

Request for Proposal for and Employee Assistance Program

DHR2003-EAP

Responses to Bidder Questions (Q&A)

January 24, 2020

Note: For all inquiries that reference questions in the Questionnaire section regarding whether or not the incumbent is currently providing a service, we cannot comment on Health Advocate’s business model. In the past five years the EAP market continues to evolve so we are interested in learning about what services your organization could offer to serve our population.

	Reference	Requirement or Question in RFP	Question	Response
1			How long has Health Advocate provided EAP services to the State?	Health Advocate has provided EAP services to the State since 07/01/2007.
2			Are there specific areas of enhancement you are seeking at this time?	The Coordination Project is a new initiative, otherwise all the minimum requirements in the RFP are current services.
3			Why are you requesting this RFP at this time?	State procurement rules require that all contracts go out to bid every five years.
4			In addition to the utilization report provided, could the prior year report be shared as well?	Attached.
5			How many Critical Incident events were responded to in the most recent full contract year?	The on-site Critical Incidents were listed in the RFP on Page 58, #3.15. In the Group Impact Report, the Critical Case Count was 15 in FY19.

	Reference	Requirement or Question in RFP	Question	Response
6			How many Critical Incident events were responded to in the prior contract year?	The Critical Case Count was also 15 per the FY18 Delaware Group Impact Report.
7			How many hours of on-site Critical Incident support are currently provided in the contracted rate, or is this fee for service?	There isn't a way to project the number of events or hours devoted to a critical incident response. There is no fee-for-service work for Critical Incident support. The hours would be part of the 450 hours per year.
8	Page 4 – I. Introduction	Of a total of 98,500 covered persons eligible for EAP services, for fee purposes 44,500 is the approximate number of eligible employees...	Can you provide more clarity on the employee count; if 98,500 covered persons are eligible for EAP services, why are fees to be based only upon 44,500 (approximate) number of eligible employees?	Currently EAP fees are billed on a PEPM basis. For this purpose an employee is defined as employees, non-State employees of participating groups and non-Medicare retirees that are enrolled in the health plan, of which there are 44,500 total. Please quote your PEPM fees accordingly.
9	Page 6 – 2.0 Background Information – under Work/Life: Career Development	Career Development	Can you provide additional clarity regarding what is currently provided as part of Career Development?	On Health Advocate's website is information about career action plans, networking, exploring career options, and selecting a college.
10	Page 6 – 2.0 Background Information	Services such as Fitness for Duty and Department of Transportation (DeIDOT) Substance Abuse Professional (SAP) are provided to managers and supervisors...	Can you provide the average number of fitness for duty requests annually over the last three (3) years?	The average number of Fitness for Duty requests (see also the bottom of Page 8, Paragraph j) for the last three fiscal years was no more than 2-3 per year. (See the Additional Information and Directions document that corrects the error that there are no separate fees for this service.)

	Reference	Requirement or Question in RFP	Question	Response
11	Page 6 and 7 – 2.0 Background Information	Of your company’s current clients, three must closely match the following criteria....	<p>1) Was this criteria in place for the last RFP? If not, does the current vendor meet the new criteria?</p> <p>2) Must each of the three clients meet each of the indicated criteria or at minimum one of the criteria?</p> <p>3) If we do not have a customer that individually meets each of the criteria, can we demonstrate ability to meet the criteria via multiple customers?</p>	<p>1) Yes, this criterion was in place for the last RFP.</p> <p>2) and 3) As stated in the RFP, “Failure to meet any minimum requirement may result in disqualification of the proposal submitted by your organization.” (emphasis added) Your bid response will be evaluated in its entirety; therefore we cannot respond to these questions.</p>
12	Page 8 – d. Financial Services	Certified Consumer Credit Counselors will provide an unlimited number of free 30-minute telephonic....	Please confirm this does not mean a person could have unlimited consultation on same question/issue, but rather unlimited as it relates to the various types of financial management needs a person may have/experience throughout the year.	For each financial problem area, a 30-minute consultation is to be provided to a member at no cost.
13	Page 9 – m. On-site Training	Provide a minimum of 450 hours for on-site training....	<p>1) Are 450 hours currently included in the program design/rate?</p> <p>2) How many of these hours have been used on average over the life of the contract?</p> <p>3) How are the hours divided and or managed among different departments/groups?</p>	<p>1) Yes</p> <p>2) Since fiscal year 2012, the average number of training hours was 334.</p> <p>3) The hours are not divided or managed among different departments or groups. In other words, an agency isn’t allotted a certain number of hours.</p>

	Reference	Requirement or Question in RFP	Question	Response
				See the Additional Information and Directions document for clarification of “training” and “service”.
14	Page 9 – m. On-site Training	(e.g. DOT Supervisory Compliance Training, Supervisory/Human Resource Support Hours and Training, Critical Incident Stress Management). This includes . . .	Please confirm that Critical Incident Stress Management refers to actual on-site response after a critical incident versus training.	Yes, Critical Incident Stress Management refers to on-site support after a Critical Incident as requested by a human resource office, supervisors or upper level management. See the Additional Information and Directions document for clarification of “training” and “service”.
15	Page 9 – p. Coordination Project	The State would like the selected EAP vendor to lead and provide ongoing management of a project involving....	Is this “Coordination Project” a new program option? If yes, does the state have an expectation of how this may impact utilization of EAP and Work/Life sessions?	Yes, the Coordination Project is a new program for the EAP provider. We do not have an estimate about the increase in EAP services. (See the Additional Information and Directions document for more information.)
16	Page 9 – p. Coordination Project	The State expects the EAP provider to prepare for and lead an on-site kick-off meeting....	Does the state have an estimate in regard to how many hours of time may be necessary for the activities associated to the “Coordination Project”?	See the Additional Information and Directions document for more information.
17	Page 10 – c. Customized Communication	(i.e. 1,850 posters and one wallet card per employee per year) and distribute to over 200 human resource offices (envelopes to be address by the vendor and sent at no postage via the State’s interoffice mail system). Additionally, one	1) Of the 1,850 printed posters are these to be provided all at once, or at different times in the year? If different, please provide interval. 2) Of the 1,850 posters, are they to be the same poster, or does the State desire multiple poster designs? If multiple, how many	1) New posters are sent out in bulk only if there are changes; i.e. a vendor name change so vendor made new posters and they were distributed to the organizations. Any extra posters were sent to SBO and are currently being distributed to individual organizations on a as needed basis. 2) The State has one poster design.

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		postcard mailing to members per year.	different types would be requested? 3) Regarding the postcard mailing, will the State print and mail directly, or is the vendor to print and/or mail? It is our opinion that mailers coming directly from the State are a better idea and helps in privacy protection so that employee mailing addresses are not shared outside of the State databases.	3) The vendor prints and mails postcard directly. SBO provides a mailing list to the vendor.
18	Page 26 – 8. Proposal Submission Date	Electronic copies cannot be transmitted via email by the deadline with hard copies to arrive before, on, or after the due date.	Perhaps just me, but I am not understanding the sentence, can you provide clarity?	We cannot accept a bid via email. Only hard copy bids are accepted.
19	Page 39 – 2.03	A GeoAccess report is requested in Appendix K	Detail requested in the GeoAccess report goes beyond what is necessary for delivery of EAP counseling services (short-term problem resolution). We utilize an in-house program to provide vendor match information based on provided zip codes. It can be run to meet our standard 20 miles requirement for all zip codes, but also ran at 10 miles. Can this be utilized rather than a GeoAccess Report?	For ease of analysis, you must complete the excel chart as Appendix K.

	Reference	Requirement or Question in RFP	Question	Response
20	Page 40 – 2.14	Please confirm that calls made by the state or their employees/family members will be returned the same day.	<ol style="list-style-type: none"> 1) Is this request currently being met by the incumbent Vendor? 2) Does this include after hours and weekend calls? 3) Is this requirement for all calls or just for counseling rate calls? (meaning general questions or Work/Life calls are not included in this request)? 	<ol style="list-style-type: none"> 1) Yes, all calls are returned the same day. 2) Yes, 24/7. 3) All calls are answered or returned the same day, 24/7.
21	Page 40 – 2.18	Please confirm if there is a designated team that will take the State’s calls.	<ol style="list-style-type: none"> 1) Is this request currently met by the incumbent Vendor? 2) Does this mean that the designated team can only answer State of Delaware calls? 	<ol style="list-style-type: none"> 1) Cannot respond. 2) A designated team should answer the State’s calls with a roll-over team in place.
22	Page 41 – 2.33	Please confirm you will provide an annual report on the measurement of the impact of EAP program.	Can the State provide a sample of their expectations for what this report should include/look like?	Please see Attachment #4, the Master Report List as referred to in #2.23 on Page 40.
23	Page 49 – 5.28	Please confirm your organization’s willingness to enter performance guarantees.	Can the State provide the current performance guarantees?	The PGs in Appendix I are the current PGs with the following additional categories: EAP Program Utilization, Network Access, and the Implementation sections.
24	Page 58 – 3.09	What is the availability and background of the medical director or a medical consultant? Indicate what role they play and the number of	<ol style="list-style-type: none"> 1) Is this currently part of the program? 2) When you reference on-site, is this on-site for the State, and if so, what is your historical 	<ol style="list-style-type: none"> 1) Cannot respond. 2) No, on-site does not mean a location on the State’s property but at the EAP company’s office.

	Reference	Requirement or Question in RFP	Question	Response
		hours/week of on-site service provided.	expectation regarding hours and potential locations?	
24	Page 61 – 3.29	Your organization updates primary care physicians (PCPs) on diagnosis, treatment and referral ...	<ol style="list-style-type: none"> 1) Is this currently part of the plan, and does the incumbent Vendor provide this support? 2) Does the State have information on how many hours of time are devoted to this? We do not believe this is normal within the EAP space but do recognize that Affiliate providers (not the EAP vendor) may do these updates. 	<ol style="list-style-type: none"> 1) Cannot respond. 2) See #20.
26	Page 61 – 3.31	Your organization participates with medical care practitioners to reduce inappropriate use of psychopharmacological medications and adverse drug reactions	<ol style="list-style-type: none"> 1) Is this currently part of the program and does the incumbent Vendor provide this support? 2) Does the State have information on how many hours of time are devoted to this? 	<ol style="list-style-type: none"> 1) Cannot respond. 2) No, it would be in your best practices if this is something you offer.
27	Page 62 – 3.34	Emergent patient visits are available immediately or within one hour of referral call.	<ol style="list-style-type: none"> 1) Is this provided via the incumbent vendor currently? 2) Can the State further define emergent? 3) What constitutes a “visit”, i.e. a local Affiliate provider office or local hospital? 	<ol style="list-style-type: none"> 1) Cannot respond. 2) Emergent means “emergency”. 3) A “visit” would be an appointment with a therapist or intake in a hospital.

	Reference	Requirement or Question in RFP	Question	Response
28	Page 63 – 3.50 3.40	The triage function is reviewed and supervised by a board-certified psychiatrist with an active unrestricted license...	Is this provided via the incumbent vendor currently?	Cannot respond.
29	Page 64 – 3.45	Licensed behavioral health care professional staff conducts an initial visit to the office of all potential behavioral healthcare practitioners prior to acceptance for network inclusion.	Can the State verify that this is currently part of the program requirement and that the incumbent Vendor completes this process currently?	Cannot respond.
30	Background and Overview, 2.0 Background Information (page 5)	The Employee Assistance Program (EAP) is designed to provide services to active employees, pensioners (early retirees), and their dependents who are enrolled in a non-Medicare health insurance plan (for the purpose of this RFP, a “member”). Members are strongly encouraged to reach out to the Employee Assistance Program administrator for guidance as they attempt to balance the high demands of home and work/life issues.	How long has the incumbent been providing EAP services to the State? Do they have an office within the State of Delaware?	Health Advocate has provided EAP services to the State since 07/01/2007. They do not have an office in the State of Delaware.
31	IV. Questionnaire, 2.0 Service Delivery, 2.23 (page 56)	Describe your organization’s offerings of computerized cognitive behavioral therapy (cCBT) programs. Include in your response the types of cCBT programs available (i.e.,	Is this a requirement for the program? If not, is the State expecting optional pricing for this program component?	No - the question is in the Questionnaire. Because it isn’t a minimum requirement, we are asking if you offer these programs. If so and there would be an additional cost, please include it on Appendix B, <i>Fee Quote</i> .

	Reference	Requirement or Question in RFP	Question	Response
		depression, anxiety, pain, substance abuse, etc.) and book of business utilization.		
32	Page 10, Section I, C.1., paragraph q - Respectful Workplace Anti-Discrimination Policy and Procedure	Under this policy, any State of Delaware employee who files a complaint can access EAP services related to the nature of the employee’s specific complaint, even if they aren’t eligible for the EAP (i.e., even if the employee is not enrolled in the State Group Health plan). The EAP must accept phone calls about this topic from employees. Since the inception of this policy on 6/24/2019 through mid-September 2019, no employees have availed themselves of this option and engagement is expected to be low. If there are inquiries and the EAP provides any services to this population, the cost would be absorbed in the EAP PEPM fee.	<p>An EAP is considered an “excepted benefit” under ACA and therefore does not need to comply with certain requirements under ACA and does not qualify as minimum essential coverage. However, in order to be an excepted benefit, one of the criteria includes that eligibility for EAP benefits must not be dependent on participation in another group health plan.</p> <p>1) Will (the) State consider covering all employees versus those who are enrolled in a group health plan? If so please provide the total number of employees.</p>	The number of employees and non-Medicare retirees that are not enrolled in the Group Health Insurance Plan (GHIP) would be minimal. Members of the participating groups are eligible for EAP services and they are not employees. The State Employee Benefits Committee is responsible for the eligibility rules and there are no plans to change the eligibility definition for the EAP program.

	Reference	Requirement or Question in RFP	Question	Response
33	Page 9, Section 1, C.1, Paragraph k - DeIDOT SAPs	SAPs are not applicable through the EAP program. At DeIDOT's request and with a direct contract arrangement, the EAP provider may contract separately for SAP services.	Please clarify; second sentence regarding EAP provider contracting SAP services separately is unclear; please confirm SAP services are not required within the Scope of Work.	See the Additional Information and Directions document for more information.
34	Page 9, Section I, C.1, Paragraph p – Coordination Project	The State would like the selected EAP vendor to lead and provide ongoing management of a project involving....	<ol style="list-style-type: none"> 1. Is the State's incumbent EAP vendor currently providing the services provided in paragraph p? If so, are these services included in their current PEPM rate? 2. Please provide the number of individuals who were or would have been referred to the EAP for disability management services described in Coordination project. 	<ol style="list-style-type: none"> 1. No, this is a new project. 2. For STD, the referral would be primarily for muscular skeletal, pregnancy and mental illness. In 2019 the STD count for these conditions was approximately 1,100 employees For LTD, all claims would be referred to EAP services for stress management and other support. In 2019, the LTD count was 92.
35	Page 9, m. Onsite training	Provide a minimum of 450 hours per contract year for on-site training sessions, workshops, and seminars on a variety of topics . . .	<ol style="list-style-type: none"> 1. How many hours of onsite training were utilized each of the last 3 years? 2. How many hours of Critical Incident Stress Management were utilized each of the last 3 years? 	<ol style="list-style-type: none"> 1. See #13 2. See #5 <p>See the Additional Information and Directions document for clarification of "training" and "service".</p>
36	Page 8, J. Fitness for Duty	When requested by appropriate management, and to include partnering or coordinating services only with the supervisor	How many Fitness for Duty Evaluations were performed each of the past 3 years?	See #10.

	Reference	Requirement or Question in RFP	Question	Response
		<p>or HR office, to identify appropriately credentialed providers who will conduct the examination and provide case management.</p> <p>(There is no separate fee for this service.)</p>		See the Additional Information and Directions document that corrects the error that there are no separate fees for this service.
37	Page 22, 2nd Tier Spending Report	In accordance with Executive Order 44, the State of Delaware is committed to supporting its diverse business industry and population. The successful Vendor will be required to accurately report on the participation by subcontractors who are Diversity Suppliers . . .	<ol style="list-style-type: none"> 1. Is there a Diversity Suppliers subcontracting goal to meet for this solicitation? If so, what is the percentage? 2. Must proposers make a good faith effort in subcontracting with these suppliers? 	No, the State does not require a certain percentage of subcontractors to be diversity suppliers nor to attempt to hire those subcontractors.

	Reference	Requirement or Question in RFP	Question	Response
38	<p>Page 7, Section 2.0 Background Information, Item 6.C.</p> <p>Page 9, Section C. Scope of Services – Member Services, Item 1. M. Onsite Training</p> <p>Page 73, Section Appendix B – Fee Quote, Optional/Value-Added Services, First Line Item</p>	<p>C. Annually, at least 250 on-site training hours, and</p> <p>m. On-Site Training. Provide a minimum of 450 hours per contract year for on-site training sessions, workshops, and seminars on a variety of topics including subjects of specific interest to managers and supervisors (e.g., DOT Supervisory Compliance Training, Supervisory/Human Resource Support Hours and Training, Critical Incident Stress Management).</p> <p>On-Site Service Hours: In the event all 450 service hours are utilized in any contract year, the following contract year’s hours can be accessed.</p>	<p>Would the State of Delaware please clarify if it seeks 250 hours or 450 hours of on-site training to be completed to satisfy the requirement?</p>	<p>“You must have proven ability to perform the services described in this RFP. Of your current clients, three must closely match the following criteria . . . 250 on-site training hours.” This is a minimum requirement for your company’s experience.</p> <p>The fee quote and expectation of service is for 450 hours.</p> <p>See the Additional Information and Directions document for clarification of “training” and “service”.</p>
39	<p>Page 6, Section 2.0 Background Information, Item B.</p>	<p>Annually, at least 1,500 participants utilizing Work/Life services either by phone or in person but not including website visitors,</p>	<p>Will the State please breakdown the 1,500 participants? Phone vs in-person?</p>	<p>The State does not have an expectation of the breakdown of hours between telephone or in-person contact.</p>
40			<p>Will the State please provide a copy of the current reports they receive from Health Advocate?</p>	<p>The Group Impact Report, Attachment #1, is the only report. It includes all the information requested on the Master Report List, Attachment #4.</p>

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DHR2003-EAP**

Additional Information and Directions

January 24, 2020

1. Fitness for Duty and SAPs:

The RFP states that there are no fees-for-service. This is an error – there are fees for Fitness for Duty evaluations and SAPs. The Fitness for Duty services are billed directly to the agency whereas the SAPs are billed to the employee. The RFP implied that only DelDOT had SAP requests, but there are other agencies that may make the request.

Directions: On Appendix B, *Fee Quote*, please provide your Fitness for Duty and SAP fees along with whether or not the fees have an administration fee or are pass-through.

2. What is Training versus a Service?

Throughout the RFP the number of hours of work or services in the contract are referred to as “training”. This is a catch-all word we use for all services other than Fitness for Duty and SAPs – classroom-type seminars, critical incident on-site response, time spent at Health Fairs, any time spent on Delaware-specific newsletters, posters and postcard communications, etc.

3. Coordination Project

- a. Fee Quote - The State recognizes that since this is a new project and the time needed for a successful implementation and program are unknown, it would be difficult to include these services in a PEPM quote. We expect the successful vendor to devote between 50 and 100 hours in the first year, not to exceed the total contract of 450 hours. The time spent after the first year on reporting should be minimal. The hours should be included in the PEPM fee; a fee for service cannot be considered.
- b. Timing – The Hartford is implementing a new platform for both the short-term and long-term disability programs. The go-live date is expected to be in November, 2020. Therefore, the implementation of the Coordination Project would start in October or November. The Hartford’s intake scripting for cold referrals has already been developed.

4. Minimum Attendance for On-Site Seminars/Training

For on-site seminars that are requested by the agencies (school districts, etc.), is there a minimum attendance required? If so, and there is minimal attendance, is there a fee to the agency? Please respond by noting the minimal attendance and fee on Appendix B, *Fee Quote*.