

WILLIAMSON COUNTY PURCHASING DEPARTMENT 901 SOUTH AUSTIN AVE. GEORGETOWN, TEXAS 78626

http://wcportals.wilco.org/Procurement/

HOSTED SOLUTION SERVICE – WEB BASED BENEFIT ENROLLMENT SYSTEM FOR WILLIAMSON COUNTY

PROPOSAL NUMBER: 15RFP123 PROPOSALS MUST BE RECEIVED ON OR BEFORE: MONDAY MAY 4, 2015 - 2:00PM

PROPOSALS WILL BE PUBLICLY OPENED: MONDAY MAY 4, 2015 - 2:00PM

ADDENDUM # 1

April 17, 20154

This addendum will facilitate a supplement to the current specifications of this Request for Proposal and will become an integral part of the awarded contract.

On page 20, section 5.3 of this RFP, please replace the requirements spreadsheet with the one enclosed as the following changes have been made:

- "Multi-lingual Enrollment via the Web (Spanish)" was moved from required to preferred
- "Track Wellness Activity" was moved from required to preferred
- "Track Wellness Incentives" was moved from required to preferred

Key System Requirements & Capabilities	Required Preferred NA	
System Requirements		Vendor Results Met = ✓
		Did not Meet = 0
Hosted Solution Service	Required	
Online Enrollment	Required	
Benefit Plan Eligibility	Required	
Plan History – Employee & Employer View by Plan Year Elections	Required	
Calculate Contributions	Required	
Calculate imputed income	Required	
Decision Making Tool	Required	
Call Center	Required	
Print/Email Benefit confirmation Statements	Required	
Integrate with Carriers	Required	
Passive Enrollment	Required	
Cobra Interface multiple Providers	Required	
FSA Interface	Required	
System Capabilities		
Ability to establish 2 way file integration with County's Payroll/HR system.	Required	
Maintain Compliance with Federal reporting	Required	
Billing Audit/Reconciliation Tool	Required	
Billing Reconciliation Reports	Required	
Ad hoc Report Building	Required	
Add Dependents	Required	
Benefit Confirmation Statements Real Time Auto Generated	Required	
Blast Emails	Required	
Carrier Data Feeds	Required	
Change Beneficiary – Employee Complete Online	Required	
Customizable Benefit Confirmation Statements	Required	
Consolidated Billing Reports	Required	
Dynamic Benefit Plan Comparisons - Benefit by Benefit	Required	
Employee Benefits Portal	Required	
Employee Calculators	Required	
Forms Posting – Employee ability to upload Forms Posting – Compliance ability to post all necessary required forms by the employer	Required	
Passive Enrollment	Required	
Payroll Data Feeds	Required	
Select PCP	Required	
Standard Reports	Required	

View Current Elections	Required
*Web-based Cobra Elections - Vendor needs to have employees make any COBRA, FSA elections online and transmit this	Required
information to the respective vendors / systems.	Nequired
*Web-based Enrollment for all Core Benefits	Required
*Web-based FSA Elections	Required
*Web-based Individual DI Enrollment	Required
*Web-based Individual Life Enrollment	Required
*Web-based Life Event Enrollment	Required
*Web-based New Hire Enrollment	Required
*Web-based Open Enrollment including off cycle	Required
*Web-based Retiree Elections	Required
*Web-based Spousal or Dependent Life	Doguirod
Enrollment	Required
Access Benefit Plan History	Preferred
Automated Alerts - to Administrator(s)	Preferred
Automated Alerts - to Employees	Preferred
Avatar or Interactive Educational Tools	Preferred
Benefit Enrollment Surveys	Preferred
Call Center Enrollment	Preferred
Call Center Support during Enrollment	Preferred
Configurable Workflow	Preferred
Customized Educational Videos	Preferred
Customized Text and Branding	Preferred
Data Audits/Dependent Audits	Preferred
Decision Support Tools	Preferred
EOI Alerts	Preferred
EOI Tracking and Notification	Preferred
Fulfillment Services	Preferred
Generation of Completed Enrollment Forms	Preferred
via PDF	rielelled
Historical Reporting	Preferred
Instant Online EOI	Preferred
Mobile Functionality	Preferred
Multi-lingual Enrollment via the Web (Spanish)	Preferred
Participant Modeling	Preferred
Point-in-time Reporting	Preferred
Post Enrollment Employee Surveys	Preferred
Prefilled EOI forms	Preferred
Report Scheduler	Preferred
Screen Customization Capabilities	Preferred
Track Wellness Activity	Preferred
Track Wellness Incentives	Preferred
Single Sign-on to Insurance Carrier/Carriers	Preferred
Verification Services	Preferred

Signature	Print Name	Date

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Sincerely,

Please acknowledge the receipt of addendum# 1