



AGENDA REQUEST FORM

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

MEETING DATE Sep 20 2016 10:15AM - Regular School Board Meeting

Special Order Request
 Yes No

ITEM No.:
EE-5.

AGENDA ITEM OPEN ITEMS

Time

CATEGORY EE. OFFICE OF STRATEGY & OPERATIONS

DEPARTMENT Procurement & Warehousing Services

Open Agenda
 Yes No

TITLE:
Second Amendment to Agreement - 14-004P - Group Medical Benefits for School Board Employees


REQUESTED ACTION:
 Approve the Second Amendment to Agreement for the above Request for Proposal (RFP). Contract Term: January 1, 2017, through December 31, 2017, 1 Year; User Department: Benefits and Employment Services; Award Amount: None; Awarded Vendor(s): AETNA Life Insurance Company (AETNA); Minority/Women Business Enterprise Vendor(s): Benefits Outsource, Inc.; Creative Ad Images, Inc.; McKinley Financial Services, Inc.; A Graphic Difference d/b/a Signs By Tomorrow; and Bi-Ads, Inc., d/b/a Westside Gazette.

SUMMARY EXPLANATION AND BACKGROUND:
 RFP 14-004P - Group Medical Benefits for School Board Employees, was awarded to Aetna Life Insurance Company on August 27, 2013. This request is to amend the original Agreement and First Amendment to Agreement.
 A copy of the RFP documents are available online at:
http://www.broward.k12.fl.us/supply/agenda/14-004P-Group_Medical_Benefits_SchoolBoardEmployees.pdf
 This Second Amendment to Agreement has been reviewed and approved as to form and legal content by the Office of the General Counsel.

SCHOOL BOARD GOALS:
 Goal 1: High Quality Instruction Goal 2: Continuous Improvement Goal 3: Effective Communication

FINANCIAL IMPACT:
 There is no additional financial impact to the District.

EXHIBITS: (List)
 (1) Executive Summary (2) Second Amendment to Agreement (3) Approved ARF 8-27-13 SSBM 2 (4) Approved ARF 12-8-15 RSBM EE-4 (5) Supplier Evaluation

BOARD ACTION:

 (For Official School Board Records Office Only)

SOURCE OF ADDITIONAL INFORMATION:

Name: Dr. Dildra Ogburn	Phone: 754-321-3100
Name: Ms. Mary C. Coker	Phone: 754-321-0501

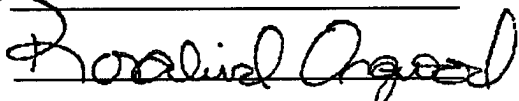
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
Senior Leader & Title

Maurice L. Woods - Chief Strategy & Operations Officer

Approved In Open Board Meeting On:

SEP 20 2016

Signature
 Maurice Woods
 9/9/2016, 11:10:46 AM

By: 
 School Board Chair

EXECUTIVE SUMMARY

Second Amendment to Agreement 14-004P Group Medical Benefits for School Board Employees

The contract for the above-mentioned Request for Proposal (RFP) was awarded to Aetna Life Insurance Company by the School Board on August 27, 2013, (effective January 1, 2014, through December 31, 2016). Section 2.01, Term of Agreement, of the original Agreement allows for up to two (2) one-year renewal periods.

During the Superintendent's Insurance & Wellness Advisory Committee (SIWAC) meeting on September 24, 2015, the committee reviewed and discussed the draft RFP for group medical benefits for School Board employees. During the review of the RFP, SIWAC members voted to recommend to the Superintendent to utilize one (1) of the two (2) one-year renewal options, extending the original Agreement through December 31, 2017. The recommendation was made, in part, due to the recent acquisitions of both Humana, Inc., and Cigna. Subsequently, Benefits staff and the District's benefits consultants met with representatives of Aetna/Coventry and negotiated several contract improvements for 2016 and 2017, which the Board approved during its meeting on December 8, 2015. The improvements are noted below:

2016 and 2017 Enhanced Negotiated Renewal:

In addition to the current commitments in the current Agreement (2014-2016), Aetna/Coventry has committed to the following:

- Maintain current administrative fee of \$27 guaranteed through December 31, 2017.
- Provide a premium credit in January 2016 in the amount of \$150,000.
- Provide a premium credit in January 2017 in the amount of \$150,000.
- Enhance Rebate Credit Guarantee Amount from current \$7.95 per employee per month (PEPM) to \$9 PEPM for 2016.
- Enhanced Rebate Credit Guarantee Amount for 2017 to \$10 PEPM.
- Provide an additional \$50,000 for the wellness fund for 2016 to supplement the current \$350,000 for a 2016 total to \$400,000.
- Extend Aetna's funding of wellness in the amount of \$350,000 through December 2017 (Under the current agreement - no wellness funds were available for 2017).
- Provide \$150,000 in a wellness fund for 2017, in conjunction with the extension of the \$350,000 wellness fund, for a 2017 total of \$500,000.

2017 Enhanced Negotiated Renewal:

- Move to a National Network- Aetna Select Open Access HMO and its National POS II networks.
- Introduce enhanced member tools, including its Aetna Navigator.

**Second Amendment to Agreement
14-004P - Group Medical Benefits for School Board Employees
September 20, 2016 Board Meeting
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2017 Enhanced Negotiated Renewal: (Continued)

- Introduce Itriage, a mobile app that helps consumers check their symptoms and choose the appropriate physicians and medical facilities.
- Introduce Teladoc Services at no additional charge in the administrative fee.
 - Teladoc is an affordable alternative to emergency room and urgent care that allows employees and their families to resolve many of their common medical issues 24/7 through the convenience of phone or online video consultations.
 - Teladoc provides patients with access to a national network of physicians who can diagnose, treat, and prescribe medication, when appropriate, for many common medical issues.
- Enhance Disease Management Programs - program supports 37 conditions.
- Enhance the prescription drug network to include Aetna's expansive pharmacy network – currently, employees have access to a subset of the network.

There is no additional financial impact to the District. As noted, the above plan revisions were approved during the December 8, 2015, School Board meeting. The value of both the plan and financial enhancements equate to approximately \$565,400 in 2016 and \$1,363,400 in 2017 for an overall total of \$1,928,800.

On May 17, 2016, the Equal Opportunity Employment Commission published two sets of final rules applicable to employer-sponsored wellness programs – one under the Americans with Disabilities Act and the other under the Genetic Information Nondiscrimination Act. These changes impact the District's ability to continue its Wellness Initiatives, as designed. This request is to approve the Second Amendment to Agreement to allow for the expansion of the use of funds previously committed for expanded wellness initiatives, as outlined in the Second Amendment to Agreement.

SECOND AMENDMENT TO AGREEMENT

THIS SECOND AMENDMENT TO AGREEMENT is made and entered into as of this 20th day of September 2016, by and between

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
(hereinafter referred to as "SBBC"),
a body corporate and political subdivision of the State of Florida,
whose principal place of business is
600 Southeast Third Avenue
Fort Lauderdale, Florida 33301

and

AETNA LIFE INSURANCE COMPANY
(hereinafter referred to as "Aetna"),
whose principal place of business is
1340 Concord Terrace
Sunrise, Florida 33323-2830

WHEREAS, SBBC and Aetna entered into an Agreement dated August 27, 2013 (hereinafter referred to as "Agreement") for Group Medical Benefits for School Board Employees under RFP 14-004P, effective January 1, 2014 through December 31, 2016; and

WHEREAS, SBBC and Aetna entered into a First Amendment to Agreement dated December 8, 2015 to extend its term for an additional one-year period through December 31, 2017 and to make other revisions; and

WHEREAS, SBBC and Aetna desire to further amend the Agreement.

NOW, THEREFORE, in consideration of the premises and of the mutual covenants contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Parties hereby agree as follows:

ARTICLE 1 - RECITALS

1.01 **Recitals.** The parties agree that the foregoing recitals are true and correct and that such recitals are incorporated herein by reference.

ARTICLE 2 – SPECIAL CONDITIONS

2.01 **Term of Agreement.** Except as expressly provided herein, all terms and conditions set forth in the Agreement and the First Amendment to Agreement shall remain in force and effect for the contract term specified within this Second Amendment to Agreement.



(Corporate Seal)

FOR SBBC

THE SCHOOL BOARD OF BROWARD
COUNTY, FLORIDA

By *Rosalind Osgood*
Dr. Rosalind Osgood, Chair

ATTEST:

Robert W. Runcie
Robert W. Runcie, Superintendent of Schools

Approved as to Form and Legal Content:

[Signature] 07/29/16
Office of the General Counsel

FOR AETNA LIFE INSURANCE COMPANY
AND
COVENTRY HEALTH CARE OF FLORIDA, INC.
AND
COVENTRY HEALTH AND LIFE INSURANCE COMPANY

(Corporate Seal)

Coventry Health Care of Florida, Inc.
and Authorized Signature of Aetna Life
Insurance Company

ATTEST:

By *Christopher Ciano*
Christopher Ciano, Chief Executive
Officer

, Secretary

-or-
[Signature]
Witness
[Signature]
Witness

**The Following Notarization is Required for Every Agreement Without Regard to
Whether the Party Chose to Use a Secretary's Attestation or Two (2) Witnesses.**

STATE OF FLORIDA
COUNTY OF BROWARD

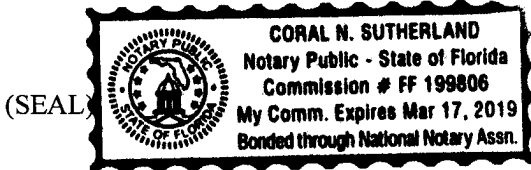
The foregoing instrument was acknowledged before me this 22 day of JULY,
2016 by CHRISTOPHER CIANO of AETNA LIFE
Christopher Ciano

INSURANCE COMPANY on behalf of the corporation/agency.

He/She is personally known to me or produced _____ as identification
and did/did not first take an oath. Type of Identification

My Commission Expires:

Coral N. Sutherland
Signature – Notary Public



CORAL N. SUTHERLAND
Printed Name of Notary

Notary's Commission No.

AGENDA REQUEST FORM
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Meeting Date	Agenda Item Number	
08/27/13	Open Agenda	Special Order Request
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2	

TITLE:	
Request for Proposals (RFP) 14-004P – Group Medical Benefits for School Board Employees	
REQUESTED ACTION:	
Approve the RFP recommendation and the Agreement between The School Board of Broward County, FL, and Aetna.	
SUMMARY EXPLANATION AND BACKGROUND:	
<p>This RFP was developed and reviewed in public meetings by the Superintendent’s Insurance Advisory Committee (SIAC) on February 11, 2013, and February 28, 2013. The RFP was released on April 4, 2013. On May 21, 2013, proposals were received from five (5) carriers:</p> <p align="center">1. Aetna, 2. AvMed, 3. Cigna, 4. Humana, and 5. United HealthCare</p> <p>The Superintendent’s Insurance Advisory Committee evaluated the proposals on July 8, 2013. The proposals were evaluated based on Experience and Qualifications, Scope of Services, Minority/Women Business participation, and Cost of Services. As a result of the evaluation, the Committee voted to select and recommend to the Superintendent of Schools, the following award:</p> <p align="center">Aetna</p> <p>As a result of issuing this RFP, coupled with negotiations with the selected company, an annual savings of \$3.9 million was realized and over a three (3) year term of the Agreement, a reduction from the prior year of \$11.8 million. There are additional negotiated reductions of \$2.6 million, which the Board will realize in the future that relate to post termination fees and future fee guarantees.</p> <p>This Agreement has been reviewed and approved as to form and legal content by the Office of the General Counsel.</p>	
SCHOOL BOARD GOALS:	
<input type="checkbox"/> •Goal 1: High Quality Instruction <input checked="" type="checkbox"/> •Goal 2: Continuous Improvement <input type="checkbox"/> •Goal 3: Effective Communication	
FINANCIAL IMPACT:	
There will be a financial impact to the Board of \$173,426,933 for 2014.	
EXHIBITS: (List)	
1. Executive Summary 2. Proposed Agreement 3. SIAC 07/30/13 Meeting Minutes 4. SIAC 07/08/13 Meeting Minutes 5. RFP 14-004P	
BOARD ACTION:	SOURCE OF ADDITIONAL INFORMATION:
APPROVED	Amanda Bailey 754-321-1840
(For Official School Board Records' Office Only)	Dr. Dildra Martin-Ogburn 754-321-3100
	Carol Barker 754-321-0506
	Name Phone

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Maurice L. Woods
Chief Strategy & Operations Officer *M.L.W.*
 Office of Strategy & Operations

Approved in Open Board Meeting on: AUG 27 2013

By: *Laurie Richerson* School Board Chair



AGENDA REQUEST FORM

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Special Order Request	
<input type="radio"/> Yes	<input checked="" type="radio"/> No
Time	
Open Agenda	
<input checked="" type="radio"/> Yes	<input type="radio"/> No

MEETING DATE	Dec 8 2015 10:15AM - Regular School Board Meeting
AGENDA ITEM	OPEN ITEMS
CATEGORY	EE. OFFICE OF STRATEGY & OPERATIONS
DEPARTMENT	Procurement & Warehousing Services

ITEM No.:
EE-4.

TITLE:
First Amendment and Renewal to Agreement - 14-004P - Group Medical Benefits for School Board Employees

REQUESTED ACTION:
Approve the first amendment and renewal to agreement for the above RFP. Contract Term: January 1, 2017, through December 31, 2017, 1 Year; User Department: Benefits & Employment Services; Award Amount: None; Awarded Vendor(s): Aetna Life Insurance Company; M/WBE Vendor(s): Benefits Outsource, Inc.; Creative Ad Images, Inc.; McKinley Financial Services, Inc.; A Graphic Difference d/b/a Signs by Tomorrow; and Bi-Ads, Inc. d/b/a Westside Gazette

SUMMARY EXPLANATION AND BACKGROUND:
RFP 14-004P, Group Medical Benefits for School Board Employees, was awarded to Aetna Life Insurance Company on August 27, 2013. This request is to amend the original agreement and renew the contract term for one (1) additional year.

A copy of the RFP documents are online at: <http://www.broward.k12.fl.us/supply/agenda/14-004P-Group-Medical-Benefits.pdf>
This Agreement has been reviewed and approved as to form and legal content by the Office of the General Counsel.

SCHOOL BOARD GOALS:

Goal 1: High Quality Instruction Goal 2: Continuous Improvement Goal 3: Effective Communication

FINANCIAL IMPACT:
There is no additional financial impact to the District. The value of both the plan and financial enhancements equate to approximately \$565,400 in 2016 and \$1,363,400 in 2017 for an overall total of \$1,928,800.

EXHIBITS: (List)
(1) Executive Summary (2) First Amendment to Agreement (3) Approved ARF 8-27-2013 SSBM 2 (4) Financial Analysis Worksheet (5) MWBE Participation (6) Supplier Evaluation

BOARD ACTION:
APPROVED
(For Official School Board Records Office Only)

SOURCE OF ADDITIONAL INFORMATION:

Name: Dr. Dildra Martin-Ogburn	Phone: 754-321-3100
Name: Mr. Craig J. Nichols	Phone: 754-321-1840

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
Senior Leader & Title

Maurice L. Woods - Chief Strategy & Operations Officer

Signature
Maurice Woods
Monday, November 23, 2015 4:15:28 PM

Approved In Open Board Meeting On: **DEC 08 2015**
By: *Rosalind Orzoff*
School Board Chair

SUPPLIER / PRODUCT EVALUATION FORM

The purpose of this evaluation form is to rate a supplier's performance. Completion of this form will aid the Procurement & Warehousing Services Department in determining the quality of goods and/or services purchased for the District. Your input will be used in the evaluation of future bids or proposals submitted by this supplier. Please return completed evaluation form to:

Procurement & Warehousing Services Department
 Technology and Support Services Center
 7720 West Oakland Park Boulevard, Sunrise, Florida 33351
 For assistance with this form, please contact (754) 321-0527 or
 Email to: Charles.high@browardschools.com

SECTION 1 – SUPPLIER EVALUATION

Supplier Company Name: Aetna
 Supplier Contact: Renthia Jackson, Account Executive
 Contact Telephone: 954-375-1577

Bid No.: 14-004P Purchase Order No.: N/A

What was the product / service? Group Medical Benefits for School Board Employees

1. How do you rate the supplier in the following areas?

	1	2	3	4	5
	Poor	Fair	Good	Very Good	Excellent
Overall Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Delivery as Scheduled or Promised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

2. How satisfied are you with the supplier?

1	2	3	4
Not Satisfied	Somewhat Satisfied	Satisfied	Very Satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

3. Will you use them again? Yes No

SECTION 2 – PRODUCT / SERVICE EVALUATION

4. How do you rate their product / service?

	1	2	3	4	5
	Poor	Fair	Good	Very Good	Excellent
Compliance with Specifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality as Compared to Similar Products/Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Price as Compared to Similar Products/Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

5. Would you purchase this product or use this vendor again?

1	2	3	4
Very Unlikely	Unlikely	Probably	Definitely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

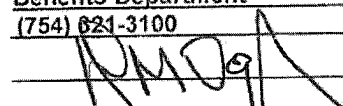
*If not, please explain why in comments.

SECTION 3 – END-USER INPUT

Please share any additional information regarding this supplier or the product / service provided. If this supplier's performance is unsatisfactory, please tell us why. You may attach an additional sheet if necessary.

*Comments: _____

Evaluation Form Completed By:

Name / Title: Dr. Dildra Martin-Ogbum, Director, Benefits & Employment Services
 School / Department: Benefits Department
 Contact Telephone: (754) 621-3100
 Participant's Signature:  Date: 8/18/16