

ADDENDUM NO. 1

Kansas City Area Transportation Authority 1350 E. 17th Street Kansas City, MO 64108

RFP No. 15-7032-28 Employee Assistance Program (EAP) Services Provider

Issue Date: 4/28/15

This Addendum is hereby made a part of the Bidding Documents and Project Documents to the same extent as if it was originally included therein and is intended to modify and/or interpret the bidding documents by additions, deletions, clarifications or corrections. The Offeror shall acknowledge in the proposal the receipt of this Addendum.

BID CLOSING

The closing date for the Request for Proposal remains 2:00 PM on May 4, 2015.

GENERAL INFORMATION

The following is a list of questions by prospective vendors with answers provided by KCATA:

1. Why is this contract out to bid at this time?

ANSWER: Annual Renewal

2. Are there specific areas of enhancement you are seeking at this time?

ANSWER: Better customer service.

3. Are you currently paying a PERM (per member per month) rate? If so, can you share your current PEPM rate?

ANSWER: Based on 809 employees cost per year. Proposers are asked to use 800 employees as the base number for the Cost Proposal. It is expected that KCATA will pay for the actual number of employees at the time of contract anniversary, since the number of employees may vary. KCATA prefers that Proposers provide a Per Employee, Per Year (PEPY) rate. The payments will be based on actual number of employees at the onset of each contract. Our current provider provides a Per Employee Per Year rate – both a rate for employees with BCBS coverage and one for non-BCBS employees. We then pay a "blended" rate – (# of BCBS employees * rate) + (# of non-BCBS * rate) ÷ total # of employees.

\$19.72 PEPY//\$15,953.48 - year one



\$20.11 PEPY//\$16,268.99 - year two \$21.10 PEPY//\$17,069.90 - year three \$21.52 PEPY//\$17,409.68 - year four \$21.93 PEPY//\$17,741.37 - year five

4. How many sessions of counseling are offered under your current contract?

ANSWER: Employees may utilize (6) six EAP visits per year free of charge with an office visit co-payment cost for additional visits.

5. How many management referrals did you experience in the last year?

ANSWER: 7

6. How many chemical dependency screenings did you experience in the last year?

ANSWER: 0

7. Can you provide the total number of EAP cases for the last year? Last two years?

ANSWER: Clients serviced from June 1st, 2014 to February 28th, 2015 was 58.

8. Are on-site Critical Incident Stress Debriefings included in your current contract? If so, how many hours were used in the last year? Last two years?

ANSWER: No

9. What was your program utilization last year? Last two years?

ANSWER: Utilization rate – 7.43% June 1st, 2014 to February 28, 2015. Annualized Utilization Rate for the same time period – 9.91%.

10. Under Section 2 – Scope of Services you state that frequent home mailings and handouts are required. How would you define frequent?

ANSWER: Quarterly

11. Also under Section 2 – Scope of Services you state that you require frequent on-site visits by the EAP. Are you referring to liaison who would be assigned by the EAP to support the program or to the necessity of having on-site counselors?

ANSWERS: The account rep. or liaison.

12. How many hours of on-site orientations and trainings were performed over each of the last three years?

ANSWERS: For 2014 we used 33.40 hours. We are only able to provide 2014 data. This is an area KCATA is looking at improving. The vendor will be required to



attend the vendor fair, wellness fair, Lunch & Learn (3) sessions, and a supervisor annual training.

13. Are you requiring other typical EAP services such as access to an information website, life & health coaching, eldercare and childcare assistance?

ANSWER: Yes, also financial, legal, anxiety/depression/stress, marital/family, psychological/emotional, work related, anger, trauma related, alcohol/drug, childhood trauma, education, grief/loss, medical, relationship, and addition.

14. Clinical Services point "e" concerning telephone and face-to-face follow-up – are you referring to mandatory management referrals or all employees who request counseling. EARP's are brief assessment and referral by design. It is not typical to provide follow-up once an employee or eligible dependent completes their approved EAP sessions unless they have been mandated by their employer.

Could you please clarify what you are looking for in an Alcohol and Drug Program?

ANSWER: Training, Management Referrals, Fitness for Duty, and Critical Incident Stress.

15. Hospice Counseling – are you looking for grief counseling or something specially related to a hospice setting?

ANSWER: Both

16. It appears from Attachment D that you are expecting to pay Fee-for-Service plus administrative overhead. However, on page 19 of the RFP under Cost/Price Proposal paragraph A, it states that KCATA wishes to award a fixed price contract. Please clarify.

ANSWER: Attachment A is the out of pocket cost employees payt if they are on a Blue Cross HOM or PPO provider after they have exceeded the six free visits. Attachment D is what KCATA would be billed.

17. Our rates are offered as 2 year, with an optional 1 year extension. Is this acceptable?

ANSWER: Yes

18. Please confirm we are quoting the EAP product for a population of 800.

ANSWER: Proposers are asked to use 800 employees as the base number for the Cost Proposal. It is expected that KCATA will pay for the actual number of employees at the time of contract anniversary, since the number of employees may vary.



19. We typically price on an all included per employee per month basis. Would this pricing basis be acceptable (as opposed to an hourly service rate)?

ANSWER: KCATA prefers that Proposers provide a Per Employee, Per Year (PEPY) rate. The payments will be based on actual number of employees at the onset of each contract year.

20. If we can provide a PEPM rate, how many face-to-face session visits would you like included in the quote?

ANSWER: Please reference earlier reply.

21. Do you have utilization information? If so, can you please provide both EAP and work/life utilization.

ANSWER: See attached document entitled, EAP Utilization Report – Dated 3-10-15.

22. Who is your current EAP carrier?

ANSWER: New Directions

23. What are your current EAP rates?

ANSWER: KCATA's current contractor provides a discount for employees that are enrolled in Blue Cross Blue Shield. KCATA pays a "blended PEPY rate" that is based on a the following: PEPY cost for the number of employees enrolled in BCBS <u>PLUS</u> (+) PEPY cost for number of employees <u>not</u> enrolled in BCBS divided by the Total Number of Employees. The blended rate for the current term (2014/2015) is \$20.03 PEPY. KCATA pays the contractor in quarterly installments.

24. Please provide your most recent utilization report.

ANSWER: See attached document entitled, EAP Utilization Report – Dated 3-10-15.

25. What is your current EAP provider's roll regarding SAP evaluations as required by DOT.

ANSWER: None, per our union contract we have to use a different source.

26. Please provide the number of fitness for duty evaluations completed by your current EAP in the last three years, by year.

ANSWER: 1 in the last 3 years.

27. Please provide the number of quarterly onsite educational programs provided by EAP in the last three years, by year.



ANSWER: Currently, our EAP only provides training for the Operations team which is to meet the DOE requirements and that total is (6) hours of training every other year.

28. Please verify if requested posters be electronic or printed.

ANSWER: Both. Only (175) of the (800) employees have computer access.

29. Are there any requirements for critical incident response by the EAP?

ANSWER: We have only had (1) incident where KCATA asked for a response to a critical incident. At this time, there are no specific requirements.

30. Page 8 of 62 of the RFP requests on-site orientation training for managers and supervisors. Please provide the number of orientations provided by EAP in the last three years, by year.

ANSWER: Our current EAP has only provided the Operations training for the DOT requirements every other year for a total of (6) hours.

The Human Resources Dept. would like for the new EAP to enhance that training to include availability to attend the benefit fair (October) and health fair (June). The benefit fair and health fair are e3ach (3) days of (8) hours each day for a total of (48) hours. We would also like for the EAP to do a Lunch & Learn session with our employees and a training session with our supervisors.

31. Is the actual group effective date 6/1/15?

ANSWER: Yes



RECEIPT OF ADDENDA

RFP No. 15-7032-28 Employee Assistance Program (EAP) Services Provider

Offerors shall return this **RECEIPT OF ADDENDA** form when submitting your bid. The form shall be signed and dated by an authorized representative of the firm. Failure to submit this form may deem the Offeror non-responsive.

We hereby acknowledge that the Addenda noted below have been received and all information has been incorporated into the RFP as required.

Addendum # 1 Dated	Date Received
Company Name:	
Address:	
City/State/Zip Code:	
Telephone:	Fax:
Printed Name:	
Authorized Signature:	
E-mail Address:	