#### STATE OF NEW YORK

#### **JUDICIARY**

-REQUEST FOR BID-

(This is not an order)
BID MUST BE MADE ON THIS SHEET
OR AS OTHERWISE SPECIFIED

Bid Number: OCA/HR-235	Commodity Group:
Opening Date: 3/27/2019	Commodity Name:
Time: 3:00 pm	Group Vision Benefits
Issue Date: 3/5/2019	Plan

NYS OFFICE OF COURT ADMINISTRATION Contract & Procurement Unit 25 Beaver Street, R-829 New York, NY 10004

(Agency Name and Address)

Direct Inquiries to: Marie-Claude Ceppi

E-mails: mceppi@nycourts.gov

Price to include delivery to (describe exact location and method
of delivery) All prices to be net and inclusive of all services
specified herein unless otherwise specified.

OFFICE OF GENERAL SERVICES "GENERAL SPECIFICATIONS" (DECEMBER 1998) ARE FULLY INCORPORATED HEREIN.

Agency's Specification of item(s) Required (include quantities)

Bidder's Quotation and Specific Description of Item Offered

UCS ATTACHMENT I , III, and IV ATTACHED & INCORPORATED HEREIN.

ALL BID RESPONSES <u>MUST</u> BE ENTERED ON THE ENCLOSED BID RESPONSE FORM UNLESS SPECIFIED OTHERWISE HEREIN.

#### NOTICE TO BIDDERS

Pursuant to the Rules and Regulations of the Chief Administrator for the Courts, sealed bids for furnishing the item(s) in this Request for Bid will be received at the above address. When submitting a bid, you must:

- 1. Complete this form in its entirety using ink or typewriter and return with all other documents.
- 2. Explain any deviations or qualifications if your bid deviates from the specifications. If necessary, attach a separate sheet setting forth such explanations.
- 3. Sign the bid. The bid must be completed in the name of the bidder (corporate or other) and must be fully and properly executed by an authorized person.
- 4. INDICATE THE BID NUMBER, THE BID OPENING DATE AND TIME ON THE ENVELOPE CONTAINING THE SEALED BID.
- 5. Mail the bid to the above agency address in sufficient time for it to be received before the specified bid opening. **LATE BIDS WILL BE REJECTED.**

BIDDER HEREBY CERTIFIES THAT THE ABOVE QUOTED (OR OTHERWISE NOTED) PRICES ARE APPLICABLE TO ALL CUSTOMERS FOR COMPARABLE QUANTITIES, QUALITY, STYLES OR SERVICES.

#### **BIDS MUST BE SIGNED**

Bidder's Firm Name:		Employer's Federal Identification Number:		
		NYS Vendor ID Number:		
Address Street	City		State	Zip
Bidder's Signature		Official Title		
Printed or Typed Copy of Signature		Area Code/ Telephone Number E-mail:		

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at 3:00 PM

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DOCUMEN	NT ENCLOSURE CHECKLIST
<u>Pr</u>	ricing Sheet: Exhibit A/Pricing Sheet must be fully executed and included in
bidder's proposa	l. Failure to do so may disqualify bidder's response.
The following <u>fo</u> disqualify bidder	rms must be fully executed and included in bidder's proposal. Failure to do so may's response:
	ICS Request for Bid/Proposal Form (rfb1.frm) and complete bid response with riginal signature
	ttachment I - Standard Request for Bid Clauses & Forms
	□p.3 - Non-Collusive Bidding Certificate
	□p.4 - Corporate Acknowledgment
A	Attachment II - Not Applicable
A	ttachment III - Vendor Responsibility Questionnaire
	☐ Questionnaire filed online via OSC VendRep System and certified
	within 6 months of the bid opening due date, <b>or</b>
	□ Paper questionnaire
A	Attachment IV - Procurement Lobbying forms
	☐ Disclosure of Prior Non-Responsibility Determination (UCS 420)
_	□ Affirmation of Understanding and Agreement (UCS 421)
	Certificates of NYS Worker's Compensation and NYS Disability Benefits
	Insurance, or Certificate of Attestation of Exemption. Please see paragraph Insurance Requirements" for a list of accepted forms.
	Copies of bidder's certificate(s) of insurance or other adequate proof evidencing
t	he insurance coverages required by the bid specifications.
	Required bid response documents (see Article IV). Failure to do provide a
complete respon	se <u>may disqualify</u> bidder's proposal.
In addition, bidd	er shall provide:
	Three (3) complete photocopies of original bid response
	List of references
I	Bidder's contact name
	Signed Document Enclosure Checklist
	Proprietary information in separate folder from bid response, if applicable
	information to be included in hidder's hid response, as itemized on np. 7-9

#### **IMPORTANT**

- 1. All documents requiring an <u>original signature</u> must bear the <u>BLUE INK</u> signature of the same authorized individual. Signatory notarization must be that of the person whose signature is affixed to all required documents.
- 2. Exhibit A/Pricing Sheet and the other forms listed above must all have the <u>SAME COMPANY NAME AND TAX ID NUMBER</u> in order for a purchase order or contract to be approved by the NYS Comptroller.
- 3. Do not alter this solicitation in any manner. Any changes, deletions, or additions (including the addition of supplemental terms and conditions) to this RFB or to any exhibits or appendices to this RFB, including Exhibit A/Pricing Sheet, may result in the rejection of the bid as non-responsive.
- 4. Please note that the terms and conditions of this RFB will form the basis of the contract with the awarded vendor.
- 5. Please verify that all required documents are included before signing.

COMPANY NAME:					
AUTHORIZED OFFICER'S NAME AND TITLE:					
SIGNATURE:	DATE:				

#### I. PURPOSE AND SCOPE

### **Vision Benefits Group Insurance Policy**

The New York State Unified Court System ("UCS") Office of Court Administration ("OCA"), on behalf of the Judiciary Benefits Office ("JBO"), is soliciting sealed proposals for the procurement of a group insurance policy to provide vision benefits to judges, justices, management confidential and other unrepresented employees, retirees and their dependents, as described in these RFB specifications.

For a detailed compilation of vision plan membership effective January 1, 2018, see most recent Active Census attached as Exhibit C.1 and Retiree Census attached as Exhibit C.2.

Basic plan benefits costs will be employer-paid. Certain optional costs will be paid by the Members (as defined below).

The detailed requirements of the vision benefits plan to be provided pursuant to this solicitation ("Plan") are contained in Exhibit A attached hereto.

For a listing of current vision plan members, see the most recent Active Census attached as Exhibit C.1 and Retiree Census attached as Exhibit C.2.

For a listing of Plan Member eligibility, see Article II, "Plan Requirements" contained in Exhibit A attached, hereto.

The following terms shall be used to describe Members under the Plan:

"Employee Members"	Active judges and justices, qualified management confidential employees and unrepresented non-judicial employees deemed eligible by JBO.
"Retired Members"	Retirees.
"Dependent/Family Members"	Spouses, domestic partners, and dependents, who include children up to the age of 26 years old.

"Member" Employee Members, Retired Members and Dependent/Family Members,

together, "Members" or individually, a "Member".

See Exhibit A, Article II for detailed Member eligibility requirements.

#### **Minimum Bidder's Qualifications**

UCS will consider proposals submitted <u>directly</u> by duly licensed insurers that demonstrate a minimum of ten (10) years' experience in the provision of similar services and who possess all certificates of authority, licenses, and other approvals necessary to lawfully provide all benefit plans required to provide the services required under this solicitation. <u>Proposals will not be considered by brokers on behalf of insurers.</u>

#### II. BID RESPONSE SUBMISSION

#### **Bidder's Contact Name and Required Information**

Bidder shall designate, in its bid response, a staff member as primary contact for all questions JBO may have regarding bidder's bid response. Bidder must include in its bid response all forms and documents listed on the Document Enclosure Checklist.

## Packaging, Identifying and Delivering of Bids/Proposals

Bids/Proposals must be clearly addressed and submitted to:

Marie-Claude Ceppi Management Analyst NYS Office of Court Administration 25 Beaver Street, R-829 New York, NY 10004

All envelopes/cartons must also be labeled with the following information on two sides:

Deliver immediately to Marie-Claude Ceppi R-829 Sealed bid - Do not open RFB# OCA/HR-235 **due March 27, 2019** at **3:00 p.m**.

Failure to seal and mark the bid/proposal as prescribed may result in non-delivery and/or rejection of the bid/proposal. Please note that bids/proposals must be received by the abovenamed OCA-designated person by **March 27, 2019** at **3:00 pm** at the latest or bids will be declared late bids and they will be disqualified. It is recommended that bidders allow several extra days for shipping in order to meet the deadline.

#### **No-Bids**

Bidders are requested to send a no-bid letter to OCA, Attn: Marie-Claude Ceppi, at the above address, should they decide not to answer this solicitation. The envelope shall be clearly marked in the lower left corner as follows: RFB# OCA/HR-235. No-bid letters may be sent by email to <a href="mailto:mceppi@nycourts.gov">mceppi@nycourts.gov</a>. Please indicate in "Subject" field: RFB# OCA/HR-235 – No-Bid.

#### **Questions**

Any and all questions bidder may have in connection with this solicitation are to be directed **by email only** to the attention of:

Marie-Claude Ceppi mceppi@courts.state.ny.us

Please indicate in "Subject" field: OCA/HR-235 Question(s.)

The deadline to submit questions is March 14, 2019 at 5:00 pm. No questions will be entertained after this deadline. A written response to all submitted questions in the form of a Questions & Answers (Q&A) sheet will be posted on the UCS website at <a href="https://www.nycourts.gov/admin/bids">www.nycourts.gov/admin/bids</a> under RFB# OCA/HR-235 and mailed to the bidders list promptly after this deadline.

**IMPORTANT**: All questions regarding this solicitation must be in writing by email and directed solely to the attention of the above designated person. Contact by any prospective bidder, or any representative thereof, with any other personnel of the UCS in connection with this RFB/RFP may violate the Procurement Lobbying Act of 2005 (see Attachment IV), will jeopardize the respective bidder's standing and may cause rejection of its proposal.

#### Required bid response documents

Bidder must include in its bid proposal written descriptions in narrative format (unless otherwise indicated) addressing the topics listed in items 1-5 below. <u>Failure to respond to every topic listed below may result in disqualification of a bid proposal</u>.

#### 1. Program Services

 Description of Bidder's standard method of claims processing in detail, as well as any alternate or special procedures it proposes to employ under the Plan. Indicate bidder's standard 'in office' turnaround time, i.e. the average time period from when a claim is received until it is paid and/or otherwise acted upon.

- Description of Bidder's proposed customer service operation, including the number of fulltime equivalents that would be dedicated to the Plan; the capabilities of the telephone system
  that bidder would propose to use for the Plan, including its automated response system;
  proposed hours of customer service; and whether customer service can be contacted via
  electronic mail. Bidder must also describe how it will handle after-hours calls and how staff
  will be trained.
- Description of Bidder's procedure for investigating/auditing claims.
- Description of Bidder's audit procedures for insuring proper payment of claims, including bidder's process for recovering overpayments.
- Description of Bidder's procedures for identifying potential coordination of benefits ("COB") and COB savings.
- Description of Bidder's procedure for providing access for UCS, and any other authorized governmental entity to conduct performance and financial audits and to audit membership/enrollment and claims data.
- Description of Bidder's system to provide an alternative identification number to be used in lieu of Member social security numbers.
- Description of Bidder's system in place that ensures security and confidentiality of Member data.
- Description of Proposed Plan benefits and/or value-added options to be made available to
  Members in addition to the basic Plan benefits set forth in Exhibit A hereto (such as
  Participating Provider discounts or special pricing for laser vision correction surgery or
  other procedures, repair or replacement discounts, discounts on supplies or other benefit
  options". Note: any such additional benefits and/or value-added options offered shall be at
  no cost to UCS.
- Copies of sample claim forms and other materials to be furnished to Member claimants.

#### 2. Composite Rates

- Description of bidder's method for determining how Composite Rate will be established for renewal and/or extension terms.
- Description of Bidder's annual experience-rated renewal procedures.
- Description of Bidder's method for determination of Composite Rates.
- Explanation, for experience rated policies, of whether Composite Rates will be on a dividend basis.
- Statement indicating whether Composite Rates will remain unchanged for more than a year, and if so, for how long.
- Explanation of whether bidder guarantees its retention formula, and if so, for how long.
- Description of guaranteed caps, if any, on future Composite Rate increases.

#### 3. Miscellaneous

- Description of Bidder's financial and organizational resources and capacity to provide the services required under the bid.
- Description of Bidder's experience in providing similar services to similar populations.
- Description of Bidder's electronic data transmission system.
- Description of Bidder's system and procedures to ensure and maintain data security and claimant confidentiality.
- Description of Bidder's procedure for success/failure notifications to UCS.
- Description of Bidder's procedure for receiving files on an ad-hoc basis if files fail.

#### 4. Account Team

- Bidder's organizational chart listing the personnel (number and position titles) bidder proposes to service the UCS account.
- Bidder's narrative of the skill/experience level of the personnel assigned to the UCS account.

#### 5. List of Participating Providers

• Provide a link where UCS can access the list of vision services providers who will provide services under the Plan ("Participating Providers"). The list may only include providers with whom Bidder has a contractual relationship to provide vision services as of the date of submission of its bid proposal. Bidder shall include the name, address and telephone number of each Participating Provider, and the services it will perform. Bidder may provide the list in writing or via a web link. If provided via web link the list must be sortable via zip code. Whether provided via written list or web link the list shall also indicate the number of Participating Providers per: (i) Judicial District (as depicted on the attached Judicial District Map (See Exhibit G "Maps: NYS Judicial Districts")) and (ii) county depicted on the attached greater New York Tri-State Area Map (Exhibit G "Maps: NYS Judicial Districts")). Any material reduction in the number of Participating Providers in a Judicial District or New York tri-state area county, or in the aggregate number of Participating Providers, shall constitute a default under the awarded contract.

#### III. AWARD

#### Term of Award

A single estimated quantity term contract ("Contract") will be awarded for an initial term of **two** (2) years ("Initial Term"). JBO reserves the right to renew such Contract for **three** (3) additional one (1) year periods (each, a "Renewal Term") upon the same terms and conditions excluding pricing.

JBO further reserves the right to extend the Contract for a period not to exceed six (6) months ("Extension Term") upon written notification to awarded contractor prior to the expiration date of the Initial Term or the first Renewal Term, upon the same terms and conditions excluding pricing. The Contract, renewals and extension thereof are subject to the approval of the NYS Attorney General and the NYS Comptroller.

#### IV. PRICING

## **Composite Rates**

Plan premiums shall be payable by UCS monthly on the basis of a "Composite Rate."

For purposes of this bid, the "Composite Rate" shall be computed by counting enrolled Employee Members and Retired Members ("together, for purposes of computing the Composite Rate, "Enrollee Members")only during the month in which a premium is payable; Dependent/Family Members shall not be counted in determining the Composite Rate. As an example below:

If, in January, 2019, there are 2,000 Employee Members, 1,000 Retired Members, and 2,500 Dependent/Family Members, and the annual Composite Rate is \$12.00, the premium payable for January 2019 would be \$3,000:

**2,000** (Employee Members) + **1,000** (Retired Members) **x** <u>\$12.00</u> (annual Composite Rate) 12 (months)

The Composite Rate will remain unchanged during for the first **two years** of the awarded contract, but shall be subject to increase once annually as of the commencement date of any subsequent contract year, Renewal Term or Extension Term, as provided in the section below entitled, "Composite Rate Increases."

Bidder must underwrite the Plan without payment of commissions to third parties.

#### **Composite Rate Increases**

Requests for composite rate increases will be required to be submitted in writing to the JBO no later than one hundred and twenty (120) days prior to the end of the period immediately preceding the period to which the increase would apply. Requests for Composite Rate increases will be required to include a justification for each component of the Composite Rate for which an increase is requested supported by the appropriate back-up satisfactory to UCS, including claims experience data and other criteria. The Insurer will also be required to supply any additional documentary evidence, clarification, greater detail or alternate analyses of the documentary evidence supporting the proposed rate increase that may be requested by UCS. Written notice of any such request ("Increase Request Notice") must be submitted in accordance with the notification provisions of the awarded contract to:

Keith A. Miller
Deputy Director for Judiciary Benefits
NYS Office of Court Administration
Judiciary Benefits Office
25 Beaver Street - Room 1053
New York, New York 10004

UCS shall indicate its acceptance or rejection, in its sole discretion, of any Increase Request Notice by delivering written a written response thereto ("Increase Response Notice") on or before one hundred twenty (120) days from its receipt of the Increase Request Notice. If UCS rejects such request, the Plan shall be terminated on a date specified in the Increase Response Notice, which date shall be not more than one hundred eighty (180) days from the receipt by UCS of the Increase Request Notice. In such event the Composite Rate presently in effect will remain unchanged until the Plan is so terminated. If UCS approves such request, or does not deliver an Increase Response within the time provided, the increase request shall be deemed accepted as of the date specified in the Increase Request Notice, and, as the case may be, shall be applied and be payable retroactively.

## **Billing**

Vendor shall submit true and accurate invoices of premiums due on a monthly basis to: Keith Miller, Deputy Director for Judiciary Benefits, OCA Judiciary Benefits Office, 25 Beaver Street, R-1053, New York, NY 10004, or such other person or address as UCS/OCA shall designate.

Account billings must give an accurate breakdown of Active, Retiree, COBRA members receiving Group Vision Benefits coverage.

Payment shall be made monthly in arrears and shall be made within thirty (30) days of submission by Vendor and approval by UCS of invoices satisfactory to UCS and OSC.

# V. METHOD OF AWARD

A single contract will be awarded to the bidder achieving the highest, overall points rating (maximum 100 points) based upon the criteria set forth below. UCS shall establish an evaluation committee to review all proposals received in a timely manner pursuant to the following criteria and assigned points:

1. Cost Max. 40 points

Lowest cost is defined as the lowest total cost for initial 2-year term. (See Pricing Sheet.)

2. Organizational Resources and Experience

Max. 60 points

The following criteria will be evaluated:

•	Network of providers	Max.	20 points
•	Relevant experience	Max.	15 points
•	Claims administration and Member support/service	Max.	10 points
•	Insurer administration (including account team, record		
	maintenance, audit plan and reporting)	Max.	10 points
•	Value-added benefits options	Max.	5 points

In addition to the evaluation criteria set forth above, bidder shall be defined as 'responsible' in accordance with, but not limited to, compliance with this RFP's specifications, references, past performance history, financial stability and any other criteria necessary and reasonable to establish the bidder's responsibility (See paragraph "Responsible Bidder".)

# VI. MISCELLANEOUS

# **Auditing of Files by UCS**

The UCS reserves the right to regularly audit membership/enrollment and claims data maintained by Insurer.

OCA/HR-235 BID OPENING DATE: March 27, 2019 GROUP VISION BENEFITS PLAN at 3:00 PM

#### List of Exhibits

Exhibit A Scope of Services and Program Requirements

Exhibit B Pricing Sheet

Exhibit C.1 Active Census (Excel) January 1, 2018- Bidders must not change the data provided

in Exhibit C.1.

Exhibit C.2 Retiree Census (Excel) January 1, 2018- Bidders must not change the data provided

in Exhibit C.2.

Exhibit D Frames/Lenses Choices

Exhibit E UCS 2019 Legal Holidays Observed

Exhibit F Utilization 2016 and 2017 Reports

Exhibit G Maps: NYS Judicial Districts and Greater New York Tri-State Area

## **Subcontracting**

No subcontracting or outsourcing is permitted.

## VII. The RFB/RFP PROCESS: GENERAL SPECIFICATIONS

#### **Note to Bidders**

1. Attachment I - Standard Request for Bid Clauses & Forms and Attachment IV-Procurement Lobbying Law required forms

In addition to such other specifications and criteria as are presented herein, the NYS Unified Court System Attachment I - Standard Request for Bid Clauses & Forms , and Attachment IV - Disclosure of Prior Non-Responsibility Determination (UCS 420) and Affirmation of Understanding and Agreement (UCS 421) pursuant to the Procurement Lobbying Act, which must be downloaded or printed from the UCS Contract & Procurement website under "Addenda" for the appropriate solicitation, are incorporated and made a part of this solicitation.

#### 2. Attachment III - Vendor Responsibility Questionnaire

The NYS Unified Court System (UCS) is required to conduct a review of a prospective contractor to provide reasonable assurances that the vendor is responsible. The required Vendor

Responsibility Questionnaire is designed to provide information to assist UCS in assessing a vendor's responsibility prior to entering into a contract with the vendor. Vendor responsibility is determined by a review of each prospective contractor's legal authority to do business in New York State, business integrity, financial and organizational resources, and performance history (including references).

The UCS recommends that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. However, vendors may choose to complete a paper questionnaire and submit it with their proposal.

Online Questionnaire: To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <a href="http://www.osc.state.ny.us/vendrep/index.htm">http://www.osc.state.ny.us/vendrep/index.htm</a> or go directly to the VendRep System online at <a href="https://portal.osc.state.ny.us/Enrollment/login">https://portal.osc.state.ny.us/Enrollment/login</a>. Vendors must provide their New York State Vendor Identification Number when enrolling (see paragraph headed 'New York State Vendor File Registration' for instructions on obtaining a Vendor Identification Number.) For VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at <a href="https://creativecommons.new.org/linearing/linearing/">https://creativecommons.new.org/<a href="https://creativecommons.new.org/">https://creativecommons.new.org/<a href="https:

Bidders who file the Vendor Responsibility Questionnaire online via the OSC VendRep System are requested to checkmark the appropriate box on the Document Enclosure Checklist. Please note that online submissions must be certified and dated/updated not more than six (6) months prior to the bid opening date of this RFB/RFP. Bidders' authorized signature of the RFB/RFP form will serve as confirmation that bidders have knowingly filed their questionnaire online if the paper questionnaire is not included with the bidder's submission.

<u>Paper Questionnaire</u>: Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website <a href="https://www.osc.state.ny.us/vendrep/forms\_vendor.htm">www.osc.state.ny.us/vendrep/forms\_vendor.htm</a> or may contact the UCS or the Office of the State Comptroller's Help Desk for a copy of the paper form.

#### 3. New York State Vendor File Registration

Prior to being awarded a contract pursuant to this solicitation, the bidder(s) must be registered in the New York State Vendor File (Vendor File) administered by the OSC. This is a central registry for all vendors who do business with New York State agencies and the registration must be initiated by a State agency. Following the initial registration, a unique New York State tendigit vendor identification number (Vendor ID) will be assigned to vendors for usage on all future transactions with New York State. Additionally, the Vendor File enables vendors to use the Vendor Self-Service application to manage certain vendor information in one central location for all transactions related to the State of New York.

If the bidder is already registered in the Vendor File, the vendor must enter the vendor's tendigit Vendor ID on the first page of this bid document.

**If the bidder is not currently registered in the Vendor File,** upon award of a contract the Bidder must complete the OSC Substitute W-9 Form

(http://www.osc.state.ny.us/vendors/forms/ac3237s\_fe.pdf) and submit the form to UCS. The UCS will initiate the vendor registration process for the awarded contractor. Once the process is initiated, awarded contractor will receive an e-mail identifying their unique ten-digit Vendor ID and instructions on how to enroll in the online Vendor Self-Service application. For more information on the Vendor File please visit the following website: http://www.osc.state.ny.us/vendor\_management/.

#### Online RFB/RFP Package: Disclaimer

Bidders accessing any UCS/UCS/OCA solicitations and related documents from the New York State UCS website <a href="www.nycourts.gov/admin/bids">www.nycourts.gov/admin/bids</a> under "Current Solicitations" shall remain solely and wholly responsible for reviewing the respective solicitation & bid documents on the internet regularly, up to the scheduled date and time of the bid/proposal due date, to ensure their knowledge of any amendments, addenda, modifications or other information affecting the solicitation or bid documents in question.

#### Bid Response/Proposal: Original and Copies

Bidders shall submit all the following required **original RFB/RFP documents:** Bid/Proposal; Executed RFB/RFP Form; Attachment I - pages 3, 4, of 10; Attachment III - Vendor Responsibility Questionnaire (questionnaire may be filed electronically with OSC); Attachment IV - Disclosure of Prior Non-Responsibility Determinations UCS 420 and Affirmation of Understanding and Agreement UCS 421; proof of Workers' Compensation and Disability Benefits insurance coverage (See "Insurance Requirements"); and any other required documentation, brochures, etc. listed on the Document Enclosure Checklist. Complete the paperwork on the forms provided with this solicitation unless otherwise requested. Do not retype or amend any portion of this solicitation. Failure to provide all original documents and the requested number of copies may result in disqualification of a bidder's response.

#### **NYS OGS General Specifications**

New York State Office of General Services (NYSOGS) General Specifications (May 2015) are incorporated herein by reference, except to the extent any provision thereof is not applicable to UCS. Any reference in the NYSOGS General Specifications to 'Commissioner' shall be deemed to refer to the Chief Administrator of the Courts or the designee of the Chief Administrator. In the event of any conflict or express or implied ambiguity between this solicitation document, including attachments hereto, and the NYSOGS General Specifications, this solicitation

document shall take precedence. The NYSOGS General Specifications are available at: <a href="http://www.ogs.ny.gov/purchase/spg/pdfdocs/CL815.pdf">http://www.ogs.ny.gov/purchase/spg/pdfdocs/CL815.pdf</a>.

#### **Binding Nature of Bid/Proposal on Bidders**

All bids/proposals shall remain binding on bidders until such time as UCS/OCA provides written notification of its intent to award the contract to a specific bidder or until the bidder withdraws its bid/proposal in writing, whichever occurs first.

#### **Estimated Quantities**

Any quantities specified in this solicitation constitute estimates only, and accordingly no commitment or guarantee to reach any specified volume of business is made or implied.

#### **Compliance with Laws**

Awarded contractor(s) must comply with all applicable federal, state and local laws, rules and regulations, including but not limited to, fire, health and safety codes, prior to and during the provision of all services under the contract resulting from this RFB/RFP.

#### **Independent Contractor Status**

It is expressly understood and agreed that the awarded contractor's status shall be that of an independent provider of services and that no officer, employee, servant or subcontractor of the contractor is an employee of the UCS, OCA or State of New York. The awarded contractor shall be solely responsible for the work, assignment, compensation, benefits and personal conduct and standards of all such persons assigned to the provision of services. Nothing herein shall be construed to impose any liability or duty on the UCS, OCA or State of New York to persons, firms, consultants or corporations employed or engaged by the awarded contractor either directly or indirectly in any capacity whatsoever, nor shall the UCS, OCA or State of New York be liable for any acts, omissions, liabilities, obligations or taxes of any nature including, but not limited to, unemployment and Workers' Compensation insurance of the awarded contractor or any of its employees or subcontractors.

## Rejected and Unacceptable Bids/Proposals

UCS reserves the right to reject any and all proposals or bids submitted in response to this solicitation. In addition, UCS may reject any bids/proposals from any bidders who are in arrears to the State of New York upon any debt or performance of any contract; or who have previously defaulted on any contractual obligations, (as contracting party, surety or otherwise), or on any obligation to the State of New York; or who have been declared not responsible or disqualified by any agency of the State of New York, who have any proceeding pending against them relating to the responsibility or qualification of the bidders to receive public contracts, whose proposal is incomplete or otherwise non-responsive in any material respect, or who are found to be non-responsible based on any of the criteria specified in the section headed 'Responsible Bidder'. UCS also reserves the right to reject any bidder: (i) whose facilities and/or resources are, in the opinion of OCA, inadequate, too remote from the UCS locations to render services in a timely manner in accordance with all requirements of this solicitation; (ii) who does not provide references in accordance with the bid specifications, or whose references report significant failure to comply with specifications; or (iii) who are otherwise, in the opinion of OCA, unable to meet specifications.

#### Responsible Bidder

A bidder shall be defined as "responsible" in accordance with, but not limited to, references, past performance history, financial stability, the criteria set forth in paragraph 2 of the General Specifications (Attachment III-Vendor Responsibility Questionnaire), and the criteria set forth in the paragraph headed "Rejected and Unacceptable Bids/Proposals" as well as any other criteria necessary and reasonable to establish the bidder's responsibility.

#### Clarification/Correction of Bids/Proposals

In addition to any rights articulated elsewhere in this solicitation, UCS reserves the right to require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of a bidder's proposal and/or to determine a bidder's compliance with the requirements of this solicitation. This clarifying information, if required in writing by UCS, must be submitted by the bidder, in accordance with formats as prescribed by UCS at the time said information is requested and, if received by the due date set forth in UCS's request for clarification, shall be included as a formal part of the bidder's proposal. Clarifying information, if any, whether provided orally, visually or in writing will be considered in the evaluation process. Failure to provide required information by its associated due date may result in rejection of the bidder's proposal. Nothing in the foregoing shall mean or imply that it is obligatory upon UCS to seek or allow clarifications or corrections as provided for herein.

#### References

Each bidder must provide at least three (3) references, other than UCS, including the company/agency name, complete address, contact name, title, telephone number and email address, for whom the bidder has provided similar services at any time during the past three (3) years.

#### **Indemnity**

Awarded contractor shall indemnify, defend and hold harmless UCS, its officers and employees from and against any and all claims, causes of action, damages, costs, liabilities and expenses of any kind (including reasonable attorney's fees and the cost of legal defense) which UCS may

incur by reason of: (i) awarded contractor's breach of any term, provision, covenant, representation or warranty contained in the contract awarded as a result of this bid; (ii) any act, omission, negligence or intentional misconduct of awarded contractor or its employees, subcontractors, agents, volunteers or of other persons under its direction and control; (iii) awarded contractor's performance or failure to perform under the contract; and (iv) enforcement by UCS of the awarded contract or any provisions thereof.

#### **Unified Court System Self-Insurance**

UCS, a New York State governmental entity, is self-retained for risk of loss and liability.

#### **Insurance Requirements**

Awarded contractor shall be required to maintain during the term of the contract, including any renewal terms, at their own cost and expense:

1. Workers' compensation and disability benefit insurance coverage as required under NYS law. Each vendor must provide with its proposal proof of such workers' compensation and disability benefits insurance coverage or, if it is legally exempt from such coverage, proof of exemption. Vendor must obtain the appropriate Workers Compensation Board forms from its insurance carrier or licensed agent, or must follow the procedures set forth by the Workers' Compensation Board for obtaining an exemption from coverage. See Workers' Compensation Board website at <a href="http://www.wcb.ny.gov">http://www.wcb.ny.gov</a> under "Forms" for a manual listing required forms and procedures. Any questions regarding workers' compensation coverage requirements or debarments should be directed to:

#### Workers' Compensation Board

#### Bureau of Compliance

(518) 462-8882

(866) 298-7830

#### Only the following forms will be accepted:

### Proof of Workers' Compensation Coverage

- **Form C-105.2** Certificate of Workers' Compensation Insurance issued by private insurance carriers; or
- Form U-26.3 issued by the State Insurance Fund; or
- Form SI-12 Certificate of Workers' Compensation Self-Insurance; or
- Form GSI-105.2 Certificate of Participation in Workers' Compensation Group Self-Insurance; or
- **Form CE-200** Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage.

#### Proof of Disability Benefits Coverage

- **Form DB-120.1** Certificate of Disability Benefits Insurance, or
- Form DB-155 Certificate of Disability Benefits Self-Insurance; or
- **Form CE-200** Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage.

On forms that have a space for a certificate holder to be listed, the carrier must enter:

NYS Unified Court System Office of Court Administration 25 Beaver Street, Room 850 New York, NY 10004

The insurance carrier will notify the certificate holder if a policy is canceled.

Please note: An ACORD Certificate of Insurance is not acceptable proof of NYS workers' compensation or disability benefits insurance coverage.

For additional information regarding worker's compensation and disability benefits requirements, please refer to the New York State Workers' Compensation Board website at: <a href="http://www.wcb.ny.gov">http://www.wcb.ny.gov</a> under "Employers/Businesses."

2. Commercial General Liability Insurance (bodily injury and property damage on an occurrence basis), contractual and products/completed operations liability coverage, and auto liability with minimum limits as follows:

Bodily Injury and Property Damage	\$1 million, per occurrence, \$2million, aggregate
Personal Injury and Advertising:	\$1 million aggregate
Contractual and Products/ Completed Operations	\$2 million aggregate
Auto Liability, Combined single limits	\$1 million

Commercial General Liability insurance coverage shall be obtained from commercial insurance carriers licensed to do business in the State of New York.

#### **Confidentiality**

Bidder acknowledges that any and all information, records, files, documents or reports contained in any media format provided to the bidder by the court, or which may be otherwise encountered by bidder shall be considered extremely confidential and shall be handled accordingly at all times. Neither the bidder nor any of its employees, servants, Contractors, agents or volunteers shall at any time be permitted to utilize such confidential information for any purpose outside the scope of any resulting agreement without the express prior written authorization of UCS. Any breach of this confidentiality by the bidder or by any of its employees, servants, subcontractors, agents, or volunteers may result in the immediate termination of any resulting agreement by UCS and may subject the bidder to further penalties.

Awarded Contractor shall use, and require its employees and authorized agents to use, at least the degree of care a reasonably prudent person would use to protect and prevent improper access to the records.

#### **Confidential/Proprietary Information**

If applicable, bidders should specifically identify those portions of the proposal deemed to contain confidential or proprietary information or trade secrets, and must provide justification why such material, upon request, should not be disclosed to parties other than UCS. Bidders are advised that any material deemed confidential by bidder may still be subject to disclosure in connection with any governmental or judicial proceeding or inquiry or as may be required by applicable law, including but not limited to Article 6 of the New York Public Officers Law (Freedom of Information Law). Such confidential/proprietary information must be easily separable from the non-confidential sections of the proposal.

#### **Financial Stability**

Upon request by UCS, bidder shall provide its audited financial statements prepared in accordance with GAAP-Generally Accepted Accounting Principles for the past three (3) consecutive years and a copy of its last three (3) annual reports.

#### **Termination**

Early termination of the contract for cause may result in, among other consequences, all remedies available to UCS and New York State, the awarded contractor both being declared non-responsible by the UCS/UCS/OCA, pursuant to the UCS and Office of the State Comptroller's guidelines on vendor responsibility and in the contractor's removal from the UCS/UCS/OCA's bidders list for future solicitations.

#### **Implied Requirements**

Products and services that are not specifically requested in this solicitation, but which are necessary to provide the functional capabilities proposed by the bidder, shall be included in the offer except as specified herein.

#### **Silence of the Specifications**

The apparent silence of the specifications contained as part of this package as to any detail or to the apparent omission of a detailed description concerning any point, shall be regarded as meaning that only the best commercial practices are to prevail. All interpretations of these specifications shall be made on the basis of this statement.

BID OPENING DATE: March 27, 2019

at 3:00 PM

# EXHIBIT A/SCOPE OF SERVICES AND PROGRAM REQUIREMENTS

# I. BENEFITS DESCRIPTION

#### **Examinations**

On an annual basis, measured from the date of service of the Active or Retired Member ("Benefit Year"),

Members shall be entitled to: one eye examination with dilation (when professionally indicated).

#### Eyeglasses/Contact Lenses

Per Benefit Year:

Employee Members shall be entitled to: the choice of two (2) pairs of eyeglasses (lenses and frames), including a VDT pair, or contact lenses (in lieu of eyeglasses).

Retired Members and Dependent/Family Members shall be entitled to: the choice of one (1) pair of eyeglasses (lenses and frames), or contact lenses (in lieu of eyeglasses).

Awarded contractor (sometimes hereinafter, "Insurer") will issue authorizations to Participating Providers on behalf of eligible members for benefit utilization. Authorizations shall be valid for forty-five (45) days. Members shall be permitted to split benefits between eye examinations and materials, and between in-network and out-of-network Participating Providers.

#### Additional Benefits/Value-Added Options

Insurer shall list in detail any additional benefits and/or value-added options it will make available to Members. Additional benefits and/or value-added options shall be optional to Members and <u>at no increase in Composite Rates or other cost or expense to the UCS</u>.

# II. PLAN REQUIREMENTS

#### Annual Deductible

- In-Network: - None

- Out-of-Network: \$25.00 per Member

#### OCA/HR-235 GROUP VISION BENEFITS PLAN

BID OPENING DATE: March 27, 2019 at 3:00 PM

#### **Annual Maximum Benefit**

- In-Network: No mandatory limit

- Out-of-Network: \$150.00 per Member

<u>Waiting Period</u>: Plan coverage will begin the first day of the month following 28 consecutive days of continuous employment by an eligible UCS employee. Plan coverage for eligible dependent/family members will begin as of the date of coverage of the eligible employee.

#### Contribution to Plan Premium by Member - None

<u>Eligibility - Active Employees</u> - Judges, Justices, Management Confidential and other non-judicial unrepresented employees who are working at least half-time on a regularly scheduled basis.

<u>Eligibility - Retired Employees -</u> Active employees who meet a ten (10) year service requirement and retire directly from the UCS, and are not eligible for the New York City Management Benefits Fund (each, as determined by JBO).

<u>Eligibility - Dependents/Family of Active and Retired Employees</u> - Spouses, domestic partners, dependent children, children up to the age of 26, and children older than 26 deemed eligible by the New York State Department of Civil Service.

#### Eligibility standard for dependents age 26 or older

#### Disabled Children:

Disabled children may be eligible for coverage after turning age 26. To be eligible, the child must meet the following requirements:

- Be unmarried
- Be incapable of self-support by reason of mental or physical disability
- Be incapacitated before the age at which dependent coverage would otherwise be terminated

The Unified Court System, working in conjunction with the Department of Civil Service, will be responsible for ensuring that requirements are met.

Children include natural children, stepchildren, children of domestic partners, and legally adopted children, including children in a waiting period prior to finalization of adoption.

Enrollment - Enrollment is determined by JBO in its sole discretion.

Plan Maintenance - The Insurer will be responsible for the following:

- Determine whether services and payments were provided to Members;
- Account billings are in compliance with the terms of the awarded contract;
- Maintain satisfactory records of all Plan payments provided;
- Compliance with all applicable laws, rules and regulations;
- Ensure security and confidentiality of Member information in accordance with the specifications of this RFB, and as required by law.

#### III. PLAN SPECIFICATIONS

#### 1. Benefits Options Available:

In-Network - Participating Providers: Use by Member of Participating Providers for covered service benefits, paid in full by the Insurer directly to the Participating Provider.

Out-of-Network - Indemnity Reimbursement: Selection by Member of out-of-network providers of Member's choice for covered service benefits. Choice by Member of: direct payment to of out-of-network provider and reimbursement by Insurer to Member or filing claim with Insurer, each (reimbursement or filing of claim) up to prescribed limits under the Plan. The indemnity reimbursement cannot be used to cover out-of-pocket Member costs incurred under the in-network option.

Members may change the choice benefit option (in-network or out-of-network) each Benefit Year. Different options may be selected within a family/dependent unit during the same Benefit Year.

#### 2. Plan Benefits, Frequencies and Costs:

<u>Eye Examinations</u> - One per Benefit Year, including dilation as professionally indicated (as provided in the Section I above).

Co-payment - None

In-Network - Covered

Out-of-Network - The first \$25 of covered expenses are paid in full, then 80% of the remaining covered expenses will be paid, up to a maximum of \$150 per person per Benefit Year.

Spectacle Lenses - One or two per Benefit Year (as provided in the Section I above).

Co-payment - None

In-Network - Covered (See Exhibit 3 for options that will be required to be covered under the Plan at the charges indicated therein.)

Out-of-Network - The first \$25 of covered expenses are paid in full, then 80% of the remaining covered expenses will be paid, up to a maximum of \$150 per person per Benefit Year.

<u>Frames</u> - One or two per Benefit Year (as provided in the Section I above)

Co-payment - None

In-Network - Selection from in-network Participating Provider's plan covered basic frames or a \$ 125 retail credit toward a Participating Provider's non-covered selection of premium frames.

Out-of Network - The first \$25 of covered expenses are paid in full, then 80% of the remaining covered expenses will be paid, up to a maximum of \$150 per person per Benefit Year.

Contact Lenses Elective - Each Benefit Year, as provided below

Co-payment - None

In-Network - Covered standard, soft, daily wear disposable or planned replacement contact lenses may be selected in lieu of eyeglasses, or a \$105 credit may be applied toward non-covered contact lenses offered by a Participating Provider. Participating Provider to give specific co-payment information to Member for the type of lenses required. Medically necessary contact lenses are covered in full (prior approval is required, to be determined in a fair, just and reasonable manner by Insurer).

Out of Network - The first \$25 of covered expenses are paid in full, then 80% of the remaining covered expenses will be paid, up to a maximum of \$150 per person per Benefit Year.

New patient of Participating Provider or first-time contact lenses wearers are entitled to an initial supply (two multi-packs) of lenses, together with all necessary visits for proper fitting and recommended follow-up care. Existing contact lens wearers are entitled to four multi-packs of lenses per Benefit Year.

#### VDT Benefit (Employee Members Only)

VDT eye examination, frame and lenses - One per Benefit Year, including dilation as professionally indicated. VDT examination frame and lenses will count against Employee Member's Benefit Year allowance.

#### Co-payment - None

In-Network - Selection from the exclusive in-network Participating Provider's plan frames or a \$30 retail allowance toward Participating Provider's non-Plan selection of frames.

#### Lenses and frames:

Insurer/Participating Provider shall provide lenses and frames that are first quality and free of defects, including choice by Member of glass or plastic lenses in single, bifocal, tri-focal or progressive lenses.

Insurer shall be responsible for ensuring that Participating Providers maintain a varied and contemporary selection of Plan frames, including but not limited to styles in metal or plastic for men, women and children, half-eye styles, protective sport goggles and designer models. Plan frames must be available at two separate benefit levels: basic and premium. The Insurer must contractually require Participating Providers to stock a minimum of ten (10) basic frame styles, twenty (20) premium frame styles. The Insurer may not count a different size or different color of the same frame when assessing compliance with the minimum frame selection.

The Insurer must provide a one-year unconditional warranty against breakage for all Plan frames and lenses that are (i) dispensed by or on behalf of Participating Providers under the Plan. The warranty may be provided by the respective laboratory, manufacturer or Participating Provider; however, in the failure or absence thereof, such warranty shall be the responsibility of the Insurer.

#### 3. Items Not Fully Covered by the Plan

Plan Benefits, unless provided as necessary by a legally qualified ophthalmologist, optometrist, optician or other licensed eye care professional are not covered. In addition, the following are not covered by the Plan:

- 1. Sunglasses or tinted lenses which do not require a prescription.
- 2. Repair or replacement of damaged frames or replacement of scratched lenses (except if defective); replacement of lost lenses or frames.
- 3. Services or supplies for which the Member incurred no expense or which are compensable under a Workers' Compensation Law or a similar law.

# IV. CLAIMS ADMINISTRATION

Insurer shall:

- 1. Provide the Account Manager's business address, phone and fax numbers as well as e-mail address.
- 2. Maintain a nationwide toll-free number to service Members. An adequate staff of fully trained, courteous customer service representatives and supervisors must be available, at a minimum, between the hours of 9:00 AM EST and 5:00 PM EST, Monday through Friday, except for legal holidays observed by the UCS (See attached Exhibit 3). Customer service representatives and supervisors must be based in the United States [Why?]. Customer service representatives must be able to respond to questions and inquiries regarding benefits, claims status and explanations of benefits and the Insurer must adequately resolve Member inquiries, complaints, problems and questions received by telephone or by mail within a reasonable time.
- 3. Maintain complete and accurate records for all paid claims, closed claims and incurred claims; such records to be provided to JBO upon request.
- 4. Analyze and monitor claim submissions to identify network inadequacies and possible fraud.
- 5. Maintain the security of claims file as required under the RFP.
- 6. Maintain a back-up system and disaster recovery system for processing claims in the event that the primary claims payment system fails or is not accessible. Bidder shall provide a written description of its back-up system and disaster recovery system with their bid response.
- 7. Create, maintain and update as and when necessary an enrollment database for all Members containing the data fields listed in the sample file below:

#### Monthly Member File

Field Name	Start	End	Field Length	Comments
Empl_Status				
Member Alt. ID Number				
Member Last Name				

Member First Name		
Member Middle Initial		
Member SSN		
Dependent Number		
Relationship		
Date of Birth		
Sex		
Eligible Date		
Address 1		
Address 2		
City		
State		
Zip 5		
Zip 4		

#### V. REPORTS/SYSTEMS/DATA COMMUNICATION

- 1. UCS will provide Insurer via electronic transmission with a monthly Member update file in the format illustrated by Exhibit 5. The file will not contain header or trailer records; transmittal forms containing control total will be provided with all files. The file will contain data for active Members. The monthly enrollment file will be submitted to the Insurer vendor each month.
- 2. The Insurer must advise the JBO of verification that the monthly update file was received and must update its Member database within two (2) business days of receipt of the file from JBO.
- 3. Prior to the last day of each quarter, the Insurer will deliver to JBO via electronic transmission an enrollment reconciliation file. The file will not contain header or trailer records; transmittal forms containing control total will be provided with all files. The file will contain a record of each Member included in the Insurer's database. The file will be used to produce exception reports.
- 4. Provide a utilization report to JBO, in form and content satisfactory to JBO, every 6 months during the term of the awarded contract.
- 5. Insurer must maintain up-to-date data transmission capability and software to communicate and interface with UCS.

# **EXHIBIT B/PRICING SHEET**

Do not alter this Pricing Sheet in any manner. Any changes, deletions, or additions to the Pricing Sheet may result in rejection of the bid response.

Bidder is required to quote its rates on a composite per Enrollee Member rate per month basis and to compute total costs. In case of a calculation error in total cost, UCS reserves the right to make mathematical corrections based the quoted composite per Enrollee Member rate per month.

Monthly Composite Rate per Enrollee Member	X	Estimated number of Enrollee Members	=	Total monthly cost	X 12	= Total annual cost	X 3 2	= Total 2-year cost
\$		3775		<u>\$</u>		<u>\$</u>		<u>\$</u>

Company Name:		
Authorized Officer's Name and	d Title:	
Signature:		 
Date:		

**EXHIBIT C.1. ACTIVE CENSUS -**January 1, 2018- is a separate Excel document.

**EXHIBIT C.2. RETIREE CENSUS** -January 1, 2018- is a separate Excel document.

# **EXHIBIT D - FRAMES/LENSES CHOICES**

The Bidding/Participating Provider shall provide lenses and frames that are first quality and free of defects including the following frames/lenses choices which shall include Member contribution as indicated below:

Frame/Lenses Choices	<u>Dress</u>	<u>VDT</u>
Basic frames	\$ 0.00	\$15.00
Premium frames	$TBD^1$	\$35.00
Polycarbonate lenses	\$ 0.00	\$30.00
Scratch-resistant lens coating	\$ 0.00	\$20.00
Photogrey Extra® (sun-		
sensitive) glass lenses	\$ 0.00	\$20.00
Ultraviolet (UV) coating	\$ 0.00	\$12.00
ARC (anti-reflective coat)		
Standard \$35.00	\$35.00	
Premium \$48.00	\$48.00	
Ultra	\$60.00	\$60.00
Photo-sensitive plastic lenses	\$65.00	\$65.00
High-index (thinner and		
lighter) lenses	\$55.00	\$55.00
Progressive addition lenses <sup>2</sup>		
Standard	\$ 0.00	\$50.00
Premium	\$40.00	\$90.00

<sup>&</sup>lt;sup>1</sup> \$125 Member credit

<sup>&</sup>lt;sup>2</sup> Progressive addition multifocals can be worn by most people. Conventional bifocals will be supplied for anyone who is unable to adopt to progressive addition lenses; however, the copayment (if any) will not be refunded.

OCA/HR-235
GROUP VISION BENEFITS PLAN

# Exhibit D (cont.)

Polarized lenses	\$75.00	\$75.00
Blended invisible bifocals	\$ 0.00	\$ 20.00
Intermediate lenses	\$ 0.00	\$ 0.00

# **EXHIBIT E** UCS Legal Holidays Observed – 2019

2019 LEGAL HOLIDAYS	DAY	DATE
New Year's Day	Tuesday	January 1
Dr. Martin Luther King, Jr. Day	Monday	January 21
Lincoln's Birthday	Tuesday	February 12
President's Day	Monday	February 18
Memorial Day	Monday	May 27
Independence Day	Thursday	July 4
Labor Day	Monday	September 2
Columbus Day	Monday	October 14
Election Day	Tuesday	November 5
Veterans Day	Monday	November 11
Thanksgiving Day	Thursday	November 28
Christmas Day	Wednesday	December 25

# **EXHIBIT F – UTILIZATION 2016 AND 2017 REPORTS**

# **EXHIBIT G – MAP: NYS JUDICIAL DISTRICTS**

#### **Group: UCS**

# **Reporting Period: January 2016 - December 2016**

#### The following provides an overview of your Davis Vision Plan.

Utilization:	The In-Network utilization for the reporting period is:		100%
	The distribution of vision care services for your membership for the reporting	period is:	
		Exam Only-	4.0%
		Materials Only-	67.0%
		Exam and Materials-	29.0%
		Total-	100.0%
Claims:	The number of claims paid in the reporting period is:		514
Enrollment:	The average monthly membership for the reporting period is:		
		Subscribers	2,320
		Dependents	0
		Lives	2,320
			185
	Service for the reporting period is:		
	Percentage of Customer Service calls resolved during the first call for the reporting period is:		98%
	Total web logins by your membership for the reporting period is:		216

Client Statistics	Shown for the following Date Range			
	Jan-16 thru Dec-16	Jan-15 thru Dec-15		
Average Number of Covered Subscribers	2,320	2,271		
Average Number of Covered Dependents	0	0		
Average Number of Covered Lives	2,320	2,271		
Number of In-Network Claims	514 (100%)	522 (100%)		
Number of Out-of-Network Claims	0 (0%)	0 (0%)		
Overall Utilization Rate	22.2%	23.0%		

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# Reporting Period: January 2016 - December 2016

tilization by Service (#/%)	Shown for the following Date Range					
	Jan-16 thru [	Ja	Jan-15 thru Dec-15			
	ucs	Similar Business Segment*	UCS		nilar Business Segment*	
Eye Examinations	170		197			
Plan Frame	342 (75.7%)	69.5%	335	(74.0%)	68.8%	
Non-Plan Frame	110 (24.3%)	30.5%	118	(26.0%)	31.2%	
Total Frames	452		453			
Single Vision Lenses	320 (65.3%)	41.6%	302	(61.1%)	41.7%	
Bifocal Lenses	128 (26.1%)	29.6%	151	(30.6%)	29.0%	
Trifocal Lenses	42 (8.6%)	7.0%	39	(7.9%)	7.3%	
Medically Necessary Contact Lenses	0 (0.0%)	0.2%	0	(0.0%)	0.2%	
Contact Lenses	0 (0.0%)	21.5%	2	(0.4%)	21.8%	
Total Lenses	490		494			
Plan Contact Lenses	0 (0.0%)	4.7%	2	(100.0%)	4.7%	
Non-Plan Contact Lenses	0 (0.0%)	95.3%	0	(0.0%)	95.3%	
Total Contact Lenses	0		2			
Similar Business Segment		Government			Governme	

# Utilization

Period	Avg Monthly Subscriber Lives	Avg Monthly Dependent Lives	Avg Total Monthly Lives	Total # of Claims	Total Claims Expense	Avg. Expense per Claim	% of Utilization
2016/1	2,294	0	2,294	40	\$3,710	\$93	1.7%
2016/2	2,292	0	2,292	24	\$2,400	\$100	1.0%
2016/3	2,281	0	2,281	54	\$5,041	\$93	2.4%
2016/4	2,306	0	2,306	52	\$5,008	\$96	2.3%
2016/5	2,319	0	2,319	41	\$3,667	\$89	1.8%
2016/6	2,331	0	2,331	48	\$4,573	\$95	2.1%
2016/7	2,321	0	2,321	33	\$3,155	\$96	1.4%
2016/8	2,327	0	2,327	39	\$3,541	\$91	1.7%
2016/9	2,326	0	2,326	39	\$3,730	\$96	1.7%
2016/10	2,342	0	2,342	40	\$3,691	\$92	1.7%
2016/11	2,347	0	2,347	44	\$4,304	\$98	1.9%
2016/12	2,354	0	2,354	60	\$5,812	\$97	2.5%
Total	2,320	0	2,320	514	\$48,630	\$95	22.2%

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#### **Reporting Period: January 2016 - December 2016**

#### Shown for the following Date Range

# **Lens Options Ranking**

#### Jan-16 thru Dec-16

#### Jan-15 thru Dec-15

Long Ontions	UCS	Similar Business Segment*	UCS	Similar Business Segment*
Lens Options Polycarbonate Lenses	1 (43.7%)	1 (51.8%)	1 (43.3%)	2 (50.1%)
Scratch Protection	2 (18.8%)	2 (49.5%)	2 (22.4%)	1 (50.8%)
Premium Progressives	3 (18.4%)	4 (24.9%)	3 (19.3%)	4 (25.4%)
Anti-reflective Coating (ARC) - Premium	4 (16.9%)	5 (20.3%)	4 (16.9%)	5 (21.2%)
Anti-reflective Coating (ARC) - Ultra	5 (9.2%)	7 (17.7%)	6 (9.1%)	6 (18.5%)
High Index Lenses	5 (9.2%)	8 (12.2%)	7 (8.9%)	8 (12.1%)
Polarized	7 (9.0%)	11 (3.7%)	5 (9.6%)	11 (3.6%)
	8 (8.8%)	9 (10.1%)	8 (8.3%)	9 (8.9%)
Standard Progressives	- ,	3 (36.0%)	- ( )	- ( )
Plastic Photosensitive Lenses	9 (7.1%)	• (****)	9 (8.1%)	3 (35.6%)
Tinting	10 (6.7%)	15 (1.7%)	12 (4.9%)	15 (1.9%)
Anti-reflective Coating (ARC) - Standard	11 (6.5%)	6 (19.7%)	11 (5.5%)	7 (15.7%)
Edge Treatment	12 (5.5%)	10 (3.9%)	10 (7.1%)	10 (4.1%)
Oversize Lenses	13 (2.4%)	13 (2.7%)	13 (3.7%)	13 (2.8%)
Ultra Progressives	14 (2.0%)	12 (2.9%)	14 (3.3%)	14 (2.7%)
UltraViolet Coating	15 (1.4%)	14 (2.6%)	16 (1.0%)	12 (2.8%)
Intermediate Lenses	16 (0.4%)	18 (0.2%)	15 (1.2%)	18 (0.2%)
Photochromic Glass Lenses	17 (0.0%)	17 (0.2%)	17 (0.0%)	17 (0.3%)
Blended Lenses	17 (0.0%)	19 (0.0%)	17 (0.0%)	19 (0.0%)
Select Progressives	17 (0.0%)	16 (0.9%)	17 (0.0%)	16 (1.6%)
*Similar Business Segment		Government		Governmen

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# Reporting Period: January 2016 - December 2016

#### **Lens Option Value**

			Average Retail	Average	Total	% of
Lens Options	Service	Counts	Value	Member Cost	Savings	Savings
Polycarbonate Lenses	214	(43.7%)	\$60	\$30	\$6,420	50%
Scratch Protection	92	(18.8%)	\$40	\$20	\$1,840	50%
Premium Progressives	90	(18.4%)	\$250	\$90	\$14,400	64%
Anti-reflective Coating (ARC) - Premium	83	(16.9%)	\$70	\$48	\$1,826	31%
Anti-reflective Coating (ARC) - Ultra	45	(9.2%)	\$115	\$60	\$2,475	48%
High Index Lenses	45	(9.2%)	\$125	\$55	\$3,150	56%
Polarized	44	(9.0%)	\$95	\$75	\$880	21%
Standard Progressives	43	(8.8%)	\$175	\$50	\$5,375	71%
Plastic Photosensitive Lenses	35	(7.1%)	\$125	\$65	\$2,100	48%
Tinting	33	(6.7%)	\$15	\$0	\$495	100%
Anti-reflective Coating (ARC) - Standard	32	(6.5%)	\$55	\$35	\$640	36%
Edge Treatment	27	(5.5%)	\$25	\$0	\$675	100%
Oversize Lenses	12	(2.4%)	\$15	\$0	\$180	100%
Ultra Progressives	10	(2.0%)	\$460	\$140	\$3,200	70%
UltraViolet Coating	7	(1.4%)	\$20	\$12	\$56	40%
Intermediate Lenses	2	(0.4%)	\$160	\$0	\$320	100%
Photochromic Glass Lenses	0	(0.0%)	\$45	\$0	\$0	0%
Total	814		\$79,880	\$35,848	\$44,032	55%

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#### Reporting Period: January 2016 - December 2016

#### **Member Website Usage Detail Customer Service Calls Breakdown Member Logins** 216 Inquiry from Provider 26% Benefit Explanation 21% **Benefit Plan Information** 69 9% Eligibility Inquiry 19% 156 20% **Eligibility** Inquiry from Member 14% **Member Menu** 297 38% Claim Inquiry 11% **Provider Locate** 104 13% Member Inquiry 3% **Virtual Frame Collection** 159 20% **Provider Inquiry** 3% ID Cards/Document Request 2% General Fabrication Inquiry 1%

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**Reporting Period: January 2016 - December 2016** 

Group Code: UCS Report limited to the following SubGroup(s):

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Utilization:	The In-Network utilization for the reporting period is:		100%
	The distribution of vision care services for your membership for the reporting	period is:	
		Exam Only-	4.0%
		Materials Only-	66.0%
		Exam and Materials-	30.0%
		Total-	100.0%
Claims:	The number of claims paid in the reporting period is:		542
Enrollment:	The average monthly membership for the reporting period is:		
		Subscribers	2,359
		Dependents	0
		Lives	2,359
			126
	Service for the reporting period is:		
	Percentage of Customer Service calls resolved during the first call for the reporting period is:		99%
	Total web logins by your membership for the reporting period is:		198

Client Statistics	Shown for the fo	own for the following Date Range		
	Jan-17 thru Dec-17	Jan-16 thru Dec-16		
Average Number of Covered Subscribers	2,359	2,320		
Average Number of Covered Dependents	0	0		
Average Number of Covered Lives	2,359	2,320		
Number of In-Network Claims	542 (100%)	514 ( <del>100%</del> )		
Number of Out-of-Network Claims	0 (0%)	0 (0%)		
Overall Utilization Rate	23.0%	22.2%		

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# Reporting Period: January 2017 - December 2017

Itilization by Service (#/%)	Shown for the following Date Range					
	Jan-17 thru D	Jan-17 thru Dec-17			ec-16	
	ucs	Similar Business Segment*	ucs		nilar Business Segment*	
Eye Examinations	185		170			
Plan Frame	392 (82.7%)	71.6%	342	(75.7%)	69.5%	
Non-Plan Frame	82 (17.3%)	28.4%	110	(24.3%)	30.5%	
Total Frames	474		452	·		
Single Vision Lenses	320 (61.4%)	41.5%	320	(65.3%)	41.6%	
Bifocal Lenses	155 (29.8%)	29.6%	128	(26.1%)	29.6%	
Trifocal Lenses	46 (8.8%)	7.7%	42	(8.6%)	7.0%	
Medically Necessary Contact Lenses	0 (0.0%)	0.1%	0	(0.0%)	0.2%	
Contact Lenses	0 (0.0%)	21.0%	0	(0.0%)	21.5%	
Total Lenses	521		490			
Plan Contact Lenses	0 (0.0%)	5.5%	0	(0.0%)	4.7%	
Non-Plan Contact Lenses	0 (0.0%)	94.5%	0	(0.0%)	95.3%	
Total Contact Lenses	0		0			
Similar Business Segment		Government			Governme	

# Utilization

Period	Avg Monthly Subscriber Lives	Avg Monthly Dependent Lives	Avg Total Monthly Lives	Total # of Claims	Total Claims Expense	Avg. Expense per Claim	% of Utilization
2017/1	2,350	0	2,350	48	\$4,413	\$92	2.0%
2017/2	2,341	0	2,341	51	\$4,782	\$94	2.2%
2017/3	2,314	0	2,314	51	\$4,741	\$93	2.2%
2017/4	2,355	0	2,355	32	\$3,036	\$95	1.4%
2017/5	2,370	0	2,370	50	\$4,936	\$99	2.1%
2017/6	2,377	0	2,377	48	\$4,600	\$96	2.0%
2017/7	2,385	0	2,385	40	\$4,048	\$101	1.7%
2017/8	2,370	0	2,370	57	\$5,598	\$98	2.4%
2017/9	2,360	0	2,360	25	\$2,457	\$98	1.1%
2017/10	2,357	0	2,357	32	\$2,941	\$92	1.4%
2017/11	2,357	0	2,357	54	\$5,204	\$96	2.3%
2017/12	2,373	0	2,373	54	\$5,372	\$99	2.3%
Total	2,359	0	2,359	542	\$52,127	\$96	23.0%

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# Reporting Period: January 2017 - December 2017

#### Shown for the following Date Range

# **Lens Options Ranking**

#### Jan-17 thru Dec-17

#### Jan-16 thru Dec-16

Lens Options	UCS	Similar Business Segment*	UCS	Similar Business Segment*
Polycarbonate Lenses	1 (39.2%)	1 (50.9%)	1 (43.7%)	1 (51.8%)
Premium Progressives	2 (23.2%)	4 (23.5%)	3 (18.4%)	4 (24.9%)
Scratch Protection	3 (16.5%)	2 (47.4%)	2 (18.8%)	2 (49.5%)
Anti-reflective Coating (ARC) - Ultra	4 (15.9%)	6 (19.6%)	5 (9.2%)	7 (17.7%)
Anti-reflective Coating (ARC) - Premium	5 (11.1%)	7 (17.8%)	4 (16.9%)	5 (20.3%)
High Index Lenses	6 (10.2%)	8 (13.8%)	5 (9.2%)	8 (12.2%)
Polarized	7 (7.9%)	12 (3.7%)	7 (9.0%)	11 (3.7%)
Plastic Photosensitive Lenses	8 (7.7%)	3 (36.1%)	9 (7.1%)	3 (36.0%)
Edge Treatment	9 (6.3%)	11 (3.7%)	12 (5.5%)	10 (3.9%)
Standard Progressives	10 (6.0%)	9 (10.7%)	8 (8.8%)	9 (10.1%)
Anti-reflective Coating (ARC) - Standard	11 (4.4%)	5 (21.2%)	11 (6.5%)	6 (19.7%)
Tinting	12 (4.2%)	15 (1.3%)	10 (6.7%)	15 (1.7%)
Ultra Progressives	13 (2.9%)	10 (3.8%)	14 (2.0%)	12 (2.9%)
Oversize Lenses	14 (2.3%)	13 (2.7%)	13 (2.4%)	13 (2.7%)
UltraViolet Coating	15 (1.0%)	14 (2.5%)	15 (1.4%)	14 (2.6%)
Intermediate Lenses	16 (0.6%)	17 (0.1%)	16 (0.4%)	18 (0.2%)
Photochromic Glass Lenses	17 (0.2%)	18 (0.1%)	17 (0.0%)	17 (0.2%)
Blended Lenses	18 (0.0%)	19 (0.0%)	17 (0.0%)	19 (0.0%)
Select Progressives	18 (0.0%)	16 (0.4%)	17 (0.0%)	16 (0.9%)
Similar Business Segment		Government		Governmen

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# Reporting Period: January 2017 - December 2017

#### **Lens Option Value**

			Average Retail	Average	Total	% of
Lens Options	Service	Counts	Value	Member Cost	Savings	Savings
Polycarbonate Lenses	204	(39.2%)	\$60	\$30	\$6,120	50%
Premium Progressives	121	(23.2%)	\$250	\$90	\$19,360	64%
Scratch Protection	86	(16.5%)	\$40	\$20	\$1,720	50%
Anti-reflective Coating (ARC) - Ultra	83	(15.9%)	\$115	\$60	\$4,565	48%
Anti-reflective Coating (ARC) - Premium	58	(11.1%)	\$70	\$48	\$1,276	31%
High Index Lenses	53	(10.2%)	\$125	\$55	\$3,710	56%
Polarized	41	(7.9%)	\$95	\$75	\$820	21%
Plastic Photosensitive Lenses	40	(7.7%)	\$125	\$65	\$2,400	48%
Edge Treatment	33	(6.3%)	\$25	\$0	\$825	100%
Standard Progressives	31	(6.0%)	\$175	\$50	\$3,875	71%
Anti-reflective Coating (ARC) - Standard	23	(4.4%)	\$55	\$35	\$460	36%
Tinting	22	(4.2%)	\$15	\$0	\$330	100%
Ultra Progressives	15	(2.9%)	\$460	\$140	\$4,800	70%
Oversize Lenses	12	(2.3%)	\$15	\$0	\$180	100%
UltraViolet Coating	5	(1.0%)	\$20	\$12	\$40	40%
Intermediate Lenses	3	(0.6%)	\$160	\$0	\$480	100%
Photochromic Glass Lenses	1	(0.2%)	\$45	\$20	\$25	56%
Total	831		\$90,605	\$39,619	\$50,986	56%

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#### Reporting Period: January 2017 - December 2017

#### **Member Website Usage Detail Customer Service Calls Breakdown Member Logins** 198 Inquiry from Provider 31% Benefit Explanation 27% **Benefit Plan Information** 41 8% Inquiry from Member 17% **Eligibility** 97 20% Eligibility Inquiry 15% **Member Menu** 246 **50%** Claim Inquiry 8% 58 **Provider Locate** 12% ID Cards/Document Request 1% **Virtual Frame Collection** 51 **10%**

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