

MEMORANDUM

AGENDA ITEM #III.F

DATE: FEBRUARY 3, 2014

TO: COUNCIL MEMBERS

FROM: STAFF

SUBJECT: REQUEST FOR PROPOSAL FOR PRIMARY HEALTH INSURANCE BROKER

Background

Oceans Insurance Group provides Insurance Brokerage Services for Council staff and is currently under contract with CHC of Florida (Coventry Healthcare "CHC") until December 31, 2014. The Council has had a relationship with Oceans Insurance Group since October 2011. In order to have transparency as to the Council's purchasing of goods and services, the Councilmembers requested a competitive selection process be completed for the Council's Health Insurance Brokerage Services. Therefore, staff recently completed a Request for Proposal process.

Request for Proposal Specifics

Date of Posting: the week of 12/9 to 12/13/2013.

Date for Response: December 30, 2013.

Media Used to Post: Sun-Sentinel and the Miami Herald distributed in Monroe, Miami-Dade and Broward counties in English and Spanish.

Request for Proposal is attached.

RFP Results

One response received on 12.30.13 at 1:40PM. McKinley Financial Services dba McKinley Insurance Services, Inc. (McKinley) 545 North Andrews Avenue Fort Lauderdale, FL 33301

McKinley has been in business since 1996. They service 50 clients. Their account managers have over 25 years combined experience in the health insurance market place. They report being the broker for the following public entities.

Orlando Housing Authority City of Lauderdale Lakes City of South Bay

References checked were favorable.

Recommendation

Authorize staff to take the necessary actions needed to have McKinley Insurance Services, Inc. as registered health insurance broker for the Council's contract with CHC of Florida.

Rec'd 12/30/13

SOUTH FLORIDA REGIONAL PLANNING COUNCIL (SFRPC) REQUEST FOR PROPOSAL (RFP)

FOR

PRIMARY HEALTH INSURANCE BROKER

Invitation Date: December 6, 2013 Proposal due Date and Time: December 30, 2013 - 5:00pm

> SFRPC 3440 Hollywood Boulevard, #140 Hollywood, FL 33021

REQUEST FOR PROPOSAL For Primary Health Insurance Broker For

South Florida Regional Planning Council (SFRPC) Hollywood, Florida

INTRODUCTION

The SFRPC is issuing this Request for Proposals (RFP) for employee primary health insurance brokerage. This RFP does not indicate in any way that we are dissatisfied with the services plans and/or products of our current provider. Instead, we are ensuring that our employees are continually offered the best benefit services and products available. Currently, we are not requesting specific rates for our benefits. We are in search of a broker/consultant with evidence that they are able to provide the needed benefit administration for the SFRPC and its employees. It is our intention not to release census data or claims history until after the benefit administrator has been chosen.

The SFRPC insures approximately 12 full-time employees. For the purpose of this RFP, "Primary Health Insurance" includes health insurance, a dental plan and life insurance for full-time employees.

There is no expressed or implied obligation for the Council to reimburse responding companies for any expenses incurred in preparing or presenting proposals in response to this request.

To be considered, two (2) copies of a sealed proposal must be received by Edward T. McGann, Director of Finance and Budget by 5:00 p.m. on December 30, 2013 to the South Florida Regional Planning Council, 3440 Hollywood Boulevard, Suite 140, Hollywood, FL 33021. Please put on the outside of your envelope "Health Insurance Broker", and primary contact person. Proposals received after the 5:00 p.m. deadline will be returned unopened to the sender. The SFRPC is under no obligation to bid these services but does so in an effort to obtain quality, competitive services. The SFRPC reserves the right to reject any or all proposals submitted, or to accept a higher proposal

if it is felt that the higher proposal provides better services or products for our employees or Council.

During the evaluation process, the SFRPC reserves the right, where it may serve the Council's best interest, to request additional information or clarification from those proposing, or to allow corrections of errors or omissions. At the discretion of the Council, firms submitting proposals may be requested to make oral presentations as part of the evaluation process.

EVALUATION STANDARDS

Proposals will be evaluated based on the relevant experience of the submitting broker, the model plan design, enrollment and communication capabilities, service, cost to the employer and/or employee, services available to the employees and financial stability of the organization. Proposals should include specifications of the RFP and a completed Questionnaire with attachments as needed to complete the Questionnaire.

Thank you and your firm for reviewing and considering responding to our RFP for a Primary Health Insurance Broker for the SFRPC.

Sincerely,

Edward T. McGann Director of Finance and Budget South Florida Regional Planning Council

ETM/kc

Questionnaire

Primary Health Insurance Broker

For

SFRPC

Please complete and return this Questionnaire with your proposal. If additional room is needed to answer a question or questions, you may attach a page or pages to this form. Please indicate on the Questionnaire that the question is answered on an attached page. Also, please designate any answer on an attached page with the same number as the question on the Questionnaire.

1.	Name of Firm(s) submitting Proposal:
	McKinley Financial Services dba McKinley Insurance Services, Inc.
2.	Names and titles of person(s) submitting Proposal and the representative(s) who will be responsible for this account:
	Ralph Campbell, President & CEO
	Carmen Miller, Vice President Client Services
3.	Address of firm submitting Proposal:
	545 North Andrews Ave
	Fort Lauderdale, FL 33301
4.	Phone number(s) of firm submitting Proposal:
	954-938-2685 (O)
	954-938-2695 (Fax)

5.	Contact person(s) for firm:		
	Telephone number(s) for contact person	on: Carmen Miller	
	954-938-2685 (O)		
2	954-938-2063 (C) 954-224-2063 (C)		
	701 221 2000 (C)		
6.	What is the total number of clients to brokerage? 50	o which you administer	
7.	Please provide three references, pref with at least 10 full-time employees wi	-	
	Municipality/County	Contact	Phone #
	a. Orlando Housing Authority	Janet Bridges 407	7-895-3300 X2010
	bCity of Lauderdale Lakes	D'Andrea Giddens-Jon	es 954-535-2710
	cCity of South Bay	Vicky del Bosquez 561	-996-6751
8.	Describe in detail your communication	and enrollment process.	
COL	a. Who will be doing the enrollments? Steve Gude and Lisa Davis, And Ambined experience in the industry.	ccount Executives with	
<u>CO1</u>	nomed experience in the industry.		
	b. What is their experience in bene municipalities/counties?	efit communication and	enrollment with
	Both are proficient in preparation	on of Benefit Guides, o	conducting open
eni	rollment sessions utilizing both on-line	and paper enrollment pro	ocesses. They are
	perienced in all lines of employee be		4 9
que	estions directly as well as working with	carriers to ensure success	tul enrollments
9.	Do you provide a personalized interact	tive website? YesX_	; No
10.	What reports are sent to the employer the report that your firm provides emp		enclose a copy of
	Annual benefit/rate comparison		
11.	Is your firm in compliance with al Department of Insurance? Yes	l guidelines established	by the Florida

12. Describe your experience in advising clients on the requirements of ADA, ERISA, FMLA and PP ACA?

McKinley's agents maintain their knowledge of legislative and regulatory changes through seminars, newsletters from subject matter experts and research of Federal and State output. The information is disseminated to employer groups thru seminars, on-site training and a monthly Legislative Update.

- 13. Provide a list of insurance carriers you use to renew existing clients and to enroll new clients. McKinley works with all insurance carriers licensed in Florida, including among others Humana, Aetna/Coventry, United Health Care, and CIGNA.
- 14. List of insurance carriers with whom you have ceased your working relationship (or carrier ceased with you) within the past three (3) years, and why you/they did so. Include the length of your working relationship.

None

15. Provide examples/explanations of your firm's value added approaches and services that you feel distinguish you from other brokers/agents.

The McKinley team works closely with each client to find the most appropriate mix of insurance products at the best value. We create added value by fostering long-term relationships and promoting the broadest possible access to insurance products. Our goal is to ensure that our clients attain exactly what they need versus simply selling insurance. This goal is accomplished, in part, by recruiting and maintaining superior talent. In addition we assign dedicated representatives to each account and they are available 24/7. We work as an extension of the client's Human Resource Department and ease their workflow by helping them manage employee benefits and service the employees. In some cases, it may be necessary to make benefit changes or even carrier changes in order to achieve the desired goal. Regardless, education is imperative, not only for the HR professional, but also for the staff. Open Enrollment and midyear education makes the difference as to how benefits are utilized and accessed.

I certify that I have read this Request for Proposals and have answered all questions on this Questionnaire.

I certify that our firm has not and will not contact SFRPC Council Members to gain favor for our firm. If SFRPC Council Members are contacted, your bid will be rejected.

I certify that our firm will honor all commitments made on this Questionnaire.

I certify that our firm and all representatives are licensed and will be licensed in Florida to provide all services offered during the life of this contract.

Firm Name

Print Name of Representative

Signature of Representative

Title of Representative

Date of Signature

SAMPLE BENEFIT COMPARISON

		000	UNITED HEALTHCARE			BC	BCBS	- X
UNITED / BCBS		CURRENT	REN	RENEWAL	OPTIONI	UNOLLAO	ITAO	OPTION III
	HMO	POS OPTION	HMO	POS OA OPTION	FHCP-S02	FHCP-S03	BLUEOPTIONS 5464	BLUEOPTIONS BLUEOPTIONS 5464
IN-NETWORK						0		200
DEDUCTIBLE	\$250/\$500	N/A	\$250/\$500	N/A	0\$/0\$	80/20	\$2,000/\$4,000	\$500/\$1,000
MEMBER COINSURANCE	%0	10%	%0	10%	%0	10%	%0	20%
OUT OF POCKET MAXIMUM	\$250/\$500	\$2,500/\$5,000	\$250/\$500	\$2,500/\$5,000	\$2,000/\$4,000	\$3,000/\$6,000	\$2,000/\$6,000	\$3,500/\$7,000
PCP / SPC	\$15/\$15	\$25/\$50	\$15/\$15	\$25/\$50	\$20/\$35	\$20/\$35	230/260	\$15/\$30
IP HOSPITAL	\$0 aft Ded	10% aft Ded	\$0 aft ded	10% aft ded	\$250/Day x 5	10% aft Ded	SO aft Ded	20% aft Ded
OP SURGERY	\$0 aft Ded	10% aft Ded	S0 aft ded	10% aft ded	\$100	10% aft Ded	So aft Ded	20% aft Ded
OP LAB & XRAY (Physician Ofc / Facility)	\$0	20	80	20	08	10% aft Ded	\$50	\$50
SCANS (MRI, PET, CAT, etc.)	\$0 aft ded	10% aft Ded	S0 aft ded	10% aft Ded	0%	10% aft Ded	\$250	\$250
URGENT CARE	\$35	\$75	\$35	575	260	10% aft Ded	575	\$75
EMERGENCY	\$100	\$200	\$100	Yogotext	bro S75	10% aft Ded	\$250	\$250
PRESCRIPTION	\$10/\$30/\$50	\$10/\$30/\$50	\$10/\$30/\$50	\$10/530/\$50	\$4/\$10/\$30/\$55	\$4/\$10/\$30/\$55	\$10/530/550	\$10/\$30/\$50
OUT-OF-NETWORK								
DEDUCTIBLE	NA	S500/S1.500	N/A	\$500/S1 500	\$500/\$1 000	\$1,000/\$7,000	\$4,000/\$12,000	\$4 000/69 000
COINSURANCE (Insurance pays)	NA	70%	N/A	70%	50%	80%	50%	50%
OUT OF POCKET MAXIMUM	NA	N/A	N/A	NA	\$6.000/\$12.000	\$6,000/512,000	\$6,000/\$12,000	\$5.000/\$10.000
Enrollment/Kates								
Employee Only 28 0	\$733.64	26069\$	国 日本の 山		2665 36	12 (393	000000	00 000
Employee + Spouse 5 1	\$1,570.00	\$1,478.68			\$1.290.80	\$1.776.08	3039.76	2050.90
Employee + Children 6 2	\$1,463.63	\$1,378.48	NE TOWN IN	TO THE PERSON NAMED IN	\$1.290.80	\$1,276.08	\$1.239.44	\$1.186.09
Correct Fornillment	\$2,213.41	52,084.67		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$1.590.21	\$1.572.08	\$2.093.21	\$2,003.10
	\$E4 001	410 400						
Annual Premium	\$658.572	\$125.876			\$45,551	\$45,031	\$49,466	28,687
Combined Monthly Premium	\$65,3	\$65,370.63	10 S - 11 S - 11 S		\$45,550.56	\$45.031.08	3393,389	\$116,249
Combined Annual Premium	\$784,	\$784,447.56	100 m		\$546,606.72	\$540,372.96	\$709,837.80	37.80
% Change from Current				M. Solos a	-30.32%	-31.11%	951%	25
\$ Change from Current					(4537 841)	(\$244 675)	04244510	100