

PART I – GENERAL INFORMATION

COMMONWEALTH CONTRACT REQUIREMENTS

FOR

GROUP MEDICARE ADVANTAGE PLANS
AND
COMPANION PRE-65 MANAGED CARE PLANS

**ISSUING OFFICE: COMMONWEALTH OF PENNSYLVANIA,
PUBLIC SCHOOL EMPLOYEES' RETIREMENT SYSTEM**

INVITATION FOR APPLICATION NUMBER: PSERS IFA 2018-01

DATE OF ISSUANCE: March 30, 2018

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PART I

GENERAL INFORMATION

I-1. Purpose. This Invitation For Application (IFA) is published to allow qualified insurance carriers (Offerors) to apply to the Public School Employees' Retirement System (PSERS) to offer a fully insured Medicare Advantage group insurance plan and accompanying Pre-65 group insurance plan to PSERS retirees who participate in the Health Options Program (Health Options Program) sponsored by PSERS. To participate, Offerors must apply, be approved, enter into the established contract documents and comply with all contract requirements.

I-2. Issuing Office. PSERS ("Issuing Office") has issued this IFA. The sole point of contact in the Commonwealth of Pennsylvania ("Commonwealth") for this IFA shall be the Issuing Officer:

Mark Schafer
Director of Health Insurance Office
Public School Employees' Retirement System
5 N. 5th Street
Harrisburg, PA 17101
Email: mschafer@pa.gov

Please refer all inquiries to the Issuing Officer.

I-3. Scope. PSERS has published this IFA and will consider applications to contract with one or more organizations offering a fully insured Medicare Advantage Plan ("MA Plan"), each of which must be paired with a companion Pre-65 Managed Care Plan. This IFA contains instructions governing the requested applications and submissions, including the requirements for the information and material to be included; a description of the services to be provided; requirements an Offeror must meet to be approved as an ADMINISTRATOR; required contract terms, and other requirements specific to the contract.

I-4. Background Information on the Health Options Program. The Health Options Program is a voluntary group health benefits program available to PSERS retirees, their spouses and dependents. PSERS sponsors seven self-funded plan options under the Health Options Program: the **HOP Medical Plan**, the **Value Medical Plan**, the **HOP Basic Medicare Rx Option**, the **HOP Enhanced Medicare Rx Option**, the **Value Medicare Rx Option**, the **HOP Pre-65 Medical Plan** and the **HOP Pre-65 Medical Plan with Prescription Drug** option. PSERS also sponsors a voluntary, fully insured **Dental Benefit Plan**, available only to participants in the HOP Medical Plan and the Value Medical Plan. In addition, PSERS offers an array of Medicare Advantage and Pre-65 Managed Care plans provided by carriers approved through this IFA. For 2018, five managed care organizations are approved to offer plans through the Health Options Program. As of January 1, 2018, there were approximately 113,500 participants (95,300 retirees plus their dependents) in the Health Options Program. Of this number, approximately 18,200 retirees and dependents participate in managed care options. Most participants reside in Pennsylvania. Nearly ten percent of participants reside outside the Commonwealth.

I-5. Application and Approval. PSERS will consider timely applications submitted by organizations offering MA Plans and Pre-65 Managed Care Plans that meet the Offeror qualification requirements and agree to execute the contract set forth in Part IV of this IFA in its entirety. Participation is contingent on timely submission of an application and approval thereafter by the Issuing Office that the Offeror is qualified, responsible and capable of performing the services contemplated under the contract.

I-6. Application by Region. Offerors will apply by geographic region and must meet the contract requirements for each region for which an application is made. The Issuing Office reserves the right to approve an Offeror separately for each region. PSERS Health Options Program regions are set forth in **Appendix A** to this **Part I**.

I-7. Type of Contract. Offerors will make a binding application to be approved to offer plans for the next calendar year, which application must be signed by a duly authorized official of the Offeror. PSERS will review an Offeror's application and determine whether the Offeror meets the contract requirements. The contract to be entered into is set forth in Part IV of this IFA. Exceptions to the Agreement will be considered only in the areas noted in that agreement, including, without limitation, the plan design description, pricing, and the designated geographic region in which the plans will be offered. Additional contracts or other paperwork presented by the Offeror will not be recognized or executed.

I-8. Rejection of Application. The Issuing Office reserves the right, in its sole and complete discretion, to reject any application received.

I-9. Procedure for Application and Approval.

(a) No later than May 11, 2018, the ADMINISTRATOR shall submit to PSERS a fully completed application to provide coverage for calendar year 2019. Such application will demonstrate the ADMINISTRATOR's qualification to provide benefits under this Agreement, utilizing the application form provided by PSERS for such request. The application will include representations of the ADMINISTRATOR's ability to comply with all requirements of this Agreement and to provide the benefit programs requested. In addition, the application will include the ADMINISTRATOR's proposed plan design for the calendar year 2019 for each plan offered. To be considered, the application submission shall be fully completed in every detail and executed by duly authorized officials of the ADMINISTRATOR with authority to bind that organization.

(b) PSERS will review the application and notify the ADMINISTRATOR of its preliminary determination for selection or nonselection to participate in the calendar year 2019. If ADMINISTRATOR has been selected to participate, PSERS reserves the right to request ADMINISTRATOR to discuss and revise the proposed plan design(s) to maintain consistency in benefits offered to eligible Health Options Program participants. Such preliminary selection shall be communicated within forty five (45) days following the application deadline.

(c) No later than June 6, 2018, the ADMINISTRATOR shall submit to PSERS proposed rates for each Medicare Advantage Plan, Pre-65 Managed Care Plan Legacy, and New Active Benefit Plan proposed to be in force for the calendar year 2019.

(d) PSERS will review the proposed rates and may request that the ADMINISTRATOR submit a revised final plan design and final rates for calendar year 2019 no later than July 11, 2018.

(e) In the case of an ADMINISTRATOR that applies to offer a New Active Medicare Advantage plan and accompanying pre-65 managed care plan, PSERS will review the proposed new plan designs and notify the ADMINISTRATOR of its determination to approve or deny the New Active plans no later than July 11, 2018. If the New Active plans are approved, the current active plan may be terminated, and its current participants transferred to the New Active plan, or the current active plan may be grandfathered in a Legacy option. An Administrator with a current Legacy plan may maintain that plan as well. Eligible HOP participants who are enrolled in the current active plans may be grandfathered and new enrollment in that plan will be frozen.

(f) PSERS' final notification of approval to the Term will be evidenced by the complete execution of an agreement, which appends thereto and incorporates by reference the Invitation For Application and the ADMINISTRATOR's Application, as revised to include all final negotiated plan designs and rates.

I-10. Incurring Costs. The Issuing Office is not liable for any costs the Offeror incurs in preparation and submission of its application or in anticipation of acceptance of the contract by PSERS.

I-11. Questions & Answers. If an Offeror has any questions regarding this IFA, the Offeror must submit the questions by email (**with the subject line "PSERS IFA 2018-01 Question"**) to the Issuing Officer named in **Section I-2** of this general information document. The Offeror shall not attempt to contact the Issuing Officer by any other means. The Issuing Officer shall reply directly to the Offeror's questions

I-12. Addenda to the Invitation For Application. If the Issuing Office deems it necessary to revise any part of this IFA during the application process, the Issuing Office will post an addendum or revised document to the PSERS website at <http://www.psers.pa.gov/> and follow the link Employer News under the Employer dropdown menu. While the Issuing Office will attempt to notify all known Offerors of such a change, it is the Offeror's responsibility to periodically check the website for any new information or addenda.

I-13. Notice of Intent to Apply. Offerors are requested to submit a Notice of Intent to Apply by sending a letter stating such to the Issuing Officer on or before the date specified in the Schedule of Events (see **Section I-31**). The letter should be on company letterhead and be signed by an officer or other official authorized to bind the organization. Letters may be submitted to the Issuing Officer via email in Adobe PDF format. Also, please include a hard copy of the intent letter with the paper application when submitted.

I-14. Response Date. To be considered for approval for 2019, the Offeror's application and supporting materials must arrive in hard copy at the Issuing Office on or before the time and date specified in the Schedule of Events (see **Section I-31**). The Issuing Office will **not** accept applications via email or facsimile transmission. Offerors who send applications by mail or other delivery service should allow sufficient delivery time to ensure timely receipt of their applications. If, due to inclement weather, natural disaster, or any other cause, the Commonwealth office location to which proposals are to be returned is closed on the application submittal date, the deadline for submission will be automatically extended until the next

Commonwealth business day on which the office is open, unless the Issuing Office otherwise notifies Offerors. The hour for submission of applications shall remain the same. The Issuing Office will reject, unopened, any late applications.

I-15. Applications. To be considered, Offerors should submit a complete application to the Issuing Office, using the format provided in **Part III – Application**, providing **three (3) paper copies of the Application submittal**. In addition to the paper copies of the application, Offerors shall submit **two (2)** complete and exact copies of the entire application (completed and duly executed Application, including all addenda and attachments) on CD-ROM or Flash drive in Microsoft Office or Microsoft Office-compatible format. Microsoft WORD or Adobe PDF file formats are preferred. The electronic copy must be a mirror image of the paper copy and any spreadsheets must be in Microsoft Excel. The electronic submission must also include a mirror image of the Application submission complete with the Offeror's signatures. The Offeror may not lock or protect any cells, tabs or documents. The CD-ROM or Flash drive should clearly identify the Offeror and include the name and version number of the virus scanning software that was used to scan the CD-ROM or Flash drive before it was submitted. The Offeror shall make no other distribution of its application to any other Offeror or Commonwealth official or Commonwealth consultant. Each Application page should be numbered consecutively for ease of reference. An official authorized to bind the Offeror to its provisions must sign the Application. The Offeror's Application must remain valid for the longer of **180 days** or until a contract is fully executed. If the Issuing Office accepts the Offeror's Application and executes the contract, the contents of the Offeror's Application will become contractual obligations.

Each Offeror submitting an application specifically waives any right to withdraw or modify it once the stated deadline for application receipt has passed. The Offeror may withdraw its application by written notice received at the Issuing Office's address for application delivery prior to the exact hour and date specified as the deadline for application receipt. An Offeror or its authorized representative may withdraw its application in person prior to the exact hour and date set for application receipt, provided the withdrawing person provides appropriate identification and signs a receipt for return of the application package. An Offeror may modify its submitted application prior to the exact hour and date specified as the deadline for application receipt only by submitting a new revised sealed Application which complies with the contract requirements.

I-16. Plan Design for Medicare Eligible Participants. Medicare Advantage plan designs submitted by the Offeror must provide a comparable benefit to original Medicare plus the **HOP Medical Plan plus Basic Medicare Rx** option for Medicare eligible members. See Appendix E for information on Health Options Program benefit plans. Variations in plan design are allowed and encouraged, but the overall plan must include both medical and prescription drug benefits and provide a benefit that allows qualifying retirees to maximize reimbursement of the premium assistance pension credit (currently up to \$100 per month).

I-17. Plan Design for Pre-65 Non-Medicare Eligible Participants. Pre-65 Managed Care plan designs submitted by the Offeror must provide a comprehensive benefit package, including both medical and prescription drug benefits. Variations in plan design to the current HOP Pre-65 Medical Plan with Rx Benefits are allowed and encouraged, but the overall plan must include both medical and prescription drug benefits.

I-18. Economy of Preparation. Offerors should prepare applications simply and economically, providing straightforward, concise answers to the questions and description of the Offeror's ability to meet the contract requirements.

I-19. Alternate Applications. The Issuing Office has identified the basic approach and requirements for this contract, allowing Offerors to apply and demonstrate their ability to meet the contract requirements. The Issuing Office will not accept alternate applications.

I-20. Discussions for Clarification. Offerors may be required to make an oral or written clarification of their application to the Issuing Office to ensure thorough mutual understanding and Offeror responsiveness to the contract requirements. The Issuing Office will initiate requests for clarification. Clarifications may occur at any stage of the process prior to contract execution.

I-21. Prime Contractor Responsibilities. This IFA requires the Offeror to assume responsibility for all services offered in its application, whether it produces them itself or by subcontract. The Issuing Office will consider the Offeror to be the sole point of contact with regard to contractual matters relating to that Offeror's contract.

I-22. Application Contents.

- A. Confidential Information. The Commonwealth is not requesting, and does not require, confidential proprietary information or trade secrets to be included as part of Offerors' submissions in order to evaluate applications submitted in response to this IFA. Accordingly, except as provided herein, Offerors should not label proposal submissions as confidential or proprietary or trade secret protected. Any Offeror who determines that it must divulge such information as part of its application must submit the signed written statement described in subsection I-22.C. below and must additionally provide a redacted version of its application on CD ROM clearly labeled as such, which removes only the confidential proprietary information and trade secrets, for required public disclosure purposes. *If a written statement and redacted version of the application is not submitted at the time of the application submission, the application will be subject to release as submitted with only the financial capability redacted.*
- B. Commonwealth Use. All material submitted with the application shall be considered the property of the Commonwealth of Pennsylvania and may be returned only at the Issuing Office's option. The Commonwealth has the right to use any or all ideas not protected by intellectual property rights and identified as such pursuant to subsection I-22.A above that are presented in any application regardless of whether the application becomes part of a contract. Notwithstanding any Offeror copyright designations contained on proposals, the Commonwealth shall have the right to make copies and distribute proposals internally and to comply with public record or other disclosure requirements under the provisions of any Commonwealth or United States statute or regulation, or rule or order of any court of competent jurisdiction.
- C. Public Disclosure. After the award of contracts pursuant to this IFA, all application submissions are subject to disclosure in response to a request for public records made under the Pennsylvania Right-to-Know-Law, 65 P.S. § 67.101, et seq. If an application submission contains confidential proprietary information or trade secrets, a signed written

statement to this effect must be provided with the submission in accordance with 65 P.S. § 67.707(b) for the information to be considered exempt under 65 P.S. § 67.708(b)(11) from public records requests. Refer to FORM A of this IFA for a Trade Secret Confidential Proprietary Information Notice Form that may be utilized as the signed written statement, if applicable. If financial capability information is submitted in response to Part II of this IFA such financial capability information is exempt from public records disclosure under 65 P.S. § 67.708(b)(26).

I-23. Best Available Contract Value. The Issuing Office reserves the right to conduct discussions with an Offeror for the purpose of obtaining the best available contract value. To obtain such best available contract value, the Issuing Office may do one or more of the following:

- a. Enter into discussions of plan design and pricing, or specific Offeror qualifications, to clarify and understand Offeror's proposed terms;
- b. Require the Offeror to provide a revised Application with amended terms to reflect such discussions and agreements;
- c. Schedule oral presentations and discussions; and
- d. Adjust the application deadline as required for Offeror submission of supplemental or amended material resulting from discussions after the initial application has been submitted.

The Issuing Office will limit any discussions to responsible Offerors (those that have submitted responsive applications and possess the capability to fully perform the contract requirements in all respects and the integrity and reliability to assure good faith performance) whose applications the Issuing Office has determined to be reasonably susceptible of being approved for contract.

I-24. News Releases. Offerors shall not issue news releases, Internet postings, advertisements or any other public communications pertaining to this contract or the Offeror's application therefore, without prior written approval of the Issuing Office, and then only in coordination with the Issuing Office.

I-25. Restriction of Contact. The Issuing Officer is the sole point of contact concerning this IFA. Any violation of this condition may be cause for the Issuing Office to reject the offending Offeror's application. If the Issuing Office later discovers that the Offeror has engaged in any violations of this condition, the Issuing Office may reject the offending Offeror's application or rescind its contract award. Offerors must agree not to distribute any part of their applications and supporting materials beyond the Issuing Office. An Offeror who shares information contained in its application or supporting materials with other Commonwealth personnel and/or competing Offeror personnel may be disqualified.

I-26. Debriefing Conferences. Offerors whose applications are not approved for award will be notified of the Issuing Office's decision and given the opportunity to be debriefed. The Issuing Office will schedule the time and location of the debriefing. The debriefing will not compare the Offeror with other Offerors.

I-27. Issuing Office Participation. Offerors shall provide all services, supplies, facilities, and other support necessary to complete the identified work.

I-28. Term of Contract. The term of the contract will commence on the Effective Date and will end on December 31, 2019.

I-29. Notification of Approval for Contract. The Issuing Office will notify the Offeror in writing of its decision regarding the Offeror’s application for contract. Such notification will be in accordance with the Schedule of Submission and Approval Events in **Section I-31**, however, the Issuing Office reserves the right to adjust the final approval dates as needed to complete analysis of the Offeror’s application, and will provide notification to the affected Offeror of any such change of schedule.

I-30. Use of Electronic Versions of this Contract Requirements Document. This IFA, including all required parts and sections, is being made available by electronic means. If an Offeror electronically receives the IFA, the Offeror acknowledges and accepts full responsibility to insure that no changes are made to the IFA. In the event of a conflict between a version of the IFA in the Offeror’s possession and the Issuing Office’s version of the IFA, the Issuing Office’s version shall govern.

I-31. Calendar of Submission and Approval Events. The following Schedule of events shall apply to this IFA. The Issuing Office reserves the right to amend this calendar from time to time.

Schedule of Events for Calendar Year 2019 Participation	
Application and Contract Package for 2019 Released	March 30, 2018
Offeror Letter of Intent due	April 13, 2018
Offeror Application submissions due	May 11, 2018
Proposed rates for 2019 due (completed Exhibits 15 and 16)	June 6, 2018
Final plan designs and 2019 rates due, including any revisions requested by PSERS	July 11, 2018
HOLD DATE for possible MCO meeting with PSERS in Harrisburg – details to follow after Application submission	July 10, 2018 (12:30 – 3:00 p.m.)
Effective Date of Offeror contract	Date contract fully executed
Offeror meeting/call with PSERS third party administrator to finalize operational aspects	August 13 to September 10, 2018

Schedule of Events for Calendar Year 2019 Participation	
Offeror customer service operational for participant questions and enrollments, web information access, print copies with third party administrator	September 28, 2018
Final Medicare Advantage Evidence of Coverage booklet(s) submitted to PSERS to complete contract requirements	Within 10 days of publication, but not later than December 31, 2018
PSERS Option Selection Period	October 1 to November 15, 2018 Offeror fulfillment of participant requests for managed care enrollment packages
Participant applications received and processed	October 1 to December 31, 2018. Participant enrollment packages for managed care plans forwarded to Offeror continually as received and processed by PSERS' third party administrator
Insurance Effective Date for 2019	January 1, 2019

I-32. Health Options Program Benefit Information. Appendices A through E provide region descriptions, a census summary and benefits plan information about the current Health Options Program to assist Offerors in completing their applications.

APPENDIX A – PSERS HEALTH OPTIONS PROGRAM REGIONS

The following table lists the PSERS Health Options Program regions. For the three in-state Pennsylvania regions, the counties included in each are listed separately.

PSERS Region	Counties / States Included
Southeast PA	Bucks, Chester, Delaware, Montgomery, Philadelphia
North and Central PA	Adams, Armstrong, Beaver, Bedford, Berks, Blair, Bradford, Butler, Cambria, Cameron, Carbon, Center, Clarion, Clearfield, Clinton, Columbia, Crawford, Cumberland, Dauphin, Elk, Erie, Forest, Franklin, Fulton, Huntingdon, Jefferson, Juniata, Lackawanna, Lancaster, Lawrence, Lebanon, Lehigh, Luzerne, Lycoming, McKean, Mercer, Mifflin, Monroe, Montour, Northampton, Northumberland, Perry, Pike, Potter, Schuylkill, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Venango, Warren, Wayne, Wyoming, York
Southwest PA	Allegheny, Fayette, Greene, Indiana, Washington, Westmoreland
Out-of-State	Delaware, Florida, Maryland, New Jersey, New York – High or Low Tier MA Rates allowed by county All other states – Single High or Low Tier MA rate must apply for entire state

**APPENDIX B
CENSUS INFORMATION**

PSERS Health Options Program Enrollment by Age

Age Bracket	Managed Care Plans			HOP Plans		
	Retirees	Dependents	Total	Retirees	Dependents	Total
0 - 29	0	1	1	3	5	8
30 - 34	0	0	0	7	5	12
35 - 39	1	0	1	9	12	21
40 - 44	3	1	4	12	11	23
45 - 49	8	1	9	24	11	35
50 - 54	17	1	18	78	11	89
55 - 59	34	1	35	206	18	224
60 - 64	119	13	132	1,185	60	1,245
65 - 69	2,034	588	2,622	32,132	2,943	35,075
70 - 74	4,056	1,271	5,327	21,349	5,400	26,749
75 - 79	3,432	1,009	4,441	11,250	3,138	14,388
80 +	4,638	984	5,622	14,856	2,643	17,499
Grand Total	14,342	3,870	18,212	81,111	14,257	95,368

PSERS Health Options Program Contracts by Gender

Age Bracket	Male	Female	Total
0 - 29	3	0	3
30 - 34	3	4	7
35 - 39	4	6	10
40 - 44	4	11	15
45 - 49	12	20	32
50 - 54	23	72	95
55 - 59	92	148	240
60 - 64	446	858	1,304
65 - 69	11,724	22,442	34,166
70 +	22,778	36,803	59,581
Grand Total	35,089	60,364	95,453

APPENDIX C
HEALTH OPTIONS PROGRAM ENROLLMENT BY STATE

Health Options Program Enrollment By State

State	MCOs	HOP Medical Plans	Total
AK	0	1	1
AL	2	34	36
AR	0	13	13
AZ	26	279	305
CA	13	169	182
CO	8	103	111
CT	2	32	34
DC	0	7	7
DE	23	681	704
FL	161	3,328	3,489
GA	10	202	212
HI	1	6	7
IA	1	4	5
ID	1	10	11
IL	4	55	59
IN	3	56	59
KS	0	10	10
KY	0	30	30
LA	0	8	8
MA	3	74	77
MD	25	310	335
ME	0	60	60
MI	5	46	51
MN	0	20	20
MO	2	18	20
MS	2	10	12
MT	0	21	21

Health Options Program Enrollment By State

State	MCOs	HOP Medical Plans	Total
NC	40	613	653
ND	0	2	2
NE	0	4	4
NH	12	31	43
NJ	53	1,545	1,598
NM	0	53	53
NV	0	64	64
NY	13	258	271
OH	23	281	304
OK	0	14	14
OR	1	34	35
PA	17,681	85,374	103,055
PR	0	1	1
RI	0	8	8
SC	27	629	656
SD	0	12	12
TN	3	100	103
TX	11	155	166
UT	0	12	12
VA	30	395	425
VI	0	1	1
VT	0	18	18
WA	9	56	65
WI	0	24	24
WV	17	87	104
WY	0	10	10
Totals	18,212	95,368	113,580

**APPENDIX D
PSERS NEW ELIGIBLE RETIREES TURNING AGE 65**

2017 New Eligibles Turning Age 65

Month	Total # Becoming Eligible	Total # Electing HOP	Total # Electing MCO
Jan	1,014	530	13
Feb	978	495	18
Mar	994	515	27
Apr	939	486	22
May	1,006	545	18
Jun	1,045	535	22
Jul	1,020	523	23
Aug	1,064	539	18
Sep	1,031	471	20
Oct	921	453	13
Nov	920	433	16
Dec	893	344	4
Total	11,825	5,869	214

For 2018, about 11,800 PSERS retirees are anticipated to turn age 65 and be initially eligible to enroll in the Health Options Program. The distribution by month for 2018 and 2019 is expected to follow a similar pattern to that for 2017.

APPENDIX E BENEFIT PLAN INFORMATION

Summary descriptions of all PSERS Health Options Program plans offered for active selection for the current year are available at www.HOPbenefits.com.

When accessing the website home page, click on the **Resources** tab on the left side of the screen.

You may then select **Resources for Medicare Eligible Individuals** or **Resources for Non-Medicare Eligible Individuals** and view or download the **HOP for Medicare-Eligible Participants 2018** brochure, the **HOP Pre-65 Medical Plan 2018** brochure and the **Managed Care Plans for Medicare-Eligible and Non-Medicare-Eligible Members** brochure, all pictured and listed in the middle section of the screens.

There are four different versions of the **Managed Care Plans for Medicare-Eligible and Non-Medicare-Eligible Members** brochure, one for each PSERS region. Each version includes only the managed care plans available for active selection for 2018. No currently frozen Legacy Benefit Plans are shown because these plans are not available for new enrollment and HOP participants grandfathered in those plans may remain only until they make another selection.

Medicare Advantage and Pre-65 Managed Care plan designs submitted by the Offeror for 2019 must provide a comparable benefit to original Medicare plus the **HOP Medical Plan plus Basic Medicare Rx** option for Medicare eligible members, or the **HOP Pre-65 Medical Plan with Prescription Drug Benefits** for pre-65 Health Options Program participants.