

**October 14, 2022**

**GHS RESPONSE TO VENDOR # 3 QUESTIONS: RFP#22008KW**

**The following contains GHS’ official response to previously asked question from vendor regarding the above solicitation:**

1. What are Grady Health System’s (GHS’) top HR and Benefit Challenges? Grady Health System (GHS) is seeking to enter into an agreement with a well-qualified employee benefits brokerage to assist with the development and administration of an innovative benefits offering to attract and retain high-quality talent. We seek creative, strategic approaches to accomplishing this objective. We seek a progressive partner in structuring and administering a wellness platform that features a holistic emphasis on employee physical, emotional, and financial well-being. We also seek robust employee communication tools and strategies to improve employee awareness and engagement in our benefits offering.
2. Who is involved in decision making for the benefits program? Currently the decision makers for Benefits include The CHRO, HR Director, and Sr. Benefits Generalist
3. What aspects of your total rewards program are helping you attract and retain talent? We do not have a true measurement to provide a response.
4. Excluding current market conditions, What do you see as your biggest challenges for attracting and retaining talent to GHS? Grady must differentiate the work experience compared to other healthcare entities.
5. What facets of your current benefits consultant representation have been identified as areas of concern and thus seek improvement? While your question number one above addresses the overall objectives and challenges, we are particularly interested in seeking out a progressive partner with new ideas, capabilities, and strategies that can help Grady become of a an employer of choice in the healthcare space.
6. What is your current employee turnover rate? Average new hires per month? Currently our turnover rate is 25%-30%
7. What are the highest cost drivers in your benefit program? Health plan costs related to chronic disease and specialty pharmacy spend as well as a population with perhaps higher than benchmark risk factors related to physical, emotional, and financial wellness.
8. Please describe the employee culture that GHS has fostered. What strategies has GHS implemented in the past to impact company culture?  Is this a priority for strategy?  We do not have sufficient information to provide an accurate response
9. How do you develop and approach population health management strategy for the employer sponsored health plan? What stakeholders are involved in helping to develop the strategy? Population Heath Management is currently administered through contract with Anthem and integrated with the health plan.
10. What type of risk (payment model, structure, services and population) is your organization taking on with commercial population and/or the employee offering? Self-funding with stop-loss reinsurance for the health plan.
11. Please confirm your benefit plans renew on 1/1/2023. Correct and have been finalized for 2023
12. Who is GHS’ current benefit administrator and enrollment solution provider? PeopleSoft HRIS with online enrollment capability
13. Can GHS share plan design summary illustrations, certificates of coverage and/or summary plan description (SPD)? As the scope of this RFP does not include benefits marketing for 2023, please refer to the attached Employee Benefit Guide for general benefits offering information*.*
14. Can GHS share your 2022 or 2023, if available, Employee Benefits Open Enrollment Guide? See above
15. Can you please provide an overview of your caregiver benefit programs? FMLA and Family Friendly Leave are two programs we currently have in place to assist employees who may be caregivers
16. Can GHS share design details sufficiently illustrating or describing Tier 1 (Domestic), Tier 2 (TPA/carrier In-network[INN]) and, as applicable, Tier 3 (out-of-network) benefits, distinguishing between facility vs. professional care as applicable? **Copays and Coinsurance When Using Grady and Grady Clinics:** Anthem POS and HMO plan members may enjoy significant cost savings by using Grady as your healthcare provider. Currently, diagnostic laboratory and imaging services at Grady are covered at 100% under the HMO plan and covered at 100% for in-office visits under the POS plan when provided through Core Plan Providers (Grady Health System, Children’s Healthcare of Atlanta - Hughes Spalding, or Grady’s neighborhood clinics).Copays and deductibles for the Core Plan Providers for the HMO plan and for in-office visits for POS plan will be $0. Additionally, if you come to Grady for outpatient surgery, the copay will be waived. These benefits are not available to members of CDHP plans due to IRS regulations governing high deductible plans. See Employee Benefit Guide for more plan design detail.
17. In section 4-A GHS describes a “partially self-funded” plan reference, is this because of the Stop Loss insurance or are there other alternative forms of self-funding in addition to Stop Loss (i.e., Minimum premium)? Or, is this a ‘by plan’ reference (i.e., HMO is insured and POS and HDHPs are self-funded)? For 2023, all health plan offerings are self-funded with stop-loss coverage.
18. Can GHS supply a recent, de-identified employee census with election information (i.e., medical, life, disability, voluntary benefits) and pertinent demographic data (i.e., part-time vs FTE employment status, tenure, salary, business unit)? We have provided a sample census template for GHS in our bidder response for questions. This information will be provided to the selected broker
19. Please describe which (if any) outside vendors you use to manage and enhance wellbeing (e.g., engagement/incentive platform) and clinical care (e.g., behavioral health digital solution)?  Have these programs been successful in meeting your objectives? We are currently not engaging outside vendors of this nature, but are open to targeted suggestions.
20. Who are GHS’ medical TPAs/carriers by plan (i.e., HMO vs. POS, if different) and which network is utilized, within each, for non-domestic INN services? Anthem HMO option utilizes their HMO network. Other Anthem offerings feature their open-access PPO network.
21. Can GHS provide a utilization summary of domestic, in-network, and out-of-network care in annual Plan Year dollars spent (allowed or paid)? This information will be provided to the selected broker
22. Are telehealth services delivered by a third-party, within the TPA vendor/health plan or by domestic GHS assets? Live Heath Online is integrated into current Anthem contract.
23. Can GHS provide 2022 and 2023 monthly premium equivalents and employee paycheck See the 2022 and 2023 Benefits Guide for the medical rates
24. Are there any wellness (i.e., the GHS biometric screenings) or tobacco surcharges (or incentives/disincentives) in place, please describe action and dollar amounts? The Medical Incentives medical plan contribution value is represented in the health plan options section of our Employee Benefit Guide. We encourage our employees to complete a GradyWell Annual Health Check – a quick check-up where we measure their weight, blood pressure, cholesterol, glucose, and A1C. This is a voluntary program. They can use this information to set health goals and qualify for reduced Grady health insurance rates in 2021. There is a two-tier medical premium for the 2021 Plan year. If they complete the screening, they will pay the lower bi-weekly medical premium. If they choose not to complete the screening, they will pay a higher bi-weekly medical premium. There is a tobacco surcharge in place as well.
25. Are there any limitations on dependent eligibility in the plan, specifically, is there a working spouse surcharge or working spouse exclusion? We do have a working spouse surcharge.
26. What is the current level of stop-loss coverage? $300K with an additional $300K aggregating specific (paid contract) Does it include both medical and Rx claims? Yes
27. Does GHS carve in their Rx with your health plan partner, or do you use a separate standalone PBM? Carve in via Anthem Do you have an in-house pharmacy or strategy in place to drive in house pharmacy utilization if applicable? Grady employees with a prescription written by a Grady physician can fill their prescriptions in the Employee Pharmacy at a discounted rate.
28. How many domestic onsite/near-site or retail owned pharmacies are in the GHS family? GHS has a total of 8 pharmacy facilities that include the Outpatient Pharmacy, Senior Pharmacy and employee pharmacy located on our main campus. There are also pharmacy facilities located in 5 of our neighborhood clinics.
29. Does GHS employ prescription drug (Rx) 340B pricing on the employee benefit plan? Yes, our pharmacy utilizes 340B pricing (patient and employee pharmacy)
30. What level of domestic Rx use occurs within the GHS Rx network (i.e., of all Rx $$ or scripts, X% that occurs at GHS owned pharmacies? Data not readily available.
31. Can you describe the percentage of plan spend that is attributed to non-domestic care (outside of GHS facilities and providers)?  What are the services to which non-domestic care is most often attributed? Data not readily available.
32. For the medical plans, please describe your ongoing process to ensure Tier 1 (GHS) network sufficiency and adequate access for the geography you serve. Anthem’s broad PPO network in our region is a primary reason for our affiliation with them as our plan administrator. Disruption analyses would be expected of looking at any other option.
33. Can you share a copy of your most recent annual review for medical and Rx? The information will be provided to the selected broker
34. Preferred frequency of financial reporting – monthly or quarterly (i.e., experience monitoring or IBNR reporting)? Monthly with IBNR reporting.
35. Does GHS currently utilize a vendor for data warehousing? If yes, which system and data elements are included within the system? Will the selected consultant have access to the system? Do you want the selected consultant to include a data warehouse solution in their scope? No, vendor files are housed and submitted by our IT department
36. Is GHS willing to schedule a call for further discussion on your goals or programs with the bidders? If selected as an RFP finalist, Aon will be invited to a finalist discussion.
37. Are there any other solutions/vendors that are contracted directly with your current broker representation (i.e., learning management systems, benefit administration, HR support) that would need to be replaced should you transition your brokerage services? There are no systems that require replacement