

REQUEST FOR PROPOSALS
Health Insurance Broker

The Town of Queensbury (hereinafter referred to as “the Town”) is seeking written proposals from qualified firms to provide **Insurance Brokerage Services** for its group health insurance plans.

BACKGROUND

The Town of Queensbury located approximately one hour north of Albany, N.Y. in the Lake George area of New York State sponsors group health insurance benefits for approximately 125 full-time active employees and roughly 90 retirees.

The Town’s Accounting Office administers enrollments and contract changes through its own staff. Claims are paid directly by the Insurance Vendor.

All Health Plans are experience-rated and fully insured. Anthem is the sole Health Insurance provider for all Town employees and retirees, with coverage renewing on a **July 1** plan year basis. Prescription Drugs are included in the health insurance plans. The Dental Plan for the Town is currently with Anthem and the Vision benefit is the Blue View Plan through Anthem.

REQUESTED SERVICES:

1. Act, on behalf of the Town, in regard to health insurance vendor management oversight;
2. Provide Town Management with ad hoc and day-to-day assistance in administration of health plans;
3. Provide updates on compliance with legislative requirements and provide guidance with implementation of requirements;
4. Identify and compare alternative funding arrangements and their implications for the Town of Queensbury regarding total cost, Town cost, employee cost, administration and future trends;
5. Identify and compare alternative health insurance plan designs and their implication for the Town of Queensbury regarding total cost, Town cost, employee cost, administration and future trends;
6. Review plans and funding arrangements utilized by the Town on an on-going basis for potential cost-savings and opportunities to move toward a consumer-driven strategy;

7. Present information to facilitate discussion with the Town's employee association (Civil Service Employee Association); follow-up to requests in response to discussions and issues that arise during the meetings;
8. Provide written plan for on-going periodic review of plan design, funding and administration;
9. Manage health insurance vendor bid process, as necessary, including development of request for proposals, collection and summary of key proposal information, interaction with vendors, and assistance with the evaluation process;
10. Attend open-enrollment meetings, health fairs (as needed and scheduled), and other informational meetings for employees and/or retirees and dependents as scheduled;
11. Assist the Town with coordination of Medicare benefits for its Medicare eligible retirees.
12. Dedicate two (2) employees of your organization with dedicated reasonable times to assist employees and retirees with questions and issues on-site at Town facilities or alternate locations or the **Brokers local offices**. Employees must be available during regular business hours on a walk-in basis.
13. The current collective bargaining agreement and policy of the Town requires partial reimbursement of prescription drugs (Rx) and office co-pays and full reimbursement of inpatient hospital admission. The selected broker will assist with the reimbursement requests with the current third-party administrator.
14. Provide/disclose plan for pricing of continued Broker Services, as well as plan commissions.
15. Manage the Town's HRA for member co-pays and deductibles.

Except as otherwise specified in the forthcoming Agreement, all equipment, materials, and supplies required to carry out the provisions of the Agreement and to perform the services described above shall be furnished by the preparer and ultimate Broker selected and shall be fit for their purpose to the reasonable satisfaction of the Town.

CRITERIA FOR EVALUATION OF PROPOSAL

All proposals will be reviewed by the Consultant selected by the Town along with the management employees selected by the Town.

Among the criteria (not listed in any specific priority) to be utilized for evaluation of submitted proposals are:

1. The Broker/Agent's ability to demonstrate familiarity with the local health insurance industry, regulations, laws, practices and trends as they relate to public-sector group employer plans;
2. The Broker/Agent's ability to demonstrate the successful development and implementation of plan modifications in other organizations, both public and private;
3. The Broker/Agent's experience with collectively bargained Group Health Insurance plans;
4. Fees: Standard services provided and services for which additional fees will be charged – including innovative plan for payment of broker/agent services such as flat fees, built-in incentives, etc.
5. Other factors as may be considered appropriate by the Town.

PROPOSAL RESPONSE FORMAT

It is very important that all Proposals follow the same format. All proposal responses must fit within a one inch three-ring binder. Respondents must adhere to the structure outline shown below. Please use a tab in your Proposal for each of the following (there should be (8) tabs);

1) Financial Proposal Information

Respondents must disclose complete and detailed information concerning all insurance carrier/brokerage firm Commission arrangement(s) including the source, nature and kind and amount of all such commissions.

It is expected that the Broker/Agent will provide all services described in the "Requested Services" of this RFP. The proposed fees by the Broker must include all costs including miscellaneous administrative expenses, travel, lodging, meals, etc.

Provide the annual cost of fees to the Town for three one-year periods for the services described in this RFP.

2) Detailed Scope of Services

A detailed scope of services should be included in this section. Please respond to numbers 1 through 14 under “Requested Services” on pages 1 and 2 of this RFP.

3) Experience and Capability of the Individuals Assigned to this Project:

a. Principal Consultant(s)

Name the Principal Consultant(s)/Account Executive(s) who will provide Consulting Services to the Town under this agreement/contract. For each individual, provide the following information:

- i. Description of consulting experience;
- ii. Education;
- iii. Length of employment with the firm;
- iv. Length of employment as a Broker/Consultant/Agent;
- v. Professional credentials and affiliations;
- vi. Description of prior employment;
- vii. List principal areas of strength;
- viii. Anticipated percent of time or number of hours this individual will devote to the Town’s account annually;
- ix. List the three largest clients (of any type) served by the Principal Broker/Consultant/Agent, and
- x. List the three largest municipalities served by the Principal Broker/Consultant/Agent.

b. Back up Consultant(s) and other Personnel

Identify the Broker/Consultant(s)/Agent(s) who will provide backup assistance to the Principal Broker/Consultant(s)/Agent(s). Provide information for each individual as requested in 3.a i.-x.

c. Organizational Chart

Provide a general organizational chart of your firm. Specify the names/positions on the chart of all personnel who will work on the Town’s account.

d. Knowledge of Insurance Law

Knowledge of and compliance with new and existing Federal and State of New York laws affecting insurance programs and services expected from the Broker/Consultant/Agent. Explain the process your company utilizes to provide legal analysis and review of such laws. Provide the background and experience of the individual or individuals in your company who will be responsible for

analyzing and interpreting applicable laws with respect to the Town's insurance programs. Provide the relevant information for this individual requested above.

4) Experience

- Background/history of your company.
- Level of experience and at least three (3) references for engagements with clients, including experience with clients in other municipalities. Please include contact information and title for all references.

5) Corporate Summary:

Name of Company:

Contact Name & Title:

Street Address:

City, State, ZIP:

Telephone:

Email:

Fax:

Federal Tax ID #:

Company URL, if available:

6) Sample of Respondent's Contract.

7) Describe any recommendations or suggestions above and beyond the requirements listed in this request. Identify any additional costs related to these recommendations or suggestions.

8) Describe your specific experiences in cost containment/reduction strategies for health benefit programs with large municipal organizations. Additionally, provide your experience working with bargaining units.

OWNERSHIP OF SUBMISSIONS:

Upon submission, all responses become the property of the Town. The Town reserves the right to use the information and any ideas presented in any submission in response to the RFP, whether the submission is accepted.

CANCELLATION OR AMENDMENT OF RFP:

The Town reserves the right to cancel or amend this RFP at any time and will notify all known RFP recipients accordingly.

AWARD:

This Proposal will be awarded in the best interest of the Town and finalist interviews will be tentatively scheduled for the beginning of October 2025.

SUBMISSION DEADLINE:

Proposals submitted to the Town shall address all services required of the provider as well as all criteria for evaluation of the proposal. Proposals must also include a summary of the provider's liability insurance.

One original and nine (9) copies of proposals must be received by the Town no later than 4:00p.m. on Monday, September 15, 2025. Proposals may also be hand delivered between the hours of 9:00a.m. and 4:00p.m. on any regular business day prior to or on Monday, September 15, 2025

The contacts mailing and email address for the original and nine (9) copies as well as an electronic version of proposals is as follows:

Barbara Tierney, Budget Officer

Town of Queensbury

742 Bay Road

Queensbury, N.Y. 12804

Email: barbarat@queensbury.net

Phone: (518) 761-8240

An electronic version of the proposal must also be forwarded/submitted to the Town's Consultants:

Haylor, Freyer & Coon

Tom Augostini

Email: taugostini@haylor.com

Phone: (607) 206-0929 cell

Rebecca Perkins

Email: rperkins@haylor.com

Phone: (315) 868-0379

An email must be sent to the Town's Budget Officer (at the email address listed above) by **Friday, August 8, 2025**, indicating your company's intent to respond to the RFP. The email address used to submit the intent to respond will be used by the Town to distribute any additional information, respond to questions, and share relevant communications with all firms responding to the RFP.

All questions related to the RFP must be submitted by:

Monday, August 11, 2025.

Responses to all questions will be distributed to participating firms by:

Monday, August 18, 2025.

Proposals received after the deadline will not be eligible for consideration. The Town cannot be responsible for any proposals or materials that are mailed and not received by the deadline.

CONTACT:

Questions shall be e-mailed to: Barbara Tierney, Budget Officer
Email: barbarat@queensbury.net

742 Bay Road, Queensbury, NY. 12804
Town Hall (518)-761-8201
Fax (518)-745-4445