

VENDOR RESPONSE

RFP#0746 Professional Services for Claims and Administrative Services Audit of Health Insurance Plan

Electronic Response: Vendors may add additional documents, through the upload method on our website. These additional documents may include PDF product literature, company information, etc. The vendor response boxes below are expandable as your response is typed in.

Transmittal Letter: Summarizing your understanding of the RFP. Indicate who will be the Respondent's authorized representative; give name, title, address, e-mail address, phone and fax. The person identified shall be empowered to make binding commitments for the Respondent.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

Section 1. Organizational Capabilities

Furnish information on your firm, including such information as size of the firm, location of the office from which the work is to be performed and the number of partners, managers, supervisors, seniors and other professional staff employee at that office. Furnish information on the firm's financial position and number of years in business as well as the length of time the firm has been performing audits of local governments. Also describe any unique approaches or techniques developed and used by the firm, which would give it an advantage in this specific type of project.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

Section 2 – Firm's Qualifications - This section should include the following:

1. Provide a summary of your firm's experience in compliance and/or financial audits of employer sponsored group health insurance programs. Also, provide a similar experience summary for the office that will perform this audit. Include significant audits performed in the last three years especially those performed for government employers. Include the employer's name and address, number of subscribers, number of insured, number of claims, etc.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

2. Describe your firm's experience auditing managed care health insurance plans. Provide the names of three organizations for which you have performed compliance and/or financial audits (preferably compliance audits) of group health insurance or similar insurance programs. Include significant audits performed in the last three years, especially those performed for government employers. For each reference, provide the name and title of the client's contact person, complete address, telephone number, and a brief description of the audit performed.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

3. Provide resumes describing the education and relative work experience of the lead auditor and/or other key staff who would be assigned to this project. Include resumes for all individuals who would be assigned to this audit that show their experience performing audits of group health insurance programs. The format of individual resumes for key personnel should be as follows:
 - a. Name and position title
 - b. Total years experience with current firm and others
 - c. Education (degree, major, institution, year)
 - d. Summary of pertinent experience and qualifications
 - e. Identify the number of studies/plans that have been done by the individuals who will handle the Waukesha County project. Give representative sample and number of similar studies that were handled and whom they were done for.
 - f. Provide any other information that would assist the County in determining the qualifications of the individuals and their ability to complete the services required.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

Section 3 – Firm's Approach to the Examination

Waukesha County or UnitedHealthcare will make available to the contractor such data and/or statistical information, in mutually agreeable form (electronic media and/or hard copy) as may be necessary for the performance of the work described herein and which is available in the records and files of the County and/or TPA. Provide a detailed report of your action plans to perform each task of the project: Claims processing, payments, and administrative services, including contract and regulatory compliance. In addition, address the following aspects of this project.

- 1.** Understanding of Required Audit Services — What processes and procedures will you use to perform a comprehensive compliance audit of the group health insurance program described above? Your response should include all the major elements of your audit program. Explain in detail.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

- 2.** Evaluation of Internal Controls — What processes and procedures will you use to evaluate and report on UnitedHealthcare’s implementation and maintenance of internal controls used in the administration of the group health insurance program described above? How will your evaluation of internal controls affect your audit program?

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

- 3.** Risk Assessment — What attributes will you assess for risk? How will you assess the overall level of risk in the administration of this program? How will you determine whether risks are appropriately controlled? Based on your assessment of risk, how will you adjust your audit program to test for the effectiveness of controls in the areas at risk?

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

- 4.** Data Analysis — What attributes of the paid claims data, enrollment data, billings, etc. will you analyze to ascertain compliance with contract provisions, generally accepted accounting principles, good business practices, etc. Moreover, to determine trends, unusual events, inappropriate payments, etc.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

- 5.** Substantive Tests — What substantive tests will you use to evaluate the accuracy of recording and processing transactions and the effectiveness, efficiency, and economy of transaction processing?

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

- 6.** Means of Testing and Analyzing Data — Describe your testing process by responding to the following:
- Do you plan to use a computer to assist you on this audit? If not, how will you test and analyze the transactions and databases of this program? What processes and procedures will you use? Explain in detail.
 - If yes, identify the audit steps that will be computer assisted and why? Identify the audit steps that will not be computer assisted and why not?
 - How will the computer processes enhance the audit timing, process, and results?
 - Describe your computer hardware, relevant software, and capabilities.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

7. Report — What are your procedures for developing, finalizing, and submitting audit reports? Include a description of how you would
- structure reports
 - narrate your audit reports
 - review and assemble the pertinent findings and recommendations

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

8. Other documentation — How and in what time frame will you document ideas, issues, concerns, etc. raised in discussions and meetings or which come to your attention during the course of this audit?

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

9. Additional information — Provide any additional information that you believe should be considered in evaluating this proposal.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>

Section 4 – Exceptions

Indicate any exceptions you are taking to the terms and conditions, contractual and other requirements defined in the RFP. If exceptions are taken, cite the paragraph involved, the exception taken, and state alternate language acceptable to the Respondent. Alternative language is subject to negotiation and/or approval.

VENDOR RESPONSE:

<INSERT YOUR RESPONSE HERE>