



February 17, 2020

To: All Potential Respondents
From: Nancy Wheelock, Purchasing Agent
Subject: RFP1120005058 – Employee Benefits Consultant

Addendum One

Please amend the subject RFP to include answers to the following timely received questions:

Q1. We noticed something about the plan eligibility in the State's RFP that we want to make sure we understand. There is a statement that "The State does not pay a contribution on their premiums except for a group currently taking advantage of an early retirement program." We were under the impression that the State does not pay a contribution on the premium for any employees.

A1. Section 1.4.2.1 of the RFP currently states:

1.4.2.1 Eligible Employees

The health plans governed by the Executive Council are available to approximately 36,000 active and retired State employees in the Executive, Legislative, and Judicial branches. Not eligible for the plans are temporary employees, permanent part-time employees working less than 20 hours per week and Regents supervisory, professional and scientific employees.

The retirees pay full premium rates. The State does not pay a contribution on their premiums except for a group currently taking advantage of an early retirement program.

The State is amending Section 1.4.2.1 of the RFP to state:

1.4.2.1 Eligible Employees

The health plans governed by the Executive Council are available to approximately 36,000 active and retired State employees in the Executive, Legislative, and Judicial branches. Not eligible for the plans are temporary employees, permanent part-time employees working less than 20 hours per week and Regents supervisory, professional and scientific employees.

The retirees pay full premium rates. The State does not pay a contribution on their premiums.

The remaining language in Section 1.4.2.1 of the RFP remains the same as originally written.

Please acknowledge receipt of this addendum by signing in the space provided below, and return this letter with your offer (do not send back separately).

I hereby acknowledge receipt of this addendum.

Signature

Date

Typed or Printed Name