

## Questions and Answers

### RFP No. SPE50013R0003 – Health and Life Insurance

1. Please confirm whether the Health Plan will be offered through a Health Lending Entity (EPS, by its abbreviations in Spanish) or through an Insurance Company.  
Health insurance coverage shall be provided to the U.S. Government from primary health insurance providers registered as an "Empresa Prestadora de Salud" (EPS) or designated representatives licensed for this purpose.  
**Amendment No. 2 to the RFP is being issued to include this information (Ref C.1)**
  2. Please confirm that the exclusions and limitations of the policy should be aligned with the laws of the country, prevailing the latter ones over those specified in the bid.  
Exclusions and limitations shall be in accordance to those specified in the Request for Proposal (RFP).
  3. Please confirm whether the number of members specified in the bid is for all members including those that will be covered only as riders.  
The number of members specified in the bid covers all eligible members including those that will be covered as riders.
  4. Please confirm that "Bi-weekly" term is referred to 14 days; also confirm that there are 26 "Bi-weekly" periods in a year.  
Correct. Bi-weekly term is referred to 14 calendar days.
  5. Please confirm the meaning of the "Retention Amount" term and indicate the components of it.  
In accordance with B.7.1, the retention amount is part of the premium and may include, but not be limited to, costs such as overhead, profit and general and administrative costs.
  6. Please confirm if the table specified in paragraph B.3.2.1 is referred exclusively to the Retention amount or to the total premium.  
B.3.2.1 refers exclusively to the Retention Amounts.
  7. Please confirm if in addition to the Balance Sheet, the Insurance Company may file additional reports to support a price adjustment based on experience.  
Premium Adjustment based on Experience shall be in accordance to B.4.1.
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8. Please confirm if there is a waiting period for coverage of HIV / AIDS.  
There shall be no waiting period for HIV/AIDS coverage.  
**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.1).**

9. Please confirm that in the event of death of an employee, the dependents will be excluded from the policy.  
Correct.

10. Please confirm whether the Health Plan coverage is both credit and refund.  
Yes. Health plan coverage includes both, credit and refund.  
**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.1.1.2).**

11. Please confirm that the list of deductibles and coinsurance can be freely specified by the insurance company (within the limits shown) and may be changed in the following years.  
Deductibles and coinsurance must be in accordance to those specified in the RFP. The following deductibles for ambulatory services and doctors fee office (reimbursement) are covered as follows:

**Ambulatory Services:** Deductible S/. 18.00 – S/. 87.00, expenses covered 70% - 100%

**Doctors Fee Office (Refund/Reimbursement):** Deductible S/.18.00 - S/. 92.00, expenses covered 70% - 100%

Prices offered for the base and option years provided as part of the RFP shall remain in full force during the term of the contract.

**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.1.1.2.2 and C.1.1.2.3).**

12. Please confirm the coverage of the prescription lenses.  
In accordance to C.1.1.8, prescription lenses are covered under optical care.

13. Please confirm coverage of false teeth, crowns and bridges in the dental benefit, as these coverages are aesthetic.  
In accordance to C.1.1.9, false teeth, crowns and bridges are covered under dental care.

14. Please confirm that the coverage is only in the country (Perú).  
Correct. Coverage is only in the country.
15. Please confirm that the evacuation transport is covered at 100% only in the country (Perú).  
100% reimbursement for ambulance transportation using national or international carriers are covered. Transportation for evacuation outside of Peru is not covered.  
**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.1.1.18)**
16. Please confirm if the annual maximum limit will be per patient per year (without reference to the different diagnoses that may have a patient).  
Correct. The annual maximum limit covered is per patient, per illness and per year.  
**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.1.1.19)**
17. Please confirm that for the coverage of the physically or mentally disabled children, the employee must submit all legal documentation required.  
Documentation required for the coverage of a physically or mentally disabled children is: Report from treating physician confirming disability and that child is physically or mentally handicapped as to be unable to live independently will be required.
18. We would appreciate if you could inform us if the health insurance plan will be through the EPS system or through a private health insurance plan not regulated by Sunassa. This item is not specified in the technique sheet.  
Please see answer No. 1
19. What is the composition of the retention amount: general costs, benefit margin? Are there any agency (brokerage) costs included? Is this retention amount a fixed cost through all the years of the duration of the contract? Please specify  
Please see answer No. 5
20. Where can we find the standard form 33, which is mentioned in the section L, Instructions, conditions and notices to offerors: (volume one)? What is to be considered in section K of this form? All mentioned in section K.  
SF-33 is after the cover letter contained in the RFP package. As stated in the cover letter, a complete Section K shall be submitted as part of the offerors proposal.

21. In reference to section B, B.3.21 Retention amount. What is the amount expected to be registered in this graphic, we would appreciate if you could be more specific. Please see answer No. 5

22. After the death of one of the insured, will family members continue under coverage? Specify timing, coverage and payment agreements. Please see answer No. 9

23. We need census of people who will be assured by the life insurance by law (Vida Ley ). This census must be included born date and monthly salary per person. Complete information about birth date and monthly salary per employee may not be disclosed. Information will be provided to the contractor after contract award. Population by age range of employees covered under the life insurance portion is as follows:

TITLEHOLDER AGE RANGE	QTY
19-35	76
36-45	183
46-55	161
56-65	109
66-75	34
76-85	18
86+	5
TOTAL	586

24. How does the contractor define the group of employees who have the Supplemental Life Insurance?

All eligible participants mentioned under C.2.3.1 and C.2.3.3 are covered.

25. Does The contractor have a specific retirement policy? Please specify the age.

The Embassy considers an eligible retiree to an employee who leaves the Mission after 60 years of age or is receiving a pension when they leave the Mission.

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26. Is important clarify the definition of Disability, Total and Permanent, in The Section C (C3). The definition for Total and Permanent Disability is define by local laws and specify in which situations this coverage applies.

The definition by law of Total and Permanent Disability is as follows:

The following health conditions are considered to constitute total and permanent disability caused by an accident, absolute and incurable mental alienation, brain death which prevents the individual from carrying out any work or occupation or occupation for the rest of his life, incurable fracture of the spine which causes total and permanent disability, loss of the vision in both eyes, loss of both hands, loss of both feet, or loss of one hand and one foot and other ailments which might be established through a Supreme Decree.

**Amendment No. 2 to the RFP is being issued to clarify this information (Ref C.3)**

27. Please clarify how the points B.6.1, B.6.2, B.6.3, B.6.4 and B.6.5 works. They refer to cases where the coverage is offered with changes in default rates every year?

These sections refer to the pricing offered for each of the option years under the contract.

28. Can we please have a census with a breakdown of ages? Can you also indicate which employees are local national.

Population by age range of titleholders, dependents, parents and retirees is as follows:

Count of Titleholders, Dependents, Parents and Retirees	
Age Range	Total
0-18	430
19-35	331
36-45	272
46-55	284
56-65	191
66-75	76
76-85	83
86+	26
Grand Total	1693

All employees covered under this RFP are under the local leave plan.

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29. Who is the current carrier.

Current carrier is Pacifico EPS S.A.

30. Can we please have a rate and premium history for the past 2 years

This information cannot be disclosed.

31. Do you want the contract to be fully insured or self-insured?

Contract shall be fully insured.

32. What is the intended effective date of the policy

The intended effective date of the policy will be the effective date of the contract award.

33. Please provide claim records for the past two years.

Amendment No. 2 to the RFP is being issued to clarify this information (Reference Section J).

Attached is the following claim records information:

- Titleholders, dependents and parents (State/AID/Peace Corps and AECA) – January 2012 to December 2012
- Retirees – January 2012 to December 2012
- Titleholders, dependents and parents (State/AID/Peace Corps and AECA) – January 2011 to December 2011
- Retirees – January 2011 to December 2011

END OF QUESTIONS AND ANSWERS

**CLAIM REPORT**

**STATE, USAID, PEACE CORPS., AECA - CONSOLIDATED (TITLEHOLDERS, DEPENDENTS AND PARENTS)**

**PERIOD COVERED: JANUARY 2012 - DECEMBER 2012**

**CURRENCY: Nuevos Soles**

PERIOD	PREMIUMS	CLAIMS	NET CLAIMS (%)	
			MONTHLY	ACCUMULATED
Jan-12	301,129.75	255,593.39	84.88%	84.88%
Feb-12	206,109.01	208,574.72	101.20%	91.51%
Mar-12	204,358.74	213,929.89	104.68%	95.29%
Apr-12	219,768.26	282,005.47	128.32%	103.09%
May-12	202,810.80	261,401.07	128.89%	107.70%
Jun-12	365,039.62	380,578.64	104.26%	106.86%
Jul-12	223,668.55	389,067.55	173.95%	115.57%
Aug-12	220,992.45	345,585.36	156.38%	120.21%
Sep-12	220,717.62	284,504.41	128.90%	121.10%
Oct-12	320,892.23	346,482.60	107.97%	119.40%
Nov-12	217,360.28	260,268.38	119.74%	119.43%
Dec-12	219,926.10	297,733.75	135.38%	120.63%
<b>Total Net</b>	<b>2,922,773.41</b>	<b>3,525,725.23</b>	<b>120.63%</b>	<b>120.63%</b>

**CLAIM REPORT**  
**AMERICAN EMBASSY - RETIREES ONLY**  
**PERIOD COVERED: JANUARY 2012 - DECEMBER 2012**  
**CURRENCY: Nuevos Soles**

PERIOD	PREMIUMS	CLAIMS	NET CLAIMS (%)	
			MONTHLY	ACCUMULATED
Jan-12	13,352.50	19,329.52	144.76%	144.76%
Feb-12	13,352.50	22,285.57	166.90%	155.83%
Mar-12	13,352.50	19,752.87	147.93%	153.20%
Apr-12	13,352.50	27,793.88	208.15%	166.94%
May-12	13,352.50	47,521.91	355.90%	204.73%
Jun-12	13,352.50	65,997.54	494.27%	252.99%
Jul-12	13,352.50	28,336.66	212.22%	247.16%
Aug-12	14,687.75	28,807.84	196.14%	240.23%
Sep-12	14,687.75	26,419.44	179.87%	233.02%
Oct-12	14,687.75	27,046.31	184.14%	227.80%
Nov-12	14,687.75	15,150.72	103.15%	215.77%
Dec-12	14,687.75	26,945.04	183.45%	212.93%
<b>Total Net</b>	<b>166,906.25</b>	<b>355,387.30</b>	<b>212.93%</b>	<b>212.93%</b>

**CLAIM REPORT**

**STATE, USAID, PEACE CORPS., AECA - CONSOLIDATED (TITLEHOLDERS, DEPENDENTS AND PARENTS)**

**PERIOD COVERED: JANUARY 2011 - DECEMBER 2011**

**CURRENCY: Nuevos Soles**

PERIOD	PREMIUMS	CLAIMS	NET CLAIMS (%)	
			MONTHLY	ACCUMULATED
Jan-11	237,928.03	262,838.05	110.47%	110.47%
Feb-11	334,844.42	200,693.92	59.94%	80.93%
Mar-11	220,085.94	362,191.91	164.57%	104.15%
Apr-11	210,011.49	270,226.80	128.67%	109.28%
May-11	303,916.22	224,157.09	73.76%	101.02%
Jun-11	218,206.77	270,152.32	123.81%	104.28%
Jul-11	225,463.25	331,288.03	146.94%	109.77%
Aug-11	236,930.15	371,614.24	156.85%	115.39%
Sep-11	220,097.69	352,010.97	159.93%	119.83%
Oct-11	227,299.78	222,621.26	97.94%	117.78%
Nov-11	309,521.12	226,986.44	73.33%	112.77%
Dec-11	226,181.34	314,206.29	138.92%	114.76%
<b>Total Net</b>	<b>2,970,486.20</b>	<b>3,408,987.32</b>	<b>114.76%</b>	<b>114.76%</b>

**CLAIM REPORT**  
**AMERICAN EMBASSY - RETIREES ONLY**  
**PERIOD COVERED: JANUARY 2011 - DECEMBER 2011**  
**CURRENCY: Nuevos Soles**

PERIOD	PREMIUMS	CLAIMS	NET CLAIMS (%)	
			MONTHLY	ACCUMULATED
Jan-11	11,653.04	43,198.63	370.71%	370.71%
Feb-11	11,992.14	32,493.16	270.95%	320.12%
Mar-11	11,891.35	72,571.57	610.29%	417.21%
Apr-11	11,624.95	18,272.29	157.18%	353.12%
May-11	11,891.37	29,750.31	250.18%	332.39%
Jun-11	11,891.37	16,303.66	137.10%	299.66%
Jul-11	12,734.79	23,142.73	181.73%	281.71%
Aug-11	12,734.77	15,409.48	121.00%	260.48%
Sep-11	12,734.77	17,983.02	141.21%	246.57%
Oct-11	12,734.77	29,128.22	228.73%	244.70%
Nov-11	12,734.77	25,564.51	200.75%	240.55%
Dec-11	13,352.50	18,382.79	137.67%	231.26%
<b>Total Net</b>	<b>147,970.57</b>	<b>342,200.37</b>	<b>231.26%</b>	<b>231.26%</b>