



Request for Qualifications
Employee Benefits Brokerage and Consulting Services

Issued by:

Metrocare

1345 River Bend Drive

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469.890.7701

I. Overview

Overview of Metrocare

Metrocare is the largest provider of mental health services in North Texas, serving over 55,000 adults and children annually.

For over 50 years, Metrocare has provided a broad array of services to people with mental health challenges and developmental disabilities. In addition to behavioral health care, Metrocare provides primary care centers for adults and children, services for veterans and their families, accessible pharmacies, housing and supportive social services.

Overview of RFQ

In this Request for Qualifications ("RFQ"), Metrocare is inviting a select group of Brokers/Consultants who we believe have the resources and capacity to provide Employee Benefits Brokerage Services required. The selected Broker will work closely with Metrocare in all aspects of employee benefits and risk management. These brokerage firms should:

- Possess the License to do business in Texas
- Have the expertise, licenses and resources to provide Employee Benefit broker/consulting services for Metrocare's Employee Benefit broker/consulting needs
- Consistently maintain and allocate sufficient staffing resources to provide timely service for Metrocare's Employee/Benefit consulting services needs
- Maintain staff that are qualified and available to provide specialized technical exp in various disciplines as necessary

The following are insurance programs requested in this RFQ:

- Health
- Dental
- Vision
- Short Term Disability
- Long Term Disability
- Life Insurance

II. Instructions

Please provide a written response to the requested information no later than May 8, 2023. Your response should be delivered as follows:

By e-mail to:

ariana.guilford@metrocareservices.org

Brevity is preferred and appreciated. As such, please limit your response to 50 pages, there is no page limit to the appendix, and it does not count toward the 50-page limit.

Any questions should be submitted to Ariana Rosado at the email address noted above no later than May 19th, 2023.

Pre-Bid conference call to be hosted online on May 15 at 3p: [Click here to join the meeting](#)

This process does not involve insurance markets now and **no insurer or reinsurer should be contacted** prior to broker appointment.

III. Proposal & Project Timetable

RFQ sent to Brokers	May 3 rd	8a
Pre-Bid Conference Call and all Questions Due	May 15 th	3p
RFQ responses due	May 19 th	5p
Notification of On Site Presentation	May 26 th	5p
Notification of final selection	June 16 th	5p
New Broker relationship effective date	July 1 st	8a

Submittals and requests for information relative to this Request for Proposal should be addressed to:

Ariana Rosado
ariana.guilford@metrocareservices.org
469.890.7701

IV. Scope of services and expectation of broker

- a) We are seeking a broker/consultant that will provide the full range of services related to the implementation, maintenance, communication, and improvement of its group benefit programs. These services should include identifying plan/vendor consolidation opportunities and design changes that will reflect our overall benefit strategy and increase employee understanding.
- b) Assist our HR team in administering all group insurance plans, responding to questions from and providing information to staff, and providing other related consulting services during the plan year.
- c) Assistance with the development, design, and planning of employee benefit programs, including strategic planning, benchmarking, and modeling to reduce risk and achieve cost efficiencies.
- d) Negotiate annual renewal of coverage from carriers for our benefit programs. Seek competitive quotes from benefit carriers and provide advice and recommendations to senior leadership for consideration, which includes an insurance coverage's alignment with our mission, and values.

Evaluate bids and bidders, including administration, coverage, customer service, networks, reconciliation of premiums and claims, financial soundness, and identify the most cost-beneficial package from among the various bidders.

- e) Review with provider and our HR team, on an ongoing basis, claims experience, claim service, and claim administration to ensure maximum benefit to Metrocare.
- f) Conduct update meetings to measure progress against our goals.
- g) Determine and recommend the most economical funding methods for the benefit programs and strike a balance between cost and comprehensiveness of the programs.
- h) Development of COBRA rates and employee cost sharing rates.
- i) Assist us with the implementation and communication of new programs or changes to existing programs by providing communication materials and meeting support which will include, but is not limited to, attending and presenting information at Open Enrollment meetings.
- j) Assist us in complying with the employee benefit laws and regulations by providing proactive advice and guidance on new laws, regulations, and procedures, including healthcare reform requirements, compliance review, and benefits administration. Research employee benefits legislative, legal and compliance issues and communicate them to us on an ongoing basis.
- k) Interface with insurance carriers as needed to assist us in the resolution of problems associated with benefit programs, including claims resolution including employee advocacy services.

V. Evaluation questions

A. General company information and account service team

1. Provide a brief history of your firm including size, volume of business, locations, and number of years in business.
2. Provide your company's philosophy on providing benefits consulting, as well as your corporate mission.
3. Detail the number of employee benefits clients currently served and the average demographics of your client base.
4. What distinguishes your firm from other broker/consulting firms?
5. Proof of errors and omissions insurance with a minimum limit of \$1,000,000 per occurrence.
6. Describe the proposed team that would work with us and provide information about the qualifications and expertise of each team member.
7. How often does your team meet with your clients and for what purposes?
8. Describe your internal mechanism for ensuring customer satisfaction with your services.
9. Describe your methods to update clients on employee benefits market trends and compliance topics.

B. Services

10. Describe the steps you will take in reviewing our current employee benefit plans and developing a long-term strategic plan.

11. Detail your benchmarking capability and access to survey data.
12. Describe your standard package of employee communication services, including digital and/or internet-based employee communication tools.
13. Describe how your firm can assist our employees with claim related issues.
14. Do you have a process in place for tracking communication between you and your clients? Describe.
15. What steps do you take to help us assess potential wellness initiatives?
16. Describe how your firm will provide value with Rx and Pharmacy Benefit Management (PBM) analysis.

C. Marketing, vendor negotiations, and management

17. Outline your approach to negotiations and renewals with insurance carriers on your client's behalf and provide a sample timeline. Describe your approach to monitoring the performance of insurance carriers, and other vendors.
18. Describe your experience managing employee claims escalation your experience assisting clients with complicated administrative issues and fostering positive resolution. Do you provide services in-house or outsources services for elevated claims, billing, and eligibility issues?

D. Data analysis and reporting

19. What resources do you use to analyze medical and pharmacy claims?
20. Describe your underwriting and actuarial resources.
21. What types of plan and benefit reports do you provide and how frequently do you provide them? Provide examples. Are there additional charges for customized or ad-hoc reporting?
22. Does your firm employ data mining tools to analyze clinical data to project future risks and costs over time? Explain your process and provide examples.
23. Provide detailed claim, utilization review, medical case management and disease management data on the frequency basis determined by client. Provide analysis of that data and any resulting recommendations in plan design or approach.

E. Legal and compliance

24. Do you have in-house legal advisors who provide counsel to your clients? If so, is there an additional fee for these services? If you rely on external counsel, please describe how we would be charged for these services.
25. How do you provide legal research, compliance, and legal consultation and information on the benefit plans?
26. Do you prepare your clients Form 5500 filings on their behalf and at what cost?

F. References

27. Please provide the names and contact information for 3 comparable sized and structured clients we can contact for references.

G. Compensation

28. How would you prefer to be compensated? (i.e., direct fee, commissions, retainer, etc.).
29. Does your firm accept contingent commission payments or bonuses from insurers with which you place business?
30. If you charge fees for consulting, employee communication, and/or any other services, please indicate the basis of your charges (hourly, by project, etc.) and what typical charges might be.
31. Describe your protocol for disclosure of compensation and philosophy on compensation transparency.
32. Describe our right to terminate a contract with you. Is there a minimum contract period?