APPENDIX A

Group Medical and Pharmacy Stop Loss Insurance Solicitation 101-20

TECHNICAL SPECIFICATIONS/DETAILED SCOPE OF SERVICES

The proposing Group Medical and Pharmacy Stop Loss Insurance Company must satisfy the following technical specifications in order to have their Proposals evaluated. By submitting a Proposal, the Respondent warrants and represents that it satisfies these requirements. Failure to meet these requirements will result in the Proposal not being evaluated and being rejected as non-responsive.

- A. The Respondent and any subcontracted vendor offered by the Respondent must have all the necessary current Florida State Licenses, filing registrations and/or certificates to offer the products and services requested in this solicitation. The Respondent and any subcontracted vendor must supply proof of the certifications/licenses if awarded the contract.
- B. The Respondent and all subcontractors must have, at a minimum, a current A.M. Best rating of A- or better as of December 31, 2019 or for the most current rating period.
- C. The Respondent must be financially sound and provide complete financial documentation for the past three (3) years ending December 31, 2019. The Respondent must have acceptable financial ratings, as determined by JEA, from AM Best, Standard and Poor's, Moody's and Fitch, if the Respondent is rated by these financial rating companies. If the Respondent is not rated by the listed financial rating agencies, the Respondent must provide certified financial documentation as to the current financial condition of Respondent. (If applicable).
- D. The Respondent and all subcontractors must have the minimum insurance Limits as illustrated in this solicitation. The Respondent that is awarded this business will be required to provide an Insurance Certificate 30 days prior to the effective date of Services.
- E. The Respondent must have successfully provided at least two (2) similar type contracts during the last three (3) years ending May 31, 2020. Please see and complete Appendix B Minimum Qualifications Form/References.
 - 1. A similar contract is defined as providing comprehensive Group Medical and Pharmacy Stop Loss Insurance for a company of at least 1,500 employees, as described in the Scope of Services.
 - 2. These references must include the reference Company name, contact person, phone number, email address and the Scope of Service details. JEA will contact and verify the supplied references.
- F. All pricing, costs, fees or any remuneration for the placement of this plan should be **Net of Commissions**. The Respondent will not pay any direct commissions to a broker.
- G. JEA will require the awarded Group Medical and Pharmacy Stop Loss Insurance Company to have a preliminary renewal completed and available five (5) months prior to the next renewal date. This is for budgeting purposes. The stop loss insurance company will have the opportunity to develop a final renewal offer 90 days prior to their renewal date. The renewal should be in written form and delivered to the JEA's Employee Benefits Consultant.
- H. Specific stop loss coverage applies to all medical and prescription drug expenses, including all mental health and substance abuse claims, covered under JEA's self-insured medical plan(s) administered by Florida Blue (Blue Cross and Blue Shield of Florida) and Prime Rx. All benefits paid under JEA's medical plans must accumulate to specific stop loss limits without any limitations or exclusions. The specific stop loss lifetime maximum must be consistent with the underlying medical plan(s).
- I. The Respondent must accept Florida Blue (Blue Cross Blue Shield of Florida) and Prime Rx as the JEA claims administrator.

- J. The Respondent must accept the claim administrator's interpretation as to what is an eligible expense under the medical plan.
- K. Specific stop loss coverage applies to all eligible members as defined in the Scope of Services. Employees, dependents, retirees and COBRA continuants must be covered under the contract.
- L. The actively-at-work requirement and dependent non-confinement rules must be waived for all eligible members as of the effective date of coverage.
- M. Pre-existing condition limitations are waived.
- N. The Respondent's contract will adhere to all HIPAA requirements, which permit special enrollees to join without evidence of insurability.