

Zimbra**yvette.salinas@co.hidalgo.tx.us**

Re: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OPTION

From : Angelica Tapia
<angelica.tapia@co.hidalgo.tx.us>

Thu, Nov 09, 2017



Subject : Re: CURRENT CONTRACT TERM - ONE YEAR
EXTENSION OPTION

To : Yvette Salinas
<yvette.salinas@co.hidalgo.tx.us>

Cc : Flora Vazquez
<flora.vazquez@co.hidalgo.tx.us>, Angeles
Torres <angeles_torres@uhc.com>

Good Morning Yvette,

Please proceed with the 1/1/18 renewal. Prices quoted on email below same as the ones currently in effect.

Thank You,

Angélica

C-15-410-10-27-UNITED HEALTHCARE-COBRA ADMINISTRATION SERVICES-HC.pdf - Adobe Acrobat

File Edit View Window Help

Create [Icons]

4 (4 of 7) 66.1% Tools Comment Share

COBRA and Direct (Retiree) Billing Fees

Client Name: Hidalgo County
 Effective Date: 11/28/16
 State: TX

Eligible Employees: 3,693
 Active Retirees:
 Quoted Date: 10/23/15

This quote offers two pricing options for COBRA and Direct/Retiree Billing Fees. The first option is PEPM pricing (Per Employee Per Month). This option will charge the PEPM fee against your actual medical subscriber count (you will provide this number to us on a quarterly basis). PEPM pricing is a great option for you if your company has a high volume of COBRA members or high turnover. It will allow you to have consistent, predictable billing. The second option is Per Event pricing. This is a great alternative for groups with a lower volume of COBRA members and lower turnover. You would only pay based on your actual COBRA activity (per Enrolled and per Qualifying Event Notice). Below, you will see the two options for pricing compared side-by-side, each quoted on a two-year basis.

*Account Executive: Please complete the information below (in gray) then send to your regional COBRA/DB Regional Service Executive (RSE) to have a Client Service Consultant (CSC) assigned. You will need to include the sold date, the pricing type selected (PEPM or Per Event) as well as the SAE information.

		*Pricing is on a two-year basis			
Sold Date	10/1/2015	What is PEPM Pricing?	<ul style="list-style-type: none"> Per Employee Per Month (PEPM) billing will charge the PEPM rate against your actual medical subscriber count. With PEPM billing, you will not be charged per COBRA service – monthly invoices, Qualifying Event Notices, Initial Rights Notifications, etc. PEPM is a great billing option for high volume / high turnover groups. PEPM allows consistent, predictable billing involving groups based on a quarterly basis for administrative services. 	What is Per Event Pricing?	<ul style="list-style-type: none"> Per Event pricing is based on the group's actual COBRA activity (per Continuant COBRA Continuant and Qualifying Event Notice, etc.) With Per Event pricing you will not be billed per UnitedHealthcare medical subscriber per month. Per Event pricing is a great alternative for low volume of low turnover groups.
UHC SAE:	N/A				
UHC SAE Email:	N/A				
UHC SAE Phone:	N/A				

UnitedHealthcare will receive the client the 2% COBRA administration fee that is routinely charged to the COBRA participants. UnitedHealthcare will provide COBRA administration for their entire benefit plan offering: medical, dental, vision, FSA, etc. This includes UnitedHealthcare offered plans as well as plans provided by other carriers if all coverage's are not with UHC.

COBRA Billing Set Up and Maintenance	Year One		Year Two	
	\$0.45 PEPM		\$0.45 PEPM	
Group Setup Fee (one time fee at implementation)	Included	n/a	Included	n/a
COBRA Continuant Takeover Charge (one-time charge per current continuant from previous COBRA administrator)	Included	n/a	Included	n/a
Ongoing Maintenance Fee (annual fee in subsequent years after implementation)	n/a	Included	n/a	Included

COBRA Services	Year One		Year Two	
Ongoing COBRA Continuant Per Month Charge	Included	Included	\$4.00	\$4.00
Qualifying Event Notification (QEN) includes distribution of QENs and election forms via proof of mail with instructions, and processing of enrollment forms returned (per notice)	Included	Included	\$14.00	\$14.00
Outside Carrier Eligibility Fees and Premium Reimburse (per carrier per month)	Included	Included	Included	Included
COBRA / HIPAA Initial Rights Notifications (per notice) AKA New Hire Notification	Included	Included	\$3.00	\$3.00
Women's Health Cancer Rights Act (WHCRA) Notices (per notice)	Included	Included	Included	Included
State Continuation Notification (per notice)	Included	Included	Included	Included
Past Due Notices to Continuants (per notice, upon request)	Included	Included	Included	Included

Direct (Retiree) Billing Services	Year One		Year Two	
Direct (Retiree) Billing (per continuant per month)	\$4.00	\$4.00	\$4.00	\$4.00
Past Due Notices to Continuants (per notice, upon request)	Included	Included	Included	Included

The following are Optional Employee Notification Services Available to customers purchasing COBRA/Direct Bill Services

Retro COBRA / HIPAA Initial Rights Notices (per notice)	\$3.00	\$3.00	\$3.00	\$3.00
Post-COBRA HIPAA Certificates of Coverage on outside COBRA members (per certificate)*	\$3.00	\$3.00	\$3.00	\$3.00
HIPAA Privacy Notices (per notice)	\$3.00	\$3.00	\$3.00	\$3.00
Medicare-D Notifications	\$0.95	\$0.95	\$0.95	\$0.95

Open Enrollment Services	Year One		Year Two	
Open Enrollment Service (per person): includes packaging and distribution of all related benefit materials and/or informational documents as designated by and provided by the client	\$8.00	\$8.00	\$8.00	\$8.00
	Plus Postage	Plus Postage	Plus Postage	Plus Postage

*There is a \$100 minimum for Open Enrollment Services.

*We provide these certificates through our internal processes as part of standard services for UnitedHealthcare members.

From: "Angeles Torres" <angeles_torres@uhc.com>
To: "Angelica Tapia" <angelica.tapia@co.hidalgo.tx.us>
Cc: "Yvette Salinas" <yvette.salinas@co.hidalgo.tx.us>, "Flora Vazquez" <flora.vazquez@co.hidalgo.tx.us>
Sent: Monday, October 23, 2017 9:48:10 AM
Subject: RE: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OPTION

Hello Angelica,

Please see attached 2018 (one year extension), please be advised that effective 2019 rate will change.

Thanks,

Angeles Torres | COBRA/Direct Bill Client Service Consultant

UnitedHealthcare Benefit Services

OptumHealth Financial Services

200 Patrol Road

Jeffersonville, IN 47130

T 763.273.9758

angeles_torres@uhc.com | unitedhealthgroup.com

Our United Culture The way forward

Integrity | Compassion | Relationships | Innovation | Performance

From: Torres, Angeles

Sent: Friday, October 20, 2017 2:29 PM

To: 'Angelica Tapia'

Cc: Yvette Salinas; Flora Vazquez

Subject: RE: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OPTION

Angelica,

I have been advised that yes this is possible, you are getting the one year extension option. At this moment the billing analyst is the paperwork ready you should have it no later than Monday or Tuesday. She is hoping to have all the information in later Toda for email till then.

Best regards.

Angeles Torres | COBRA/Direct Bill Client Service Consultant

UnitedHealthcare Benefit Services

OptumHealth Financial Services

200 Patrol Road

Jeffersonville, IN 47130

T 763.273.9758

angeles_torres@uhc.com | unitedhealthgroup.com

Our United Culture The way forward

Integrity | Compassion | Relationships | Innovation | Performance

From: Angelica Tapia [<mailto:angelica.tapia@co.hidalgo.tx.us>]

Sent: Thursday, October 19, 2017 10:03 AM

To: Torres, Angeles

Cc: Yvette Salinas; Flora Vazquez

Subject: Re: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OPTION

Importance: High

Good Morning Angeles,

Any update?

Thank You,

Angélica M. Tapia

Health Benefits Accountant IV
Hidalgo County DBM Employee Benefits Division
2818 S. Business Hwy 281
Edinburg, TX 78539
Ph (956) 292-7025 x5415
Fx (956) 292-7029

From: "Angeles Torres" <angeles_torres@uhc.com>
To: "Angelica Tapia" <angelica.tapia@co.hidalgo.tx.us>
Cc: "Yvette Salinas" <yvette.salinas@co.hidalgo.tx.us>, "Flora Vazquez" <flora.vazquez@co.hidalgo.tx.us>
Sent: Thursday, October 12, 2017 12:38:32 PM
Subject: RE: CURRENT CONTRACT TERM - ONE YEAR EXTENSIOI

Hello Angelica,

I have requested the COBRA quote contact person so work on your request below. I will keep you posted on the status.

Thanks,

Angeles Torres | COBRA/Direct Bill Client Service Consultant

UnitedHealthcare Benefit Services

OptumHealth Financial Services

200 Patrol Road

Jeffersonville, IN 47130

T 763.273.9758

angeles_torres@uhc.com | unitedhealthgroup.com

Our United Culture The way forward

Integrity | Compassion | Relationships | Innovation | Performance

From: Angelica Tapia [<mailto:angelica.tapia@co.hidalgo.tx.us>]

Sent: Thursday, October 12, 2017 1:33 PM

To: Torres, Angeles

Cc: Torres, Angeles; Yvette Salinas; Flora Vazquez; Reed, Brooke

Subject: Re: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OPTION

Hi Angeles,

Just to clarify the contract years.

Year 1 4/1/13-12/31/13 - was done as such to finalize the year as there
an extension with prior TPA for Jan-Mar

Year 2 1/1/14-12/31/14

Year 3 1/1/15-12/31/15

Year 4 1/1/16-12/31/16

Year 5 1/1/17-12/31/17

One year renewal 1/1/18-12/31/18

Thank you,

Angélica M. Tapia

Health Benefits Accountant IV
Hidalgo County DBM Employee Benefits Division
2818 S. Business Hwy 281
Edinburg, TX 78539
Ph (956) 292-7025 x5415
Fx (956) 292-7029

From: "Angelica Tapia" <angelica.tapia@co.hidalgo.tx.us>
To: "Angeles Torres" <angeles_torres@uhc.com>
Cc: "Angeles Hernandez" <angeles_hernandez@uhc.com>, "Yvette Salin" <yvette.salinas@co.hidalgo.tx.us>, "Flora Vazquez" <flora.vazquez@co.hidalgo.tx.us>, "Brooke Reed" <brooke_reed@uhc.com>
Sent: Thursday, October 12, 2017 12:14:15 PM
Subject: CURRENT CONTRACT TERM - ONE YEAR EXTENSION OF

Good Morning Angeles,

We are in the last year of current 5 year contract with UHC (12/31/17). We would like to exercise the one year option for 2018. Would you please send your 1/1 quote.

Thank You,

Angélica M. Tapia

Health Benefits Accountant IV
Hidalgo County DBM Employee Benefits Division
2818 S. Business Hwy 281
Edinburg, TX 78539
Ph (956) 292-7025 x5415
Fx (956) 292-7029

RFP-2012-145A-01-16-CGA-Section 125 Voluntary Ins. Products.pdf - Google Chrome

agenda.hidalgocounty.us/docs/2015/CC/20151027_2627/51594_RFP-2012-145A-01-16-CGA-Section%20125%20Volur

RFP-2012-145A-01-16-CGA-Section 125 Voluntary Ins. Prod... 2 / 2

Required Certifications and Submittal: This section will contain any licenses (current) certifications as required by the Texas Department of Insurance. Hidalgo County requires prop to include copies of their Professional Liability Insurance as stated in Exhibit C herein.

DURATION OF CONTRACT: The initial term of the contract shall be for a five (5) year term v (3) year rate guarantee. In addition, any renewal must be delivered to the County of Hidalgo n (90) days prior to renewal. Hidalgo County has the option to renew for an additional one (1) under the same rates, terms and conditions. Hidalgo County reserves the right to continu awarded proposals under the same rates, terms and conditions for an additional sixty (60) day (Period at the end of the contract term in the event new providers have not been awarded.

All costs and expenses associated with the preparation and submission of proposals shall be responsibility of the vendor and no reimbursement for such charges or expenses shall be passed Hidalgo County, Hidalgo County Drainage District #1 or Hidalgo County Appraisal District and other applicable programs and agencies under Hidalgo County.

SCOPE OF SERVICES

This e-mail, including attachments, may include confidential and/or proprietary information, and may be used only by the person or entity to which it is addressed. If the reader of this e-mail is not the intended recipient or his or her authorized agent, the reader is hereby notified that any dissemination, distribution or copying of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender by replying to this message and delete this e-mail immediately.

This e-mail, including attachments, may include confidential and/or proprietary information, and may be used only by the person or entity to which it is addressed. If the reader of this e-mail is not the intended recipient or his or her authorized agent, the reader is hereby notified

that any dissemination, distribution or copying of this e-mail is prohibited. If you have received this e-mail in error, please notify the sender by replying to this message and delete this e-mail immediately.



8013783.995000001

569 KB

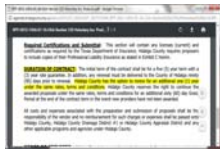


image001.png

201 KB
