Q: I have passed the RFP and other relevant materials along to my product team to take a look. Transparently, we typically prefer to speak through our capabilities rather than fill out RFPs. Before my team submits the information above, would you be open to a quick introductory call? This would be about 20-30 minutes to chat through our strengths and ensure that we'd be a mutual fit.

A: *As the RFP indicates, answers to questions will be posted on the FCCH website no later than May 8, 2020. This is intended to ensure all potential proposers receive the same information in the same manner.*

Q: We see that onsite demonstrations are being targeted for the week of June 22. Will this potentially change due to possible travel restrictions related to COVID-19?

A: *Yes. If on-site demonstrations are not possible, we will coordinate remote demonstrations with the appropriate parties in virtual attendance.*

Q: The RFP states that selected solution will be "Implemented no later than August 1". Are you looking to start implementation on Aug 1 or to be fully live/functional on August 1?

A: *Our existing system will terminate August 31, 2020. Our goal is to be sufficiently implemented such that we can ensure a smooth transition for our users from our existing system to the new system by August 31*.

Q: I opened up the document and some of the dates have passed. Will there be updated dates?

A: *It is possible that dates may change and any changes to the dates identified in the RFP will be posted on the website. Currently, notification of semi-finalists, initial demonstrations, finalist(s) notification, on-site demonstrations, and contract award dates are tentative, as noted in the RFP.*

Q: *Article 2 – Compensation, Section 2* reads that "*Payment is subject to acceptance by FCCH of the work product and to any negotiations between the parties pursuant to Article 1, Scope of Work. Invoices shall be submitted based on deliverables provided / monthly / twice-monthly on or about the 1st and 15th of each month, according to a format provided by FCCH. No invoices will be reimbursed unless submitted within thirty (30) days after the last day of the period in which services were performed. FCCH shall issue payment within 30 (days) of approval of Contractor's invoice.*"

Question: The general practice of most payroll providers that when payroll is submitted to the vendor for processing, the vendor will draft the funds from the client's account to cover all payroll (direct deposits, payroll checks, garnishments, etc.), taxes and the vendor's fee for services. Is FCCH expecting that rather than the vendor drafting for their fees along with the processing of each payroll that the vendor provide an invoice to FCCH and FCCH will pay that invoice within 30 days?

A: *Compensation terms will be tailored to fit the nature of the services provided. Vendors who have specific compensation requirements should include that language in their proposal. The handling of processing fees should be included in the language.*

Q: Can you please provide clarification regarding the "implemented no later than 8/1/20"? The reason for the clarification is to provide realistic implementation timelines to meet your open enrollment window.
   A: *Our existing system will terminate August 31, 2020. Our goal is to be sufficiently implemented such that we can ensure a smooth transition for our users from our existing system to the new system by August 31.*

Q: Please describe your current method for enrollment for benefits (i.e. Ben Admin system, paper).
   A: *Employees submit the entire packet of enrollment forms to the Human Resources Department and the information is entered centrally. Dependent information is verified by birth certificate, marriage license, and SSN card.*

Q: Please provide plan year and typical open enrollment dates.
   A: *January 1 – December 31. Open enrollment occurs during the first two weeks in December for an effective date of January 1st.*

Q: With an aging population, more chronic illness and shrinking nursing workforce, how do you plan to leverage technology to recruit in a very competitive market?
   A: *We have completed market analysis through some of our current recruiting agencies and our current system for open vacancies posts in our areas of interest for nurses. We have been successful through word-of-mouth and our benefit package, focus on primary care and hours of operation make us an attractive employer.*

Q: The cost to replace an RN is $97,000 - $104,000 a year and the average turnover rate in healthcare is 50%, how do you plan on leveraging technology to reduce your turnover and labor costs?
   A: *FCCH does not have a high rate of turnover among our nursing staff.*

Q: 50% of healthcare providers manage compliance documents by hand, how do you plan to leverage technology to avoid liability and compliance challenges?
   A: *Currently, documents are completed manually. We would prefer for the new system to complete all compliance documents.*

Q: Would you evaluate different technologies to replace any currently outsourced vendors if it makes business sense, creates efficiencies, and fits the goals of your organization?
   A: *Yes.*

Q: Is there any vendor or service you use today for any of the YELLOW HIGHLIGHTED areas BELOW that you are not willing to change? Please list:
   A: *No*

Q: Please share the top 3 goals of your organization over the next 3 years as it pertains to growth, funding, areas of care etc.

A: Decrease our overall employee turnover rate, increase and streamline access to training opportunities, and implement an on-line benefits enrollment system.

Q: Please share your top 3 current challenges in meeting those goals.
A: Improving staff communication, conducting regular and comprehensive market reviews, compare and contrast our care delivery approaches with other similar organizations.

Q: What is the reason for posting an RFP?
A: The agreement with our current vendor will expire.

Q: Are you unhappy with your current vendors?
A: Some have met our needs and expectations, others have not.

Q: What specifically is not working well for you?
A: Our benefits package is hard to design in our current system according to our contracts or policies, tracking of different benefits is challenging, and making sure our old/changed information is stored so that it is easily accessible.

Q: How many 1099s do you pay?
A: Approximately 50.

Q: You mention students. Are these paid or unpaid interns? If paid, are they W2 or 1099? How many do you have at any one time? Is this in addition to the above number of 1099s? If unpaid, do they still need to access a profile/HRMS tools?
A: Most students are interns and are unpaid. Those who receive compensation receive a 1099. We typically have very few paid interns.

Q: Do you have any international employees? If so, where and how many?
A: Not at this time.

Q: Do you have employees in states other than New Mexico? If so, what states and how many in each?
A: Not at this time.

Q: What is your pay frequency?
A: Bi-weekly.

Q: When is your medical renewal?
A: Open enrollment occurs during the first two weeks in December for an effective date of January 1st.

Q: How many administrators do you anticipate needing access?
A: Within the Human Resources Department, five administrators.

Q: Please provide an example of "Supports direct employee-to-manager reporting relationships". Do you mean that you need managers to see and have reporting capabilities for their specific teams?
A: Yes.

Q: Regarding "employees can list multiple address types", please give examples. Do you mean P.O. Box vs. residence?
A: Yes.

Q: Regarding "Provides built-in alerting capabilities": Is this in general? Do you need employee level alerts? Administrator level alerts? Do they have to be automated or initiated by an administrator? Can you provide an example of an alert you would need at each level?
A: Yes to all. In our current system we track employee licenses that have an end date. The supervisor is alerted 30 days in advance of the expiration. Administrators in the HR Department do not get alerts but we set employees up for training/license. The supervisor receives alerts for the employee.

Q: Regarding "Administrators can view a preview of their entire payroll at any point during the pay cycle": Please elaborate on this. Is this a function of monitoring overtime and scheduling/budgeting for that payroll? What other needs do you have for this visibility?
A: It's a function of needing to be sure that payroll is processed with the correct coding, departments, etc. During the pay cycle, this visibility enables us to catch errors early. Also, it enables us to monitor costs, overtime, etc.

Q: Do you need an expense reporting and reimbursement system (For example Oracle)? What do you use today? Is it critical that this integrates with your payroll and HRMS?
A: Yes. Although we do not now use an integrated system, it is a feature we would find valuable.

Q: How many rates of pay can one employee have? (max)
A: Currently one. That may change in the future, however. In addition, some employees receive various stipends and differentials.

Q: How many "jobs" are you tracking labor for at any one time?
A: 15.

Q: Please elaborate on the system you use for grant writing and tracking labor for those grants?
A: Grant writing is performed by a different department within the organization. Tracking labor against individual grants is done by the HR and Finance departments.

Q: Regarding turning off Social Security for certain individuals: Who are you turning this off for? Under what circumstance would you be doing this? Is this a question of the function of hitting SS Wage cap for individuals?
A: Yes.

Q: What system do you use for accounting/GL?
A: Abila MIP.

Q: How many carrier feeds do you need?
A: Six.

Q: Please list all benefits you offer, whether there is an employer contribution or not. Please indicate the % employer contribution for each. Are you looking to continue handling benefit

administration by your internal team, or would you like to look at a managed services offering to outsource Benefit Administration?

A: At this time, we intend to continue to handle benefit administration. Our benefits include UMR-Medical Coverage with an 80/20 split, Benefit Source Dental at 100% employee paid, Hartford Basic at 100% employer paid, Hartford Supplemental at 100% employee paid, Hartford LTD at 100% employer paid, FSA Medical max $1,000 and employee paid, FSA Dependent Care max $5,000 employee paid, AFLAC at 100% employee paid (STD, Accident, Cancer, Vision, Rider) Retirement-Principle 3-8% employer contribution based on years of service and employee contribution which may include catch up. EAP-Paychex/Outcomes-100% employer paid, and Life Lock-100% employee paid.

Q: Regarding "HR Department maintains PII compliance…" Do you mean ADP's HR department or FCCH's HR department?

A: FCCH HR Department

Q: Do you need to allow mobile employee shift swaps, employees publishing open shifts for grab, administrators publishing last minute open shifts (as long as they fall within OT rules and have workflows for approval)?

A: Currently, FCCH does not operate with different employee shifts. This may change in the future and we would like to identify systems that can accommodate various shift scenarios.

Q: How often do shift swaps happen? How many shift swaps per day or week do you have?

A: See above.

Q: How do you handle Leave Administration and FMLA compliance today? Is it done inhouse or by a vendor? If by a vendor, who handles this and is there an additional cost for it?

A: Leave administration is performed in-house.

Q: What system do you use today that "provides the ability to identify and develop core strengths and proficiencies to drive business outcomes"? Is this an employee engagement focused tool or more focused on performance based metrics tied to compensation? What additional, specific support do you need in employee engagement? Trainings in your systems that you can share.

A: We currently use an ad hoc form which is similar to our performance evaluation form. The form includes The Joint Commission/HRSA requirements for certain positions. Evaluations are focused on competencies and not directly tied to compensation. Mandatory system-based trainings include Customer Service, Diversity Training, and Drug-Free Workplace. Future trainings, currently provided in person, will include HIPAA, Sexual Harassment, Bloodborne Pathogens, Age Competencies, Fraud, Waste and Abuse in Healthcare, and various OSHA required trainings such as use of PPE.

Q: What vendor do you use for market benchmarking today?

A: MyStaffingPro and outside agencies.

Q: Do you need one-on-one HR support in creating career development plans/career pathing, or do you only need a technology to track and report on it? Please elaborate on this.

A: We are seeking a technology to track and report.

Q: What Learning Management System do you use today?
   A: Paychex ENI system.

Q: Where do you get content for Compliance training?
   A: Paychex ENI system.

Q: Do you offer professional development training? If so, where do you get the content? How is it administered?
   A: In addition to continuing education available to licensed clinical staff, professional development is offered through our Leadership Training and Development Center through a blend of internally and externally developed courses.

Q: Do you have a leadership training program? If so, where do you get the content? How is it administered?
   A: See above.