect Vision Carriers to develop an appropriate value proposition for products sold through Covered California.
17	The link for adult vision products being provided is only available on the consumer site, there shouldn't be any Agent or Broker involved and thus no commission being paid. The minimum requirements state that market-level commissions must be paid (same commission paid for products sold via the link as are paid for products sold off-exchange. (The following two questions are related to this comment)	
18	1. How and whom do we pay the required commission when there shouldn't be an agent engaged through the consumer site?	If no agent is involved in the transaction, we do not expect a commission to be paid to an agent.

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19	2. Does Covered California intend on providing the link through the Agent portal, and if so how will Covered California be sending the Agent ID to Carriers if this is link over and not an 834 enrollment file?	As this program is not integrated with CALHEERS, no 834 transactions or agent information will be provided by Covered California.
20	Is consumer billing required on a monthly basis, could billing be done annually?	Yes, you may bill annually.
21	Does the toll-free number have to be dedicated to just the adult vision product or can it be shared with either the Covered California embedded pediatric vision or our Commercial vision products?	The toll free number can be shared with other vision products.
22	Many of the items in the contract and checklist deviate from existing products and operations, please confirm if Covered California will allow deviances from the contract and checklist and can Covered California provide guidance on those?	We would need more information to answer this question. There is some flexibility on some items; however, many items in our State Contract terms and conditions cannot be revised or removed.
23	Regarding the 5 hard copies of the RFP Response, does the "Master" copy need original / wet signatures or can these be copies?	Only the Master requires wet signatures.
24	Can you please clarify the expectations regarding "Invoice Enrollees" in Exhibit A: Scope of Work, Section B.4. of the Vision RFP. Seems to indicate a recurring bill or invoice (paper?) vs. electronic payment or automated withdrawal.	Paper or electronic invoicing are acceptable. Automated withdrawal is also acceptable.
26	Will contractor be required to complete a Form 700 (Exhibit E, Section I) for this RFP if awarded the business?	Contractor will not be required to complete a Form 700.
27	Should contract changes be submitted via redlines or a listing of deviations or both?	Please use Track Changes within the actual Exhibits.
28	Several sections of the contract apply based on the "contract value" or "value of goods and services." Are these sections "not applicable" since the State is not paying for the services under this agreement?	Correct. Some Standard Terms and Conditions will not be applicable because State and Federal funds are not being expended.