

DEPARTMENTAL INPUT CONTRACT/PROJECT MEASURE ANALYSIS AND RECOMMENDATION

<input checked="" type="checkbox"/> <u>New contract</u>	<input type="checkbox"/> <u>OTR</u>	<input type="checkbox"/> <u>CO</u>	<input type="checkbox"/> <u>SS</u>	<input type="checkbox"/> <u>BW</u>	<input type="checkbox"/> <u>Emergency</u>	Previous Contract/Project No.: RFP-00721 and RFP-00834
<input type="checkbox"/> <u>Re-Bid</u>	<input type="checkbox"/> <u>Other</u>					

LIVING WAGE APPLIES: ___ YES ___ ☒ NO

Requisition/Project No: RFP-00710

TERM OF CONTRACT: Five (5) Years

Requisition/Project Title: Employee Life, AD&D and PBA Insurance Program

Description: The County is soliciting proposals from qualified and experienced firms/carriers to provide Group Term Life (Basic and Optional), Accidental Death and Dismemberment and Police Benevolent Association Insurance to the County employees, retirees and other municipalities/agencies.

User Department: HR

Issuing Department: ISD / PMS

Estimated Cost: \$75,020,000

Contact Person: Sharon Donnelly; 305-375-3020; Sharon.donnelly@miamidade.gov

Funding Source: Self Insurance Trust Fund

ANALYSIS

		Commodity/Service No: 953 – All Insurance; 953861 Risk Insurance SIC:					
		Trade/Commodity/Service Opportunities					
		Contract/Project History of Previous Purchases For Previous Three (3) Years Check Here if this is a New Contract/Purchase with no Previous History					
		EXISTING		2ND YEAR		3RD YEAR	
Contractors:	Metropolitan Life Insurance Co.	Aon Consulting, Inc/ Hartford Insurance	Metropolitan Life Insurance Co.	Aon Consulting, Inc/ Hartford Insurance	Metropolitan Life Insurance Co.	Aon Consulting, Inc/ Hartford Insurance	
Small Business Enterprise:	N/A	N/A	N/A	N/A	N/A	N/A	
Contract Value:	\$12,200,000	\$400,000	\$12,200,000	\$400,000	\$12,200,000	\$400,000	
		Comments:					
		Continued on another page (s): ___ Yes ___ <input checked="" type="checkbox"/> No					

RECOMMENDATIONS

SBE	Set-Aside	Sub-Contractor Goal	Bid Preference	Selection Factor
		%		
		%		
		%		
		%		

Basis of Recommendation:

Signed: Sharon Donnelly

Date to DBD: 2/13/2018

Date Returned to DPM: _____



**REQUEST FOR PROPOSALS (RFP) No. 00710
FOR
EMPLOYEE LIFE, ACCIDENTAL DEATH & DISMEMBERMENT
AND POLICE BENEVOLENT ASSOCIATION INSURANCE**

PRE-PROPOSAL CONFERENCE TO BE HELD:

February TBD, 2018 at 3:00 PM (EST)
111 NW 1st Street, 18th Floor, Conf. Rm. TBD, Miami, Florida

ISSUED BY MIAMI-DADE COUNTY:

Internal Services Department, Procurement Management Services Division
for
Human Resource Department and Risk Management Division

COUNTY CONTACT FOR THIS SOLICITATION:

Sharon Donnelly, Procurement Contracting Officer
111 NW 1st Street, Suite 1300, Miami, Florida 33128
Telephone: (305) 375-3020
E-mail: sharon.donnelly@miamidade.gov

PROPOSAL RESPONSES DUE:

March TBD, 2018

IT IS THE POLICY OF MIAMI-DADE COUNTY THAT ALL ELECTED AND APPOINTED COUNTY OFFICIALS AND COUNTY EMPLOYEES SHALL ADHERE TO THE PUBLIC SERVICE HONOR CODE (HONOR CODE). THE HONOR CODE CONSISTS OF MINIMUM STANDARDS REGARDING THE RESPONSIBILITIES OF ALL PUBLIC SERVANTS IN THE COUNTY. VIOLATION OF ANY OF THE MANDATORY STANDARDS MAY RESULT IN ENFORCEMENT ACTION. (SEE IMPLEMENTING ORDER 7-7)

Electronic proposal responses to this RFP are to be submitted through a secure mailbox at BidSync until the date and time as indicated in this document. It is the sole responsibility of the Proposer to ensure its proposal reaches BidSync before the Solicitation closing date and time. There is no cost to the Proposer to submit a proposal in response to a Miami-Dade County solicitation via BidSync. Electronic proposal submissions may require the uploading of electronic attachments. The submission of attachments containing embedded documents or proprietary file extensions is prohibited. All documents should be attached as separate files. All proposals received and time stamped through the County's third party partner, BidSync, prior to the proposal submittal deadline shall be accepted as timely submitted. The circumstances surrounding all proposals received and time stamped after the proposal submittal deadline will be evaluated by the procuring department in consultation with the County Attorney's Office to determine whether the proposal will be accepted as timely. Proposals will be opened promptly at the time and date specified. The responsibility for submitting a proposal on or before the stated time and date is solely and strictly the responsibility of the Proposer. The County will in no way be responsible for delays caused by technical difficulty or caused by any other occurrence. All expenses involved with the preparation and submission of proposals to the County, or any work performed in connection therewith, shall be borne by the Proposer(s).

A Proposer may submit a modified proposal to replace all or any portion of a previously submitted proposal up until the proposal due date. The County will only consider the latest version of the proposal. For competitive bidding opportunities available, please visit the County's Internal Services Department website at: <http://www.miamidade.gov/procurement/>.

Requests for additional information or inquiries must be made in writing and submitted using the question/answer feature provided by BidSync at www.bidsync.com. The County will issue responses to inquiries and any changes to this Solicitation it deems necessary in written addenda issued prior to the proposal due date (**see addendum section of BidSync Site**). Proposers who obtain copies of this Solicitation from sources other than through BidSync risk the possibility of not receiving addenda and are solely responsible for those risks.

2.0 SCOPE OF SERVICES

2.1 Background

Miami-Dade County, hereinafter referred to as the County, employs over 27,000 individuals throughout South Florida. The County offers to the eligible employees and select municipalities various fully insured programs ("Plans"), which include Basic Life/Accidental Death & Dismemberment ("Basic Life"), Optional Life, Supplemental Accidental Death & Dismemberment Plan ("Supplemental AD&D"), and Police Benevolent Association ("PBA") Survivors' Benefit Insurance Plan. As represented by the Miami-Dade Human Resources Department and Internal Services Department - Risk Management Division, it is the County's intent of this solicitation to obtain proposals and procure the services of an insurance carrier to establish replacement programs for these four (4) Plans. These Plans shall substantially match the County's existing Plan designs and benefits provision language, and include any additional services as requested herein.

The County's current Plans in brief:

Plan Description	Plan Provider	Plan Payment	Number of Current Participants
Basic Life/Accidental Death & Dismemberment	Metropolitan Life Insurance Company (Met Life)	<ul style="list-style-type: none"> ✓ Basic Life is non-contributory for employees. The County pays the full cost. ✓ Basic Life is fully contributory for all retirees. The County does not contribute towards the cost for retiree basic life coverage. ✓ Premiums paid on a pre-paid monthly basis. 	26,582
Optional Life*	Metropolitan Life Insurance Company (Met Life)	<ul style="list-style-type: none"> ✓ Optional Life is fully contributory for employees. The employee pays 100% of cost. ✓ Optional Life is not available to retirees. At retirement, employees are eligible to purchase a conversion policy. ✓ Available to other agencies ✓ Premiums paid on a bi-weekly basis 	16,949
Supplemental Accidental Death and Dismemberment Insurance	Aon Consulting, Inc./ The Hartford Company	<ul style="list-style-type: none"> ✓ AD&D is fully contributory. The employee pays 100% of cost. ✓ AD&D is not available to retirees ✓ AD&D is extended to other local municipalities (included in the figures) ✓ Premiums paid on an annual basis 	31,315
Police Benevolent Association Survivor's Benefit Insurance	Aon Consulting, Inc./The Hartford Company	<ul style="list-style-type: none"> ✓ PBA plan is contributory. The County matches contribution for Sworn Bargaining Unit employees up to \$46 per employee. Non-sworn Bargaining Unit employees pay the full cost. ✓ Available to active members of the Miami-Dade County PBA Bargaining Unit and their supervisors. ✓ Premiums paid on an annual basis. 	5,036

* - Note: The new plan for Optional Life will include AD&D and offer coverage for employee's eligible dependents.

2.2 Minimum Qualification Requirement

The minimum qualification requirements for this Solicitation are:

- 2.2.1 Proposer must be a licensed Life Insurance Company in the State of Florida, Office of Insurance Regulation, at the time of the proposal due date and throughout the contract term.

2.3 Preferred Qualification Requirement

The preferred qualification requirements for this Solicitation are:

- 2.3.1 Proposer shall provide proof of its minimum A- financial from A. M. Best Company, and a "Classification of VII" or higher, as the Proposer's most recent rating. This is a continuing requisite throughout the contract award and term of the agreement.
- 2.3.2 Proposer shall have a minimum of five (5) years of experience in the State of Florida administering claims and providing similar services to those listed in this Solicitation, for governmental groups of 10,000 employees or greater.

2.4 Plan Requirements and Services to be Provided**A. PLAN REQUIREMENTS****2.4.1 General Information**

- a. State of issue for the Plans is Florida.
- b. The Plans effective date shall be January 1, 2019.
- c. Enrollment shall be on a one time annual basis, and upon new employment. The County may, at its sole discretion, opt to change enrollment periods, as agreed upon in writing with Proposer.
- d. The Plans shall be funded on a fully insured basis.
- e. Unless otherwise noted, all benefit eligible employees are eligible for insurance benefits the first of the month following or coincident to 60 days of active employment (if actively at work). Refer to current Employee Benefits guide for eligibility requirements at <http://www.miamidade.gov/humanresources/library/mdc-county-employee-benefits.pdf>
- f. Key executives, as identified by the County, are eligible for coverage as of their hire date.
- g. The Proposer is to retain original beneficiary designations (online and/or hardcopies) and submit photocopies with claims filed.
- h. The Plans shall provide for a portability feature.
- i. Retirees, terminated employees and employee's eligible dependents may purchase a conversion policy directly from the selected Proposer within 30 days after notification.
- j. There shall be no minimum participation requirements as to the number of employees that will be participating in any of the Plans.
- k. Plans must provide coverage levels at least equal to or greater than the current coverage level. Reference specific Plans for details.
- l. Cancellation provisions of the policy shall give no less than ninety (90) days written notice to the named insured in the event of cancellation by the company except for nonpayment of premiums.
- m. Insured shall not be deemed to have received notice of occurrence nor be required to report it to the Insurance Company until Miami-Dade County's Program Manager has been made aware of the occurrence.

2.4.2 Basic Life Insurance Plan

- a. Basic Life is non-contributory basis for employees. The County pays the full cost.
- b. Key executives, as identified by the County, are eligible for coverage as of their hire date.
- c. All existing benefit amounts in-force are guaranteed issue. The value of the basic life coverage is one times base annual salary, with maximum cap of \$1,000,000.
- d. AD&D coverage is provided with the basic coverage, for up to an additional one times base annual salary.
- e. Basic Life is contributory for all retirees. The County does not contribute towards the cost for retiree basic life coverage.
- f. Retirees under age 65 may maintain the same level Basic Life coverage as active employees, to age 65 at the same group rates.
- g. Retirees age 65 and over shall have the option of either a \$15,000 or \$20,000 Basic Life insurance policy and a conversion option. Retirees over age 65 who retired prior to 2007 had the option of \$5,000 or \$10,000.
- h. County Commissioners (presently a total of 13), regardless of salary, are eligible for \$100,000 basic life coverage. Commissioners, at retirement, may elect to continue full coverage without age limitation providing timely premium payments are made.
- i. Any minimum requirements for Basic Life shall be waived.
- j. The County will remit premiums to the selected Proposer on a prepaid monthly basis for Basic Life after the County either deducts the employee(s) contributions through its payroll process or receives payment from retirees or employees on an

unpaid leave of absence. The County retains the right, at all times, to self-bill. The County will remit premium payments based on its records.

- k. Pursuant to Florida State Statute 627.575, employees who become totally disabled while insured, and at time of discontinuance of policy, shall have a premium waiver extension, extended death benefit for a period of at least 12 months in the event of total disability, or payment of income for a specified period during total disability. Total disability must start before employee attains the age of 60, while they are insured, for extension of eligible insurance.
- l. The Plans cover employees of Miami-Dade County, retirees (Medicare and Non-Medicare eligible), Industrial Development Authority, Housing Finance Authority, International Association of Firefighters Local 1403 ("IAFF"), police officers, fire fighters, and approximately 139 judges. Refer to **Attachment A** for the Miami-Dade County Employee Census Data listing of the eligible employees.

2.4.3 Optional Life Insurance Plan

- a. The Optional Life is fully contributory for employees. The employee pays the full cost.
- b. AD&D coverage is to be provided in Optional Life coverage. Accidental Death claims are payable at match of the selected Optional Life amount; Accidental Dismemberment benefits are payable at a percentage of the full amount and based on the Group Life Insurance Summary Plan Description (Attachment xxxx), Page xx, Letter xxx for the listing of covered losses and benefit amounts..
- c. Employees may purchase Optional Life coverage to provide an additional one (1), two (2), three (3), four (4) or five (5) times their base annual salary to a maximum of \$2,000,000. Coverage for one (1), two (2) and three (3) times their base annual salary is acceptable without evidence of insurability. Coverage for four (4) and five (5) times base annual salary is subject to evidence of insurability.
- d. County Commissioners (presently a total of 13), regardless of salary, shall have the option to elect an optional life volume of \$100,000 in coverage.
- e. Coverage is offered to benefit eligible employee's spouse in the amount of \$10,000 and for eligible children in the amount of \$5,000. Refer to Employee Benefit guide for dependent eligibility information. The employee must be enrolled in Optional Life coverage in order to select coverage for their dependents.
- f. The Optional Life is not available to retirees. At retirement, employees are eligible to purchase a whole life conversion policy.
- g. The County will remit premiums to the selected Proposer on a prepaid bi-weekly, in arrears, for Optional Life after the County either deducts the employee(s) contributions through its payroll process or receives payment from retirees or employees on an unpaid leave of absence. The County retains the right, at all times, to self-bill. The County will remit premium payments based on its records.
- h. The Optional Life premiums shall be guaranteed regardless of enrollment or percentage participation.
- i. Any minimum requirements for Optional Life shall be waived.
- j. All new hires are guaranteed issued coverage up to 3x salary.
- k. All current employees are guaranteed issued coverage up to 3x salary on initial rollout of plan.

Reference **Attachment B** for Miami-Dade County's current Life Insurance Certificate of Coverage/Policy and **Attachment C** for Miami-Dade County's Premium, Lives and Volume Report (2014-2017), Death Claims Paid (2014-2017 and Monthly Life Insurance Rates for historical purposes).

2.4.4 Supplemental Accidental Death and Dismemberment (AD&D) Insurance Plan

- a. The Program shall be for the benefits specified by Florida Statutes Section 112.18, 112.181, 112.19 and 112.191 for police officers and firefighters. Policy shall be endorsed to show conformance with these statutes. Changes in Florida Statutes that may affect coverage shall be incorporated into the policy.
- b. The Board of County Commissioners (Board) has authorized extension of the AD&D coverage to all benefit eligible Miami-Dade County employees, including Board members. Participating municipalities (see **Attachment D**) may elect to cover all full-time employees as well.
- c. Current plan did not include separate AD&D insurance to regular employees, but will be offered in this solicitation for same amounts as offered in Optional Life Plan.
- d. Premiums shall be paid on an annual basis, based on enrollment at policy inception and each policy anniversary date thereafter, which may also include other municipalities. The County will not be required to report additions and deletions throughout the annual policy period.
- e. Benefits shall be provided for accidental injuries resulting in loss of life, loss of two (2) or more members, or irrevocable loss of sight in both eyes. One half of the benefit shall be paid for accidental injuries resulting in loss of one (1) member or loss

- of sight in one (1) eye. One (1) quarter of the principal sum shall be paid for loss of thumb and index finger of either hand.
- f. Coverage shall be provided for any insured person while flying as a member of the crew or a passenger on any aircraft while a) working for the policyholder, and b) on a trip authorized by the policyholder.
 - g. Any minimum requirements for Supplemental AD&D shall be waived.
 - h. All current employees are guaranteed up to \$25K for AD&D upon initial enrollment.

<u>Limits to be Provided:</u>	<u>AD&D Benefit</u>	<u>Fresh Pursuit</u>	<u>Unlawful & Intentional</u>
I. Police	\$65,576*	\$65,576*	\$197,678*
II. Firefighters	\$65,576*	\$65,576*	\$197,678*
III. Clerical, Administrative Managerial & Supervisory	\$25,000		
IV. All Others	\$25,000		

*Benefit Levels as of July 2017. Benefits increase July 1st of each year in accordance with Florida Statutes. No change in rates will be made during the policy period. Reference **Attachment E** for the Accidental Death & Dismemberment Program (Current Enrollment), **Attachment F** for the Accidental Death & Dismemberment Program (5 Year Loss History) reports, and **Attachment G** for the current Accidental Death & Dismemberment Plan Design.

2.4.5 **PBA Survivors Benefit Insurance Plan**

- a. Qualifying members for PBA are eligibility for coverage immediately upon enrollment; no waiting period required.
- b. Coverage shall be for AD&D on a twenty-four (24) hour basis for eligible Miami-Dade County employees (members of the PBA Bargaining Unit and their supervisors). This group includes, but is not limited to police officers, correctional officers, communications operators, other employees and their supervisors.
- c. The County currently matches the contribution for Sworn Bargaining Unit employees up to \$46 per employee as agreed upon in Article 24.A of the PBA Collective Bargaining Agreement. Non-sworn Bargaining Unit employees that select this benefit make the entire contribution per Article 24.B.
- d. Premiums shall be paid on an annual basis based on enrollment at policy inception and each policy anniversary date thereafter. The County, on a pro-rated basis, shall pay additional premiums for new enrollees added during the policy period. Retiring or terminated employees shall remain covered until the next policy anniversary date.
- e. Enrollees, at their option, will be allowed to select a benefit level (principal sum) of either \$50,000 or \$100,000. This principal sum shall be payable for accidental injuries resulting in loss of life, loss of two (2) or more members, or irrevocable loss of sight in both eyes. One half of the benefit shall be paid for accidental injuries resulting in loss of one (1) member or loss of sight in one (1) eye. One quarter of the principal sum shall be paid for loss of thumb and index finger of either hand.
- g. Coverage shall be provided for any insured person while flying as a member of the crew or a passenger on any aircraft while a) working for the policyholder, and b) on a trip authorized by the policyholder.
- h. Coverage shall include riding as a passenger in any transport aircraft operated by the Military Airlift Command (MAC) or any civilian aircraft, provided that such aircraft: a) Is operated by a properly certified pilot; b) Has a current and valid unrestricted airworthiness certificate; c) Is not being used for, or in connection with, any test or experimental purpose, unless previously consented to in writing by the carrier, as applicable.
- i. Coverage shall be provided in accordance with conditions described in Florida Statutes 112.18 and 112.181.

Reference **Attachment H** for Police Benevolent Association Survivor's Benefit Program (5 Year Loss History)

B. REQUIRED SERVICES

The selected Proposer shall:

1. Administer the Plans in accordance with this solicitation and Certificate of Insurance/Policy (Attachment B-LIFE and Attachment X-PBA/AD&D), unless different provisions are subsequently agreed to in writing by the County.
2. Provide binders, policies and endorsements as required in the timetable specified by the County's Program Manager.
3. Provide extensive review of binders and policies, including verification of conformity of specifications required by the County.
4. Recommend coverage changes and improvements to provide the highest level of coverage at the least possible cost to the County.
5. Notify the Program's County Manager of any changes in the financial stability or ratings of the insurance carrier. Make recommendations should ratings change during the policy term.

6. Oversee and coordinate all relevant services performed by insurance carrier/underwriters or any service agencies arranged for the Plans.
7. Assist the County's Program Manager, as necessary, in all facets of claims handling to the resolution of any claims regardless of policy period.
8. On a quarterly basis, by the 5th day of the preceding month, provide the County with a listing of all claims including such information as date and type of loss, amounts reserved and paid, etc.
9. Provide as needed, advice and consultation during County working hours, and as requested by the County's Program Manager.
10. Attend meetings with as requested by the County's Program Manager.
11. Perform administrative and clerical services relative to account management including, but not limited to, certificate issuance and policy changes.
12. Electronically receive and transmit eligible employee information to be used during open enrollment.
13. Respond to any needs of the County related to the Programs, as deemed necessary by the County.
14. Assume full risk for all lives effective on or after the Plans effective date, January 1, 2019 at 12:00am.
15. Grandfather all current amounts of life insurance.
16. Pay death benefits to beneficiaries of employees who die while on a County approved leave of absence provided premiums are paid, if applicable, without any time limit.
17. Provide an accelerated death benefit with certification of impending death (not to exceed 6 months).
18. Accept court appointed guardians for minor beneficiary designations.
19. Allow employees losing Basic Life and /or Optional Life Coverage, due to termination and/or reduction in hours or who are no longer in an eligible class, to purchase a conversion policy regardless of period of time covered.
20. Accept the Discontinuance of Life Insurance/Conversion Notice, provided as **Attachment I**, utilized by the County to notify the selected Proposer of eligibility for Basic Life and Optional Life conversion.
21. Administer and accept applications for Basic Life and Optional Life conversion within 31 days from loss of coverage (example: termination of employment or reduction in hours) or 15 days from the date the County provided notification, whichever is later. (However, the maximum number of days allowed to purchase a conversion policy is 90 days from loss of coverage.)
22. Accept the most current Evidence of Insurability/Statement of Health Form provided as **Attachment J** for medical underwriting.
23. Provide a toll-free number to promptly answer all telephone inquiries during the County's regular business hours, Monday through Friday from 8am to 5pm EST.
24. Comply with Performance Guarantee Provision.
25. Fulfill, upon expiration or termination of any agreement as a result of this Solicitation, all responsibility of the Plan year, including but not limited to, the transfer to the County of all data and records necessary to administer the Plans.
26. Accept that any reinsurance agreements or joint administration arrangements are subject to approval by the County.
27. Prepare language for amendments to the Certificate of Coverage/Policy due to legislative or other changes.
28. Prepare a customized Policies and Procedures Manual for services requested herein, which will be utilized by the selected Proposer and the County.

C. ADDITIONAL SERVICES

In addition to the required Services above, the selected Proposer shall provide the following services:

1. Meet with the County annually 90 days before open enrollment to determine key dates for all Plans.
2. Create and maintain a database of all eligible participants for all Plans.
3. Confirm and correct discrepancies regarding eligible employees with user County Departments.
4. Provide customer support services to the County. Selected Proposer's representative shall be available to respond to all questions regarding coverage, eligibility, benefit information, beneficiary designations by eligible employees throughout the contract term.
5. Selected Proposer shall also provide detailed reports to each using County Department containing specific employee information for eligibility verification and sworn or non-sworn status, as requested by the County.
6. After eligibility and status are confirmed at open enrollment, and no later than first week in December, provide the Program Manager with an electronic file (System Data Format file with fixed length) for determining the appropriate payroll deduction based on benefit level and premium calculation.
7. Provide premium calculations to Program Manager for payroll deductions based on information received throughout the year for new enrollees.
8. Keep original enrollment/beneficiary forms and changes on file throughout the term of the agreement.
9. At the termination of the agreement, provide all beneficiary forms and most recent electronic file to the County.

10. The County will provide an electronic file to the selected Proposer by September of each year. Selected Proposer shall cross check their database with the County provided information to maintain a fully updated and accurate database.

D. ENROLLMENT

1. Enrollment usually occurs during the fall for all Plans for the following year implementation.
2. All eligible employees may enroll during each open enrollment with an effective date of the anniversary of the Program. Coverage for new employees will be effective on the 1st day of the calendar month coinciding with or following sixty (60) from date of hire into a qualifying classification
3. Retirees do not participate in the annual enrollment process.

The selected Proposer shall:

4. Provide for an online annual enrollment period for all eligible employees, subject to evidence of insurability, directly on the selected Proposer's website for all Plans.
5. Review and approve all evidence of insurability forms.
6. Notify the County, via electronic feed, of all approvals to facilitate payroll deductions.
7. Mail notices to employees' home address regarding the annual Optional Life open enrollment.
8. Accept the use of the current Miami-Dade County Enrollment and Beneficiary Change Form provided as **Attachment K** for new enrollees and open enrollment. The County shall retain final approval authority of the standard enrollment form to be utilized. The County utilizes web enrollment for the annual benefits open enrollment and new hire enrollments. However, in some instances, paper forms may be utilized. The selected Proposer shall provide system interface and data format requirements for enrollment and eligibility data.
9. Accept the County's online beneficiary designation process.
10. Accept all new enrollees.

E. CERTIFICATES/COMMUNICATION MATERIALS

The selected Proposer shall:

1. Provide to the Program Manager initial drafts of the life insurance certificates, all communication materials, open enrollment and marketing materials for approval and prior to distribution to county employees. Drafts shall be provided at least 60 days prior to open enrollment. Any postage costs are to be paid by the awarded Proposer.
2. At initial enrollment, mail (directly to homes of participants) certificates of coverage to all Optional Life, Supplemental AD&D and PBA participants, as well as certificates to all retirees enrolled in the Basic Life. The selected Proposer shall pay all applicable postage.
3. Provide a sufficient quantity of certificates to the County's Benefits Director or designee for approval, in writing, prior to printing.
4. Provide online access to open enrollment materials. Reference the County's website for a snapshot of the provider materials accessible to employees: <http://www.miamidade.gov/benefits>.
5. Provide at Proposers own cost the Plans printed information materials and supplies for open enrollment and throughout the year.

F. REPORTING

On a quarterly basis, by the end of the first week of the preceding month, the Proposer shall provide the County with a report for all Plans to include Premium versus Paid Claims activity report and Detailed Death Claim report segregated by County agency sub-groups. In addition, the County may request additional reports and shall be provided within 48 hours of request, unless otherwise approved by the County.

G. UNDERWRITING INFORMATION

Effective date of coverage: **January 1st, 2019 at 12:00 A.M. (EST time)**

Name and address of Policyholder
Board of County Commissioners, Miami-Dade County
c/o Human Resources - Benefits Division
111 NW 1st Street, Suite 2340
Miami, Florida 33128-1987