


**ADDENDUM No. 3**

**TO: ALL BIDDERS**  
**FROM: CITY OF HIALEAH**  
**BID #: 2010/11-0240-00-023**  
**RE: LIFE & A.D. & D COVERAGE**  
**DATE: MARCH 23, 2011**

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The original contract documents for the entitled: LIFE & A.D. & D COVERAGE need to be amended as noted in this Addendum No. 3.

This Addendum No. 3 consists of 4 typed pages. All other items and conditions of the original Contract Documents shall remain unchanged. This Addendum shall become a part of the Contract Documents.

Approved for issue:  Date: March 23, 2011  
Michael Flores - Purchasing Director

**ACKNOWLEDGMENT**

Receipt of this Addendum No. 3 shall be acknowledged in the space provided on the ADDENDUM RECEIPT form – ARF (Copy attached) now a part of the Contract Documents to be faxed immediately to the City of Hialeah Purchasing Division (305) 883-5871 and submitted with sealed bids.

**IN THE CONTRACT DOCUMENTS:**

1. Pleaser revise "ADVERTISEMENTS AND INVITATION FOR BIDS" forms as follows:

Sealed, written bids will be received by the office of the City Clerk of the City of Hialeah, Florida, 501 Palm Avenue until **11:00 a.m. Tuesday April 19, 2011** at which time all bids will be publicly opened and read aloud in the Council Chambers for furnishing the following:

**LIFE & A. D. & D. COVERAGE**  
**BID No. 2010/11-0240-00-023**

**QUESTIONS AND ANSWERS:**

Question 1: Are you able to provide the full schedule of life benefits to include the cutbacks and waiver information? Also, in addition to an experience report to include volumes, premiums and claims, please provide a waiver claim report. The claims provided only indicated death claims.

Answer 1: See answers to question 4 and 8 in Addendum No. 1. See answer to question 1 in Addendum No. 2.

Question 2: Is the rfp for ER paid life ad&d only? Or is their Vol life also?

Answer 2: Please refer to specifications in the bid package. Also, see answer to question 3 in Addendum No. 1.

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**BID No. 2010/11-0240-00-023**

- Question 3: I need to know if we can have a letter from you asking the providers to release the quote to us. Some providers, like Cigna, only give one quote to one agent, unless The City gives us a letter asking them to release the quote to the other agents as well.
- Answer 3: No. The City will accept quotations from any responsive insurance provider through the agents of the provider's choosing.
- Question 4: Please provide a census that includes supplemental elections for each employee.
- Answer 4: See answer to question 3 in Addendum No. 1.
- Question 5: Please confirm if the new carrier would be responsible for taking on disableds.
- Answer 5: Yes. Also, please see Eligibility Section of Bid.
- Question 6: If so, please provide a list of disableds including gender, date of birth, coverage amount(s), date and nature of disability.
- Answer 6: Unavailable.
- Question 7: Please also explain when these amounts reduce and/or terminate.
- Answer 7: Please refer to specifications in the bid package.
- Question 8: What are the renewal rates for all coverages?
- Answer 8: See answer to question 17 in Addendum No. 1.
- Question 9: Please provide a volume, premium, rate and a detailed claims history listing for the last three years for all Basic, Voluntary/Supplemental, and Dependent Life coverages separately.
- Answer 9: See answers to questions 4 and 17 in Addendum No. 1.
- Question 10: Do either the basic or supplemental plans have waiver? If so, what are the parameters of the waiver of premium benefit? (i.e. disabled prior to age 60, 9 month elimination period, terminates the earlier of retirement or age 65).
- Answer 10: See answer to question 8 in Addendum No. 1
- Question 11: Should any coverages include portability?
- Answer 11: No. Also, please refer to specifications in the bid package for any continuation provisions.
- Question 12: When does the retiree coverage terminate. Does the coverage reduce?
- Answer 12: Please refer to specifications in the bid package.

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Question 13: Is there child coverage? If so what is the current child definition for dependent life coverage (i.e. 14 days to age 19 or 23 if full-time student)?

Answer 13: No. Also, please see eligibility section of bid.

Question 14: Is there Spouse coverage? If so what are the options?

Answer 14: No. Also, please see eligibility section of bid.

Question 15: Is the basic life plan mandatory for employees?

Answer 15: No. Also, please see eligibility section of bid.

Question 16: If not, please confirm if the active census provided contains all eligible employees or only those currently participating. In order to price the plan appropriately, we would need a census that provides all eligible employees whether participating or not so that we can make an accurate assessment of current plan participation in our pricing.

Answer 16: See answer to question 3 in Addendum No. 1.

Question 17: Have there been any significant plan design changes within the past 3 years (i.e. change in benefit schedules, acquisitions, mergers).

Answer 17: No.

Question 18: Should commissions be included in the proposal?

Answer 18: Yes.

Question 19: If so, what level is being requested?

Answer 19: The City has no established level of commission.

Question 20: Will the plan be self-administered (employer maintains employee records; self-bills)?

Answer 20: Yes.

**NOTE:** Bid has been extended two weeks and the City has now cut off all further questions.

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**END OF ADDENUM No. 3**

CITY OF HIALEAH  
LIFE & A D & D COVERAGE

2010/11-0240-00-023

ADDENDUM No. 3

CONTRACTOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

THE BIDDER ACKNOWLEDGES RECEIPT OF THE FOLLOWING ADDENDUM BY SIGNING AND DATING BELOW: (Copy of this form must be faxed immediately to the City of Hialeah at (305) 883-5871).

<u>ADDENDUM</u>	<u>SIGNATURE</u>	<u>DATE</u>
<u>3</u>	_____	_____
_____	_____	_____
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ARF