

TERM OF CONTRACT: ONE (1) YEAR	RFP2015-32 SECTION 125, FLEXIBLE SPENDING ACCOUNT SERVICES, ONLINE ENROLLMENT SYSTEM AND SUPPLEMENTAL BENEFITS FOR THE CITY OF TRENTON EMPLOYEES		
NUMBER OF RESPONDENTS:	3		
NAME OF BIDDER	BAKER TILLY VANTAGEN, LLC	AETNA LIFE INSURANCE COMPANY	AMERICAN FIDELITY ASSURANCE COMPANY
ADDRESS	1200 ABINGTON EXECUTIVE PARK	151 FARMINGTON AVENUE	2000 N. CLASSEN BLVD
CITY, STATE, ZIP	CLARKS SUMMIT, PA 18411	HARTFORD CT 06154	OKLAHOMA CITY, OK 73106
CONTACT NAME	LEAH GIANACOPOULOS	EARL LAPPEN	NANCEE ROBERSON
TELEPHONE	570-319-3785	860-273-0123	405-523-5186
FAX	866-406-6946	866-847-4039	405-416-7961
E-MAIL	LEAH.GIANACOPOULOS@BAKERTILLY.COM	LAPPEN@AETNA.COM	NANCEE.ROBERSON@AMERICANFIDELITY.COM
STOCKHOLDER DISCLOSURE STATEMENT	INCLUDED	INCLUDED	INCLUDED
REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONNAIRE	INCLUDED	INCLUDED	INCLUDED
ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA	INCLUDED	INCLUDED	INCLUDED
NJ BUSINESS REGISTRATION CERTIFICATE	REQUIRED FROM AWARDED VENDOR	INCLUDED	REQUIRED FROM AWARDED VENDOR
NON-COLLUSION AFFADAVIT	INCLUDED	INCLUDED	INCLUDED
AFFIRMATIVE ACTION STATEMENT	INCLUDED	INCLUDED	INCLUDED
AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE	INCLUDED	INCLUDED	INCLUDED
CERTIFICATION AND DISCLOSURE OF POLITICAL CONTRIBUTIONS - C271	INCLUDED	INCLUDED	INCLUDED
DISCLOSURE OF INVESTED ACTIVITIES IN IRAN	INCLUDED	INCLUDED	INCLUDED
ETHICS COMPLAINT DISCLOSURE	INCLUDED	INCLUDED	INCLUDED
CITY OF TRENTON RESIDENT EMPLOYMENT POLICY FORM	INCLUDED	INCLUDED	INCLUDED
EIC	REQUIRED FROM AWARDED VENDOR	CERT#1015 EXP. 1/15/2017	REQUIRED FROM AWARDED VENDOR
60-DAY EXTENSION COMPLIANCE	YES	N/A	YES
EXCEPTIONS (IF ANY)	NONE	YES- SEE ATTACHED	NONE
CERTIFICATE OF INSURANCE	REQUIRED FROM AWARDED VENDOR	REQUIRED FROM AWARDED VENDOR	REQUIRED FROM AWARDED VENDOR
W-9	INCLUDED	N/A	INCLUDED
REFERENCES	INCLUDED	INCLUDED	INCLUDED
WILLING TO PROVIDE PRIORITY EMERGENCY SERVICES	N/A	N/A	YES
PRICING FOR THE SERVICES	SEE ATTACHED BREAK-DOWN	SEE ATTACHED BREAK-DOWN	SEE ATTACHED BREAK-DOWN
FATAL FLAW	NONE	NONE	NONE

FSA Pricing proposal

Implementation and Annual Fees	
Implementation Fee	\$750.00
*Annual Fee	\$500.00
**Monthly Administration Fees Per Member	
	\$5.05 ppm (Debit Card included)
Minimum Monthly Billing	
	\$150.00 per month
Optional Service Fees - NOTE: Only applicable if the service is requested by the Customer and performed by PayFlex. Optional Service Fee pricing is fixed during the initial Term of the Agreement and are listed below for transparency.	
Onsite Enrollment Meeting Support (Less than 500 eligible lives or more than one meeting for groups with 500 plus eligible)	Included
Customized Reporting	\$150.00 per hour
Single Sign On (SSO) to <u>generic</u> PayFlex member website (Assumes PayFlex standard for web service call) Lead-time: 60 days	No charge
Customized Member Flyers (Revisions to generic member flyers) Lead-time: 5 weeks	\$1,000.00 per flyer Including 2 rounds of edits
Customized Member Letters Lead-time: 5 weeks *System-generated • FSA Welcome Letter	\$1,500.00 per letter Including 2 rounds of edits plus mailing costs (If applicable)
Customized Card Carrier Lead-time: 5 weeks Cut-off for 1/1/ business is 10/15	\$3,000 flat fee Including 2 rounds of edits Rush requests and/or requests after 10/15 for 1/1/ fulfillment is an additional \$150.00 per hour (A <u>minimum</u> of 3 hours will be charged)
Co-branded Debit Card Lead-time: 5 weeks Cut-off for 1/1/ business is 10/15	\$750.00 flat fee Rush requests and/or requests after 10/15 for 1/1/ fulfillment is an additional \$150.00 per hour (A <u>minimum</u> of 3 hours will be charged)
Election Confirmation (Reimbursement products) Lead-time: Done at the time of implementation/renewal	\$0.12 Per Month Per Participant
***Account Statements Lead-time: Done at the time of implementation / renewal	\$1.50 Per Participant Per Month for <u>monthly</u> statements - (Reimbursement) \$ 0.50 Per Month Per Participant for <u>quarterly</u> statements - (Reimbursement)
Customized KnowledgeVision Presentation Lead-time: 6 weeks	Based on Statement of Work (SOW) (Typically 20 slides, 5 minutes of content, 3 rounds of script reviews)

Development of Customized Communications (Postcards, brochures, flyers, email campaigns) Lead-time: Varies based on type of communication	Based on Statement of Work (SOW) plus mailing costs (If applicable)
Takeover Administration (Previous Plan Year)	\$2,000.00
Rejected/NSF Customer Funding ACH transactions	\$50.00 per occurrence of any Customer funding ACH pull that is rejected
Failure to Fund Released Claims	An interest charge assessed for each day in which an outstanding balance is not funded, calculated at a rate not to exceed regulatory rates and based on the average daily balance outstanding across all non-funded days.
Debit Card Substantiation File	\$1,000.00 per carrier
<p>*Annual Fee includes upon written request:</p> <ul style="list-style-type: none"> ▪ Standard Enrollment Materials, limited to the number of eligible employees ▪ Electronic sample of a Plan Document and Summary Plan Description ▪ Form 5500 information only provided (if applicable) ▪ Census Template to cover the following discrimination tests <p style="padding-left: 40px;">Discrimination Tests shall include: 1) 25% Key Concentration Test, 2) Dependent Care Assistance 5% Owners Concentration Test and 3) Dependent Care Assistance 55% Average Benefits Test for Highly Compensated Employees.</p> <p>**Members are defined as:</p> <ul style="list-style-type: none"> ▪ An employee in an active status. ▪ A terminated employee with a balance greater than \$10.00. Billing for terminated employees continues for three billing cycles after termination, or until the member's balance drops below \$10.00. <p>***Available FREE online</p> <ul style="list-style-type: none"> ▪ Fee shall remain unchanged during the initial twelve (12) months of the term of the Agreement; thereafter fees are subject to change every twelve (12) months and shall not exceed a three (3) percent net increase per year for the Initial Term of the agreement. 	

Proposed Service Fees

City of Trenton - Section 125, FSA, Online Enrollment, and Supplemental Benefits

The following outlines the new services fees for the City of Trenton.

Services	City of Trenton Fixed Fee
Section 125/Flex Administrative Services*	
Implementation and Annual Enrollment fee	\$0.00
Flex Recordkeeping	\$0.00
Flex card	\$0.00
Dependent Day Care Flexible Spending Account	\$0.00
Health Flexible Spending Account	\$0.00
Section 125/Flex Administrative Services Annual Subtotal	\$0.00
Enrollment Platform	
Traditional Enrollment	\$0.00
Full Benefit Electronic Enrollment System	\$0.00
Salaried, Career Account Manager	\$0.00
Comprehensive Enrollment Support	\$0.00
Other Services	
Reporting	\$0.00
Major Medical Plan Waivers	\$0.00
Tax Reporting Assistance	\$0.00
Other Services Annual Subtotal	\$0.00
Annual Cost Total	\$0.00
Monthly Administrative Services Fee	\$0.00

* American Fidelity is providing the listed services at no cost to the City, in exchange for access to offer our portfolio of voluntary benefits to City employees through our service exchange agreement.

** For a complete list of Section 125 Administrative Services, please see the Employer Services section of the proposal.