

## Addendum #1

1. **Request:** Provide the medical census in excel format and include additional fields such as first name and last name of employees and dependents.

**Response:** Attached is the medical census in excel format. However, we are unable to provide any additional fields on the census at this time.

2. **Request:** Please assist the group in completing the Risk Assessment Form (RAF) attached.

**Response:** We are unable to complete the Risk Assessment Form at this time. If this specific form is still required by the awarded proposer at the end of the RFP process, we will be more than happy to do so.

3. **Request:** Please help ensure the following are included: a) Commission Levels for: Medical (Dental, Vision); b) Current Broker/Agent & Agency Names.

**Response:** Please reference, within the RFP, Attachment 8.9 Agent of Record Appointment and Attachment 8.10 Agent Commission/Service Fee Schedule.

4. **Request:** Please confirm how many years the group has been with their current carriers for Medical =, Dental =, Vision =. Also please provide the group's current carrier name for Dental and Vision.

**Response:** *Florida Blue* is the current medical carrier since 10/01/2016. *United Healthcare* is the current dental carrier since 10/01/2014. *National Vision Administrators* is the current vision carrier since at least 10/01/2012 when Albritton Insurance Services became the Agent of Record. Please note that the dental and vision are not being asked to be quoted as part of this RFP. But, if you would like to list or provide any additional information pertaining to discounts applied to the medical for adding ancillary products, please do so.