



**MORIN BUILDING
8570 EXECUTIVE PARK AVENUE
FAIRFAX, VIRGINIA 22031**

March 7, 2022

To: All Prospective Offerors

Issued by: Elizabeth B. Dooley, CPPO, CPPB, Procurement Lead Buyer

Subject: Addendum 1, RFP 22-011, Medicare Supplemental Insurance Plan N and Medicare Prescription Drug Plan (Part D) with Outsourced Administration for Medicare Eligible Retirees and Spouses

The purpose of this addendum is to adjust the schedule to the subject RFP.

Section I: Questions & Answers

1. In lieu of the requested Medical Supplemental offering, can you please confirm that you would accept a fully-insured Medicare Advantage proposal that would duplicate the current/requested benefits and level of coverage, while allowing Fairfax Water Authority to take advantage of enhanced Care Management, benefits above and beyond Original Medicare, and lower costs to the plan and retirees?
 - a. No. The RFP is for a Medical Supplement Insurance Plan only.
2. Would Fairfax Water Authority consider a fully-insured Medicare Advantage with Prescription Drug(MAPC) proposal for a 1/1/23 effective date?
 - a. No. The RFP is for a Medical Supplement Insurance Plan only.
3. Please validate for the Formulary Comparison Template - I believe we are missing the Formulary Comparison Template tab within Attachment H.
 - a. The formulary comparison has been provided as a new Attachment I to the RFP, see Section II below.

Section II: Attachments

The following new attachment has been added to the RFP via Addendum 1.

Attachment I: PDP Utilization Template

No other changes have been made to the RFP.

**RFP 22-011 – Medicare Supplemental Insurance Plan N and Medicare Prescription Drug Plan
(Part D) with Outsourced Administration for Medicare Eligible Retirees and Spouses**

Acknowledgement of Receipt of Addendum # 1

I certify that the information contained in the proposal submitted on behalf of the below named firm incorporates any and all changes to the original specification. I further certify by my signature below, that I am fully authorized to acknowledge receipt of the above addendum and also bind the below named firm to the terms, conditions and specifications of the RFP and any changes thereto made by this addendum.

ACKNOWLEDGED BY:

FOR:

Company Name

Date

Signature of Authorized Agent

Printed/typed name

Title