

#### **Notice of Intent to Award**

Solicitation Number	361298	Award Date	12/21/2023   8:35 AM CST	
Solicitation Title	Group Medical Insurance - Medicare Advantage Plan - Two Awards			
Buyer Name	Scott Ferguson	Buyer Email	scott.ferguson@nashville.gov	
BAO Rep	JoeAnn Carr	BAO Email	joeann.carr@nashville.gov	

#### Awarded Supplier(s)

In reference to the above solicitation and contingent upon successful contract negotiation, it is the intent of the Metropolitan Government of Nashville and Davidson County to award to the following supplier(s):

Company Name	Humana Insurance Company Company Contact		Tracey Garrison		
Street Address	500 West Main Street				
City	Louisville State KY		Zipcode	40202	
Company Name	United Healthcare Services Company Contact John Thompson				
Street Address	4925 Independence Pkwy, Suite 300				
City	Tampa	Tampa State FL		Zipcode	33634
Company Name		Compa	ny Contact		
Street Address		•			
City		State		Zipcode	

#### **Certificate of Insurance**

The awarded supplier(s) must submit a certificate of insurance (COI) indicating all applicable coverage required by the referenced solicitation. The COI should be emailed to the referenced buyer no more than 15 days after the referenced award date.

#### **Equal Business Opportunity Program**

Where applicable, the awarded supplier(s) must submit a signed copy of the letter of intent to perform for any and all minority-owned (MBE) or woman-owned (WBE) subcontractors included in the solicitation response. The letter(s) should be emailed to the referenced business assistance office (BAO) rep no more than two business days after the referenced award date.

Yes, the EBO Program is applicable.	No, the EBO Program is not applicable.
Month	lly Reporting
payment to all small (SBE), minority-owned (MBE),	required monthly to submit evidence of participation and women-owned (WBE), LGBT-owned (LGBTBE), and service ent evidence may include, but is not necessarily limited to or payment, invoices, and cancelled checks.

Questions related to contract compliance may be directed to the referenced BAO rep.

✓	Yes, monthly reporting is applicable.	No, monthly reporting is not applicable.

#### **Public Information and Records Retention**

Solicitation and award documentation are available upon request. Please email the referenced buyer to arrange.

A copy of this notice will be placed in the solicitation file and sent to all offerors.

#### **Right to Protest**

Per MCL 4.36.010 – any actual or prospective bidder, offeror, or contractor who is aggrieved in connection with the solicitation or award of a contract may protest to the purchasing agent. The protest shall be submitted in writing en (10) days after such aggrieved person knows or should have known of the facts giving rise thereto.

en (10) days after such aggrieved person

Mil iupervisor (Initial)

Michelle A. Hernandez Lane

Purchasing Agent & Chief Procurement Officer

RFQ# 361298 - Group Medical Coverage for Medicare Advantage Plan Only			
Evaluation Criteria	Blue Cross Blue	Humana	United
	Shield of TN	Insurance	Healthcare
		Company	Services
Medicare Advantage Plan			
Licensing Requirements	Yes	Yes	Yes
Background Check Acceptance	Yes	Yes	Yes
Solicitation Acceptance	Yes	Yes	Yes
Contract Acceptance	Yes, with	Yes, with	Yes, with
	exceptions	exceptions	exceptions
ISA Questionnaire Completed and Terms Accepted	Yes	Yes	Yes
Experience, Account Administration and Account	21.00	30.00	27.25
Management (30 Points)			
Provider Network (19 Points)	18.00	19.00	18.00
Pharmacy (9 Points)	6.00	9.00	8.00
Tools, Communications and Reporting (7 Points)	4.00	7.00	6.00
Diversity Survey (5 Points)	3.75	4.25	5.00
Pricing (30 Points)	28.55	30.00	25.57
Totals	81.30	99.25	89.82

#### **Strengths & Weaknesses**

#### **Blue Cross Blue Shield of TN**

#### Medicare Advantage - Experience, Account Administration and Account Management

Strengths: Firm's response addressed everything requested in the RFP except for the weaknesses noted below.

<u>Weaknesses:</u> Q#1 - Firm does not have as much MA experience as other firms and gaining Metro's members would potentially more than double BCBS' current MA enrollment. Q#9 - Firm has no emerging plan issue noted. Q#19 - Firm has no mention of medical or pharmacy management program outreach to improve member health. Q#20 - Firm did not provide specific detail on action plan for monitoring and reviewing analytics. Q#27 - Firm's discrepancy reporting is handled through email and not in a report format; response lacked specific detail about process. Q#28 - Firm did not clearly explain details of coverage termination process. Q#30 - Firm did not provide any detail for aging members into the plan during the year and did not answer the question. Q#34 - Firm did not note if customer service reps specifically serve MA member and unique member concerns.

#### **Medicare Advantage - Provider Network**

**Strengths:** Firm's response addressed everything requested in the RFP.

Weaknesses: No weaknesses were noted.

#### Medicare Advantage - Pharmacy

**Strengths:** Firm's response addressed everything requested in the RFP except for the weakness noted below. Q#52 - Firm directly outreaches to members to ensure medication adherence.

<u>Weaknesses:</u> Q#54 - Firm did not explain process when there is no response from provider. Q#56 - Explanation lacks specific details and approach in managing specialty drugs. Q#66 - Changing to firm's formulary, 10% of members would pay more for drugs. Q#76 - Firm did not provide a prospective member Medicare Advantage site.

#### **Medicare Advantage - Tools, Communications and Reporting**

Strengths: Firm's response addressed everything requested in the RFP except for the weaknesses noted below.

Weaknesses: Q#78 - Firm does not provide a link to a demo MA site. Q#79 - Firm does not provide a price comparison tool. Q#80 - Firm has limited programs offered as compared with other proposers; transportation assistance and home meal programs not currently provided but would be at an additional cost. Q#83 - Firm does not have an in-home wellness program and does not provide details of the assessment criteria. Q#89 - Metro ability to modify language in communication materials was not definitively agreed to. Q#90 - Metro ability to modify language in communication materials was not definitively agreed to.

#### **Humana Insurance Company**

#### Medicare Advantage - Experience, Account Administration and Account Management

<u>Strengths:</u> Firm's response addressed everything requested in the RFP. Q#1 - Firm has considerable experience with MAPD plans. Q#10 - Firm provided a very detailed and thorough implementation plan. Q#20 - Firm has an exemplary approach to medical and pharmacy management programs to improve member engagement and overall health; Rx Fast Pass authorization process that searches medical and Rx history to provide instant point-of-sale approval. Q#30 - Firm provided a very thorough and detailed explanation of age-in process.

Weaknesses: No weaknesses were noted.

#### **Medicare Advantage - Provider Network**

<u>Strengths:</u> Firm's response addressed everything requested in the RFP. Q#43 - Firm provided exemplary response for recruitment of providers and Humana's holistic approach to care; includes a Compass Tool allowing providers to have individual member reporting for current admissions, discharges, inpatient/outpatient admissions and ER visits which provides more member data; has an integrated care management platform which provides enhanced capabilities to identify candidates for programs, gaps in care, monitoring of plan compliance which targets desirable outcomes for further member intervention.

Weaknesses: No weaknesses were noted.

#### Medicare Advantage - Pharmacy

<u>Strengths</u>: Firm's response addressed everything requested in the RFP. Q#52 - Firm directly outreaches to members to ensure medication adherence. Q#55 - Firm provided significant detail in communication timelines for pharmacy denials and expiration of prior authorizations. Q#58 - Firm has almost double the number of pharmacies in the Nashville area as compared to other proposers. Q#76 - Firm has robust member site with plan info, tools, help and support with chat capability.

**Weaknesses:** No weaknesses were noted.

#### Medicare Advantage - Tools, Communications and Reporting

**Strengths:** Firm's response addressed everything requested in the RFP. Q#82-86 - Firm explained incredibly comprehensive, robust health management programs to improve member engagement in their overall health. Q#91 - Firm provided specific detail provided for annual enrollment communication process (beyond the CMS required communications) which includes client microsite, educational seminars, extra outreach to members through webinars and live meetings with various retiree groups.

Weaknesses: No weaknesses were noted.

#### **United Healthcare Services**

#### Medicare Advantage - Experience, Account Administration and Account Management

<u>Strengths:</u> Firm's response addressed everything requested in the RFP except for the weaknesses noted below. Q#1 - Firm has considerable experience with MAPD plans. Q#9 - Firm has a good process in place for escalated issues. Q#20 - Firm has an exemplary approach to medical and pharmacy management programs to improve member engagement and overall health. Q#36 - Firm noted extensive senior sensitivity training with role-playing scenarios for vision, hearing and arthritis.

<u>Weaknesses:</u> Q#15 - Firm did not definitively agree to allow Metro's consultant to do a pre-effective claims audit. Q#28 - Firm did not clearly explain details of coverage termination process. Q#40 - Firm does not arrange administration of drugs in members' homes.

#### **Medicare Advantage - Provider Network**

**<u>Strengths:</u>** Firm's response addressed everything requested in the RFP.

Weaknesses: No weaknesses were noted.

**Medicare Advantage - Pharmacy** 

**<u>Strengths:</u>** Firm's response addressed everything requested in the RFP.

Weaknesses: No weaknesses were noted.

#### **Medicare Advantage - Tools, Communications and Reporting**

**Strengths:** Firm's response addressed everything requested in the RFP. Q#82-86 - Firm explained incredibly comprehensive, robust health management programs to improve member engagement in their overall health.

**Weaknesses:** No weaknesses were noted.

Solicitation Title & Number			RFP Cost Points
Group Medical Coverage for Medicare Advantage Plan Only; RFQ# 361298			30
		SBE/SDV Participation	RFP Cost
Offeror's Name	Total Bid Amount	Amount	Points
BLUE CROSS BLUE SHIELD OF TN	\$13,840,000.00	\$0.00	28.55
Humana Insurnace Company	\$13,171,000.00	\$0.00	30.00
United Heathcare Services	\$15,454,000.00	\$0.00	25.57

### Ferguson, Scott (Finance)

Carr, Joe Ann (Finance - Contract Compliance) From:

Sent: Friday, November 17, 2023 3:04 PM

To: Ferguson, Scott (Finance)

Subject: RFP#361298 Diversity Evaluation Scoring; Group Medical Insurance - Medicare Advantage Plan - Two

**Attachments:** UnitedHealthcare Diversity Practices Evaluation..pdf; HUMANA Diversity Practices Evaluation.pdf;

BlueCross BlueShield of Tennessee Diversity Practices Evaluation- Medicare Advantage Based

Plan.pdf

Follow up **Follow Up Flag:** Flag Status: Flagged

Scott,

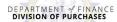
Please see the diversity scoring evaluations for this solicitation.

No EBO or SBE/SDV programs were applied. A 5-point Diversity Practices Evaluation has been applied. Please contact me with questions.

Thanks,

JoeAnn Carr Department of Finance Office of Minority and Women Business Assistance (BAO) Metropolitan Government of Nashville and Davidson County 730 2nd Avenue South, 2nd Floor; PO Box 196300 Nashville, TN 37219-6300

(p) <u>615-880-2338</u> (f) <u>615-862-6175</u>



## Vendor Evaluation

for diversity, equity, and inclusion practices

Solicitation Number:

Project Title:

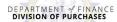
Group Medical Insurance - Medicare Advantage Plan-Two Awards

Email BAO@Nashville.gov

10/27/2023

submit completed evaluation form to BAO@Nashville.gov.

Vendor D	etails
Vendor:	Humana Insurance Company Contact Person: Holli Turner
Email:	hturner2@humana.com Phone: 513-315-7333
Address:	500 W. Main Street, Louisville, Kentucky 40202
Other:	



## Vendor Evaluation

for diversity, equity, and inclusion practices

Solicitation Number:

Project Title:

Group Medical Insurance - Medicare Advantage Plan

Email BAO@Nashville.gov

11/06/2023

submit completed evaluation form to BAO@Nashville.gov.

Vendor D	etails	
Vendor:	UnitedHealthcare	Contact Person: John Thompson
Email:	john_c_thompson@uhc.com	Phone: (404) 580-4502
Address:	PO Box 9472 Minneapolis, MN 55440	
Other:		

## **Programatic Review**

Do you have a specific program to promote the use of black and brown owned, women-owned, LGBT-owned, service disabled veteran-owned, or small businesses?

**①** 

YES

O

NO

If NO, proceed to page 3.

Do you have measurable goals for the utilization of these types of businesses on non-government projects?

**①** 

YES

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NO

If YES, please provide <u>both</u> the goal and actual achievement for your most recently completed fiscal year -->

Firm Type	Goal	Actual
Minority Owned	\$42,259,157	\$62,415,579
Woman Owned	\$14,912,040	\$33,712,922
LGBT Owned	\$3,411	\$248,274
Service Disabled Veteran Owned	\$1,036,051	\$20,199,214
Small Business		

Do you have an employee dedicated, in whole or in part, to the administration of this program?



YES



NO

If YES, please provide -->

Program	Staff
Name	Terry Turner
% of time spent on program	100
Email/Phone	terry_turner@uhc.com

## Mentorship

**Total Score:** 

Do you participate in any government - sponsored mentorship programs assisting black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?

YES NO	<b>Government Sponsor</b>	Business Mentored
If YES, please list them:	Maryland	HCDI

Please provide any additional information relative to your diversity, equity, and inclusion efforts you wish to be considered:

United Health Group (UHG) Supplier Diversity Program seeks to maximize procurement opportunities and proactively build partnerships with diverse suppliers. Our sourcing

teams actively work to identify opportunities for diverse businesses where possible. This focus is integrated throughout our strategic sourcing and procurement processes.

UHG is committed to building a diverse supplier base that reflects the multicultural markets that we serve. In the United States, UHG partners with more than 1,500

diverse and small businesses. Over the last ten years, UHG spent over \$4.8 billion with these supplier partners, which enabled over

7,000 local community jobs, and an economic impact of \$569 million in employee wages.

#### BELOW TO BE COMPLETED BY METRO STAFF

Initial:

**JAC** 

QUESTION	Score	Comment
1	1.25	
2	1.25	
3	1.25	
4	1.25	
TOTAL	5.00	

## **Programatic Review**

Do you have a specific program to promote the use of black and brown owned, women-owned, LGBT-owned, service disabled veteran-owned, or small businesses?

**(** 

YES

NO

If NO, proceed to page 3.

Do you have measurable goals for the utilization of these types of businesses on non-government projects?

**①** 

YES

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NO

If YES, please provide <u>both</u> the goal and actual achievement for your most recently completed fiscal year -->

Firm Type	Goal	Actual
Minority Owned	Humana has a	2.75%
Woman Owned		1.31%
GBT Owned		0.02%
ervice Disabled Veteran Owned		0.02%
Small Business		3.52%

Do you have an employee dedicated, in whole or in part, to the administration of this program?



YES



NO

If YES, please provide -->

Program	Staff
Name	Ashleigh Sutton
% of time spent on program	100%
Email/Phone	awillis8@humana.com

## Mentorship

Do you participate in any government - sponsored mentorship programs assisting black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?

YES	NO NO	Government Sponsor	Business Mentored
If YES, please list them:		Humana sponsors our owr	
		Please refer to Attachment	

Please provide any additional information relative to your diversity, equity, and inclusion efforts you wish to be considered:

At Humana, we promote and support the growth and development of diverse businesses including minority-owned

women-owned, LGBT-owned, disability-owned, veteran-owned and small businesses. Our goal is to educate,

assist, develop and provide sourcing opportunities that will enable these suppliers to be successful as our partners as well as

within the broader business world. Please refer to Attachment 9.2 for Humana's Supplier Diversity Policy Statement.

#### BELOW TO BE COMPLETED BY METRO STAFF

Total Score: 4.25 Initial: JAC

QUESTION	Score	Comment
1	1.25	
2	1.25	
3	1.25	
4	.50	
TOTAL	4.25	



# Vendor Evaluation

for diversity, equity, and inclusion practices

Solicitation Number:	RFQ 361298	Questions?
Project Title:	Group Medical Insurance - Medicare Advantage Plan	Email BAO@Nashville.gov
Date:	11/02/2023	

submit completed evaluation form to BAO@Nashville.gov.

Vendor D	etails
Vendor:	BlueCross BlueShield of Tennessee Contact Person: Russ Henderson
Email:	Russell_Henderson@bcbst.com Phone: (615) 760-8718
Address:	1 Cameron Hill Circle, Chattanooga, TN 37402
Other:	

## **Programatic Review**

Do you have a specific program to promote the use of black and brown owned, women-owned, LGBT-owned, service disabled veteran-owned, or small businesses?

Y

YES

0

NO

If NO, proceed to page 3.

Do you have measurable goals for the utilization of these types of businesses on non-government projects?

•

YES



NO

If YES, please provide <u>both</u> the goal and actual achievement for your most recently completed fiscal year -->

Firm Type	Goal	Actual
Minority Owned	15%	27.21%
Woman Owned	7.5%	15.22%
LGBT Owned		
Service Disabled Veteran Owned		
Small Business		

Do you have an employee dedicated, in whole or in part, to the administration of this program?



YES



NO

If YES, please provide -->

Program	Staff
Name	Nesha Steele
% of time spent on program	40%
Email/Phone	Nesha_Steele@bcbst.com

### Mentorship

Do you participate in any government - sponsored mentorship programs assisting black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?

O YES	NO NO	<b>Government Sponsor</b>	Business Mentored
If VES places I	ist thom:		
If YES, please list them:			

Please provide any additional information relative to your diversity, equity, and inclusion efforts you wish to be considered:

We have included a BlueCross Diversity & Inclusion Overview

with supplier diversity highlights as Attachment 10a. Our BlueCross

Workforce Diversity Annual Report is included as Attachment 10b.

#### BELOW TO BE COMPLETED BY METRO STAFF

Total Score: 3.75

QUESTION	Score	Comment
1	1.25	
2	1.25	
3	1.25	
4	0	Does not particiapte in government-sponsored mentorship program
TOTAL	3.75	