

Answers to all questions submitted to the
Connecticut Health Insurance Exchange d/b/a Access Health CT
Request for Proposals (RFP) for Reputation Enhancement/Public Relations and Crisis
Communication Support

Posted August 1, 2018

1. Does the communications plan need to specifically address brokers? Small business owners?

ANSWER: Access Health CT engages with a variety of stakeholders including (but not limited) brokers, small business owners, enrollment specialists, Board of Directors, staff, carriers, etc.

2. Clarification of the crisis communications services rate card – do you want the utilization number to represent: A proportion of each individual’s total workload, utilization as a proportion across just crisis communications services, or utilization as a proportion of the entire program fee

ANSWER: Utilization as a proportion across just crisis communications services

3. What is the weekly time requirement to participate in in-person meetings?

ANSWER:

- **In-person:** There is a one (1) hour weekly meeting with top executives (CEO, COO, Dir. Marketing, and Government Affairs & Communications Manager).
- **Flexible (in-person/phone):** During Q4, the agency is also expected to participate in a weekly, one (1) hour partner’s (advertising agency, community outreach, media buying and marketing staff) touchpoint.

4. Weekly executive meeting to provide strategic counsel, “Other meetings as requested”

ANSWER: This mainly applies to unexpected situations (or crisis) where we will need assistance.

5. What is the monthly time requirement for board meetings?

ANSWER: Board meetings are scheduled 9am-12pm on a monthly basis, with some exceptions. (In some cases, we may need agency time to prepare CEO, COO for Board of Directors Meeting)

6. Are there any times of the year where you would want to increase your efforts? i.e. Open enrollment (OE)

ANSWER:

- For our individual business, there is definitely an increase in efforts, mainly from September-February. Our advertising campaign starts a month before OE and slows down 2 months later.
 - For small business, there is no open enrollment period per se; however, there are peaks about twice a year from an advertising perspective.
7. Do you anticipate any changes to the Affordable Care Act during open enrollment?

ANSWER:

There is always the possibility of changes to the Affordable Care Act (“ACA”) and the possibility that any such change(s) occur during or affect the Open Enrollment Period.

8. As part of this scope, are you looking for social media ideation, content creation, social execution and analytics, or are you looking for the vendor to use social media as a means to push out your news message?

ANSWER:

AHCT has a social media and web manager who handles the daily social media responsibilities. We are looking for the vendor to use social media as a *means to push out messages* that support our strategic goals.

9. What is the anticipated start and end date of this contract?

ANSWER:

- The anticipated term of the awarded contract will be three (3) years, beginning September 2018 and expiring August 2021. AHCT’s Board approved procurement policy that requires it to solicit proposals at least once every (3) three years for professional services required by AHCT.
- The Board-approved procurement policy is available at: [http://www.ct.gov/hix/lib/hix/policy_contracting_for_personal_services_\(short_for_m_alternative\)_00035474-4\).pdf](http://www.ct.gov/hix/lib/hix/policy_contracting_for_personal_services_(short_for_m_alternative)_00035474-4).pdf)

10. Is Access Health also running a paid media campaign to promote the open enrollment period? If so, please share the media tactics, flight information, and stations if available.

ANSWER: We work with a vendor that assists with the creation and execution of creative assets, and a vendor that handles our media buying/placement. The media tactics are not available at this time.

11. Can companies outside the USA apply for this? (like India or Canada)

ANSWER: AHCT encourages all interested companies that can fulfill all requirements set out in the RFP (including all required in-person meetings) to submit a Proposal for Brand/Reputation Management, Public Relations and Crisis Communication Support.

12. Whether we need to come over there for meetings?

ANSWER: Since this will be a new engagement, AHCT prefers in-person meetings as it builds better relationships and improves communication. In the future, there may be flexibility with the in-person meeting requirement. However, the selected vendor will still be required to attend the monthly board meetings in person.

13. Can we perform the tasks (related to RFP) outside USA? (like India or Canada)

ANSWER: AHCT encourages all interested companies that can fulfill all requirements set out in the RFP (including all required in-person meetings) to submit a Proposal for Brand/Reputation Management, Public Relations and Crisis Communication Support.

14. Can we submit the proposals via email?

ANSWER:

- We will not accept proposals via email.
- Proposals, excluding Cost Proposals, must be sent by the deadline to the following address: Connecticut Health Insurance Exchange d/b/a Access Health CT 280 Trumbull Street, 15th floor Hartford, CT 06103 Attention: Kathleen M. Tallarita, Government Affairs and Communications Manager.
- Cost Proposals must be sent by the deadline to the following address: Connecticut Health Insurance Exchange d/b/a Access Health CT 14 280 Trumbull Street, 15th floor Hartford, CT 06103 Attention: Finance Department. All Proposals and Cost Proposals must be received by 4:00 PM EST on August 7, 2018 to be considered.

15. We noticed the financial support has dropped by nearly 75% from a prior budget of \$23k/month to \$6k/month (plus Crisis Communication Support).

How has the budget impacted the scope of work included in the RFP?

ANSWER: Our organizational needs and areas of focus have evolved dramatically over the last 6 years. Our previous vendor assisted with AHCT's communication and PR strategy relating to the implementation of the ACA, introduction of a new brand/website, education on the law/enrollment/healthcare, and efforts to reduce the uninsured rate in Connecticut from 8% to the current 3.5%. The agreement with the previous vendor included a fixed retainer for all services (Brand/Reputation Management, Public Relations

and Crisis Communication), even though the organization mainly utilized the Brand/Reputation Management and Public Relations services; crisis situations did not occur with any regularity, if at all.

As a maturing organization, AHCT is moving into a new phase where we will focus on customer retention, improving our role as a trusted advisor, and the customer experience. Accordingly, AHCT will not require the same scope of services, time commitment, or staff allotment provided by the previous vendor.

16. Will the volume of work drop by 75%?

ANSWER: See Answer to Question #15. The volume of work will be dictated by the needs of the organization, so it is difficult to predict volume with any certainty. We do anticipate that volume will be less than previous years.

17. We would like to more clearly understand the proposed scope for this RFP. For example, could we expect the number of press and media advisories to drop from 48 to 12?

ANSWER: See Answer to Question #15. The requested support from the vendor will not be based on a fixed number of press releases/advisories since they are hard to predict, and support different efforts within the organization.