	<b>SOLICITATION ADDENDUM NO. 1</b> <b>RFP 19-23</b> <b>Administrative Services for Self-Funded Short-Term Disability and Public Safety Long-Term Disability</b>	<b>CITY OF GLENDALE</b> <b>Procurement Division</b> <b>5850 W. Glendale Avenue</b> <b>Suite 317</b> <b>Glendale, AZ 85301</b> <b>Phone: (623) 930-2866</b>
	Page 1 of 2  <b>Solicitation Due Date:</b> February 21, 2019 2:00 P.M. (Local Time)	

**The following questions, clarifications, and changes have been addressed in this Addendum No. 1 for Request for Proposal No. 19-23:**

**QUESTIONS:**

- 1) Does the City expect the TPA to cut disability payments or rather provide an advice to pay file for the City to issue payments?

**ANSWER:** TPA cuts checks

- 2) Can the City provide a loss data file for the short-term disability claims filed in 2018? How many claims remain open and active?

**ANSWER:** See attached **LTD claims-Redacted.**

- 3) Can the City provide a loss data file for the LTD disability claims filed in 2018? How many claims remain open and active?

**ANSWER:** See attached **LTD claims-Redacted.**

- 4) Please clarify if the City offers individual plans or group disability? Can you please answer this question immediately?

**ANSWER:** Group Only

- 5) Is the TPA expected to collect premiums?

**ANSWER:** No

- 6) Please provide the Benefit Plan(s) for Short Term Disability and Public Safety Long Term Disability?


**ANSWER:** See attached **LTD claims-Redacted.**

- 7) How many STD claims are currently open?

**ANSWER:** None

- 8) How many Public Safety Long Term Disability Claims are currently open?

**ANSWER:** See attached **LTD claims-Redacted.**

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9) Reports – Monthly Enrollment and Fees Paid – please describe or provide a sample of what you mean.

**ANSWER:** This is up to the Offeror to describe / define.

10) Please provide average durations.

**ANSWER:** unknown

11) Please provide the average number of STD and LTD reported each year.

**ANSWER:** See attached **LTD claims-Redacted.**

12) What the annual contract value for this scope of service?

**ANSWER:** Varies

**All other solicitation provisions, terms and conditions and scope of work shall remain the same. Offerors must acknowledge receipt and acceptance by returning this addendum with their proposal.**

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

**LTD Claims**

**Claims Paid for the Period 01/01/2017 through 12/31/2018**

Policy #	Policy Name	Part #	Acct #	Claim #	Last Name	First Name	Gender	Birth Date	Soc Sec Ind	Occupation Code	Incurred Date	Status	Total Amount
1000015		0	1	H66682			M	9/6/1972	N	N	08/30/2016	C-RTWPH	\$2,948.93
1000015		0	1	H66910			M	10/24/1956	N	N	09/04/2016	C-MAX	\$676.67
1000015		0	1	H66940			M	11/16/1991	N	N	08/06/2016	C-MAX	\$5,856.00
1000015		0	1	H69503			F	12/10/1971	N	N	12/31/2016	C-MAX	\$2,913.53
1000015		0	1	H72000			F	7/10/1960	N	N	01/04/2017	C-MAX	\$3,500.00
1000015		0	1	H74399			F	8/8/1960	N	N	02/14/2017	C-MAX	\$2,276.00
1000015		0	1	H74668			F	7/14/1954	N	O	10/21/2016	C-OOCC	\$80.06
1000015		0	1	H74745			M	6/20/1954	N	N	04/25/2017	C-MAX	\$2,465.00
1000015		0	1	H75637			M	2/27/1971	N	N	04/05/2017	C-MAX	\$2,168.00
1000015		0	1	H75682			F	6/18/1958	N	N	02/13/2017	C-MAX	\$510.00
1000015		0	1	H75856			F	9/23/1965	N	N	06/05/2017	C-MAX	\$50.01
1000015		0	1	H78238			M	5/1/1958	N	N	07/05/2017	C-MAX	\$2,872.00
1000015		0	1	H79466			F	7/5/1966	N	N	05/03/2017	C-MAX	\$6,156.00
1000015		0	1	H80784			F	9/15/1959	N	N	07/20/2017	C-MAX	\$2,627.20
1000015		0	1	H80797			M	1/24/1964	N	N	07/04/2017	C-MAX	\$5,743.33
1000015		0	1	H82938			F	9/17/1982	N	N	06/27/2017	C-MAX	\$6,006.00
1000015		0	1	H85372			M	1/6/1964	N	N	11/21/2017	C-MAX	\$3,241.00
1000015		0	1	H87276			M	4/17/1962	N	N	01/22/2018	C-MAX	\$187.23
1000015		0	1	H89044			F	6/18/1958	N	N	03/29/2018	C-MAX	\$3,403.00
1000015		0	1	H91329			M	2/4/1964	N	N	06/11/2018	C-MAX	\$5,580.00
1000015		0	1	H92432			F	1/27/1963	N	N	07/16/2018	C-MAX	\$50.00
<b>Acct # 1 Total :</b>													<b>\$59,309.96</b>
1000015		0	2	C51722			M	10/22/1946	Y	N	09/01/1998	ACTIVE	\$1,150.00
1000015		0	2	C67888			M	3/16/1944	Y	O	12/18/1998	ACTIVE	\$8,313.35
1000015		0	2	C96412			M	1/15/1960	Y	O	01/18/1999	ACTIVE	\$15,150.00
1000015		0	2	D18554			M	12/13/1955	N	O	11/10/1999	ACTIVE	\$44,353.20
1000015		0	2	D85222			M	1/20/1959	Y	N	01/05/2001	ACTIVE	\$1,150.00
1000015		0	2	D97030			M	3/13/1951	Y	O	06/16/2000	ACTIVE	\$0.00
1000015		0	2	E87060			F	5/11/1968	Y	N	09/24/2003	ACTIVE	\$19,151.18
1000015		0	2	F38683			M	1/26/1963	N	N	08/06/2005	ACTIVE	\$59,082.63

1000015		0	2	F59036			M	3/22/1966	Y	N	03/06/2006	C-PROOF	\$0.00
1000015		0	2	H06143			F	9/29/1974	N	N	08/14/2012	C-PROOF	\$0.00
1000015		0	2	H18223			M	8/25/1963	Y	N	10/03/2013	C-PROOF	\$3.62
1000015		0	2	H51684			M	1/3/1979	N	O	04/11/2015	C-PROOF	\$50.00
1000015		0	2	H67117			M	6/11/1978	N	N	09/15/2016	C-MAX	\$5,016.67
1000015		0	2	H76248			M	6/16/1975	N	N	01/12/2017	ACTIVE	\$66,500.00
												<b>Acct # 2 Total :</b>	<b>\$219,920.65</b>
												<b>Part # Total :</b>	
												<b>Policy # 1000015 Total :</b>	<b>\$279,230.61</b>

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C-RTWPH = Closed – returned to  
 work with policyholder  
 CMAX = Closed – Reached  
 maximum  
 C-OOCC = Closed – does not  
 meet any occ definition  
 C-PROOF = Closed – did not  
 provide proof requested