




April 22, 2013

The Honorable Judith T. Won Pat
Speaker
I Mina' Trentai Unu Na Liheslaturan Guåhan
32nd Guam Legislature
155 Hesler Place
Hagåtña, Guam 96910

VIA: The Honorable Rory J Respicio
Chairperson, Committee on Rules 

RE: Committee Report on Bill No. 81-32 (COR), As Substituted by the Committee on General Government Operations and Cultural Affairs.

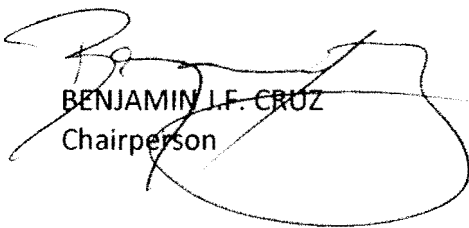
Dear Speaker Won Pat:


Transmitted herewith is the Report of Committee on General Government Operations and Cultural Affairs on Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014.

Committee votes are as follows:

- 7 TO DO PASS
- ___ TO NOT PASS
- 5 TO REPORT OUT ONLY
- ___ TO ABSTAIN
- ___ TO PLACE IN INACTIVE FILE

Sincerely,


BENJAMIN J.F. CRUZ
Chairperson

2013 APR 22 AM 10:23 



COMMITTEE REPORT

Bill No. 81-32 (COR)

**As Substituted by the Committee on General
Government Operations and Cultural Affairs**

**Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F.
Cruz - An act to provide health insurance to
government of Guam employees and retirees for
Fiscal Year 2014.**



April 22, 2013

MEMORANDUM

TO: All Members

**FROM: Vice Speaker Benjamin J.F. Cruz
Committee on General Government Operations and Cultural Affairs**

**SUBJECT: Committee Report on Bill No. 81-32 (COR) As Substituted by the Committee on
General Government Operations and Cultural Affairs.**

Transmitted herewith for your consideration is the Committee Report on Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014.

This report includes the following:

- Committee Vote Sheet
- Committee Report Digest
- Copy of Bill No. 81-32 (COR) As Introduced
- Copy of Bill No. 81-32 (COR), As Substituted
- Public Hearing Sign-in Sheet
- Copies of Submitted Testimony & Supporting Documents
- COR Referral of Bill No. 81-32 (COR)
- Fiscal Note Requirement
- Notices of Public Hearing
- Public Hearing Agenda
- Related News Reports

Please take the appropriate action on the attached voting sheet. Your attention to this matter is greatly appreciated. Should you have any questions or concerns, please do not hesitate to contact me.

Very truly yours,


BENJAMIN J.F. CRUZ
Chairperson



COMMITTEE VOTING SHEET

Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014.

COMMITTEE MEMBERS	SIGNATURE	TO DO PASS	TO NOT PASS	TO REPORT OUT ONLY	TO ABSTAIN	TO PLACE IN INACTIVE FILE
CRUZ, BENJAMIN J.F. Chairperson		✓ 4/22/13				
MUÑA BARNES, TINA ROSE Vice-Chairperson				✓		
WON PAT, JUDITH T. Speaker and Ex-Officio Member		✓ 4/22/13				
ADA, THOMAS C. Member		✓				
PANGELINAN, C. VICENTE Member		✓				
RESPICIO, RORY J. Member		✓ 4/22/13				
RODRIGUEZ, DENNIS G. JR. Member				✓		
SAN NICOLAS, MICHAEL, F.Q. Member		✓ 4/22/13				
AGUON, Jr., FRANK B. Member		✓ 4/22/13				
ADA, V. ANTHONY Member				✓ 4/22/13		
Morrison, Thomas Member						
McCreadie, Brant Member				✓ 4/22/13		
YAMASHITA, ALINE Member				✓ 4/22/13		



Committee Report Digest

I. OVERVIEW

The Committee on General Government Operations and Cultural Affairs convened a public hearing on Monday, April 15, 2013 at 10:00 a.m. in the Public Hearing Room of *I Liheslatura*. Among the items on the agenda was the consideration was Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014.

Public Notice Requirements

All legal requirements for public notices were met, with requests for publication sent to all media and all Senators on April 8, 2013, and April 10, 2013 via email. Copies of the hearing notices are appended to the report.

Senators Present

Vice Speaker Benjamin J.F. Cruz
Senator Rory J. Respicio
Senator Michael F.Q. San Nicolas
Senator Thomas Ada
Senator Michael Limtiaco
Senator Brant McCreadie
Senator Thomas Morrison
Senator Frank Aguon

The public hearing was called to order at 10:05 a.m.

II. SUMMARY OF TESTIMONY AND DISCUSSION

Vice Speaker Benjamin J.F Cruz announced Bill No. 81-32 (COR) then called individuals to testify.

Shane Nauta, Acting Personal Services Administrator at the Department of Administration, stated that DOA is in opposition to Bill No. 81-32 (COR), but that written testimony is not available and the Director will get it them within the week.

Phil Tydingco, Office of the Attorney General, stated that he is not at the public hearing to take a



position. Mr. Tydingco stated that Bill 81-32 (COR) is similar to Bill No. 513-31 (COR) introduced by Sen. Pangelinan in the 31st Guam Legislature. Mr. Tydingco stated that they been having ongoing meetings with Senator Pangelinan and legal issues have been addressed in Bill No. 81-32 (COR) versus the previous issues in Bill 513-31.

Mr. Tydingco stated that the AG's Office recommendations:

- Recommended that the Legislature consider adding an "expedited procurement protest procedure" concerning group health insurance for government employees and retirees because currently it takes six months to two years for a protest. Recommended adopt the same language as the AG has made for similar procurement type situations in P.L. 31-012;
- Should reference existing group health insurance law for government employees and retirees found in 4 GCA §§4301-4302.4. For example, provisions concerning participation by all branches of government, or a decision by a branch of government not to participate; and provisions requiring certain services or coverage;
- The term "proposals" or "proposal" should be changed to "bid" throughout the bill. Other phrases or terms should be consistent throughout;
- Bill 81-32 (COR) eliminates attorney/client privilege but this should be retained in event that there is a protest of the bill. AG's office will provide the language. Currently, the language is so broad that it would eliminate/hinder the opportunity to represent the entity in the event of a protest;
- There should be an allowance for additional services covered or mandates in the Affordable Care Act;
- Revisions that address procurement processes, the AG is reviewing and will provide language for recommendations. Retain the current health negotiating team, also allow for enhancements.

Senator Cruz read a sponsor statement provided by Senator Pangelinan into the record. Senator Cruz stated that "Bill 81-32 (COR) seeks to simplify the way the government of Guam procures health insurance, reduce opportunities for protests; offer more choices to government of Guam employees



and retirees; increase competition and help reduce the out of pocket expense to government employees, retirees and their families. The bill also contains provisions that allow employees and retirees to receive money to use in a Health Savings Account and Health Reimbursement Account to help alleviate paying the large deductibles requires with the current plans. Bill 81-32 (COR) contributes \$750 for single and \$1500 for 2-party and Family Plan to help offset the burden of paying such a high deductible. It provides the money to the employee and retiree up front. It is pro employee, pro retiree and pro-family.”

Frank Campillo, Calvo’s SelectCare, provided oral comments on written testimony as requested by Senator Brant McCreadie in opposition to Bill No. 81-32 (COR).

Senator McCreadie asked Mr. Campillo to expand on the assertion from the Calvo’s SelectCare written testimony that states “Let us not forget that a number of carriers abandoned the GovGuam program.”

Mr. Campillo, Calvo’s SelectCare, stated that most insurance companies have abandoned the GovGuam health insurance market because of the volatility of the market. Mr. Campillo stated that Bill 81-32 (COR) will create volatility in the market; it is currently very stable and provides reasonable rates and that one can no longer overcharge in today’s marketplace.

Senator McCreadie made a point that now companies are interested in getting back into the market and asked if it is more of a positive market for insurance companies now versus ten years ago?

Mr. Campillo, Calvo’s SelectCare, stated that fifteen bills have been introduced and have not improved the process for the GovGuam RFP since 2009. Mr. Campillo questioned the “wisdom” of these proposals.

Senator McCreadie stated that according to the written testimony from Calvo’s SelectCare “The Guam Legislature made the people of Guam spend money on a study concerning Health Insurance benefits for GovGuam, which was conducted by Lewis and Ellis.”

Mr. Campillo, Calvo’s SelectCare, stated that GovGuam may have allocated about \$500,000 to conduct a study on the feasibility of multiple insurance carriers serving the GovGuam market and that the government of Guam may be better served by one insurance carrier. Mr. Campillo claimed that there is a significant amount of review for the GovGuam Request for Proposal. Mr. Campillo stated that carriers will submit a bid that will be below \$68 million. However, when you put all companies



together, he does not see how the budget will be limited to \$68 million dollars.

Senator San Nicolas stated that more competition provides more choices to consumers. Senator San Nicolas questioned the “volatility and higher risk” when more than one insurance company offers their services to employer groups.

Mr. Campillo, Calvo’s SelectCare, stated that he tries not to be a part of multiple offerings with other employer groups, but he stated that Calvo’s SelectCare is currently participating in servicing other employer groups with multiple offerors.

Senator San Nicolas prefers offering choice to consumers with choices that fit best with their unique circumstances. Senator San Nicolas requested that Calvo’s SelectCare address that further.

Mr. Campillo, Calvo’s SelectCare, stated they do not oppose competition, but that adverse selection affected GovGuam in the past. Mr. Campillo stated “Be careful what you ask for today, you currently have a program that is consistent, internal satisfaction survey shows that there is high satisfaction with GovGuam members.”

Senator Aguon questioned why SelectCare does not encourage competition even though they claim that most of the GovGuam members are satisfied with the services they are providing. Senator Aguon stated that the lack of competition goes against the grain of giving GovGuam employees options.

Mr. Campillo, Calvo’s SelectCare, restated that they are not opposed to competition then referenced the dental insurance company (Guardian Life) that walked away from GovGuam. Mr. Campillo stated that many carriers under price themselves out of the market.

Senator Thomas Ada asked why competition in the federal government is effective, but why it would not work for the government of Guam.

Mr. Campillo, Calvo’s SelectCare, said the federal government seems to work with the carriers a little better and that the average single premium payment is \$450 so the fed’s work with carriers and tell them that the rates are “too low,” which takes the volatility away.



Senator Mike Limtiaco asked if volatility is removed due to a larger subscriber pool.

Mr. Campillo, Calvo's SelectCare, said there is a significantly larger subscriber pool with OPM.

Senator Mike Limtiaco asked if there are loopholes that insurance companies may use to not rebate money.

Mr. Campillo, Calvo's SelectCare, said that this does occur on Guam and that it is well documented.

Senator Limtiaco asked if it is possible to pad a bid

Mr. Campillo, Calvo's SelectCare, stated that he could not specifically discuss whether an insurance company would pad a bid, but he said they would have better leverage.

Senator Respicio said we've seen in one year that the cost of health insurance when up in \$23 million and then the following year it decreased by about \$8 million due to the medical loss ratio, but a question remains about whether \$9 million should have been rebated to the government of Guam. Senator Respicio asked how an expedited procurement process would work.

Phil Tydingco, Office of the Attorney General, stated that protests would have shorter timelines and would make the decision final at the OPA level. AG Tydingco stated that the legal issues of the previous bill have been address in Bill 81. Reasserted expedited procurement process to negate protest problems lasting up to two years that hamper the availability of health insurance for governmental employees.

Senator Cruz stated that the standard operating procedure should be issued prior to the IFB. Senator Cruz stated that the SOP drafted was grossly inefficient and that they need to be rewritten. Asked how many are in the Federal government pool on Guam.

Mr. Campillo, Calvo's SelectCare, stated 8,500 federal employees and that number is about the same as government of Guam employees.

Senator Cruz asked if that number is larger or smaller than GovGuam.

Mr. Campillo, Calvo's SelectCare, stated that it is about the same number.



Senator Cruz stated that essentially we are dealing with similar pools on Guam.

Mr. Campillo, Calvo's SelectCare, stated that what he was trying to illustrate in the written testimony is that the federal government provides actual rates that are more reflective of the risks.

Senator Cruz made the point that TakeCare retained a "significant number" of its members in the last OPM enrollment because of the "positive feelings" that the members had with their carriers. Senator Cruz asked when competition is good and when it is bad.

Mr. Campillo, Calvo's SelectCare, stated it is bad when the government of Guam employees are left holding the bag without any coverage and that is bad when the process is not as orderly as the federal government. Mr. Campillo said individually each company will get below \$68 million, but they will not meet that number together.

Senator Cruz thanked members of the panel for their comments then asserted that the record will be open for ten days so that residents may submit their testimonies.

III. FINDINGS AND RECOMMENDATION

The Committee on General Government Operations and Cultural Affairs to which was referred "Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014." hereby submits these findings to *I Mina' Trentai Unu na Liheslaturan Guåhan* and reports out Bill No. 81-32 (COR) with a recommendation TO **PASS.**

I MINA'TRENTAI DOS NA LIHESLATURAN GUÅHAN
2013 (FIRST) REGULAR SESSION

Bill No. 81-32 (COR)

Introduced by:

V.C. Pangelinan
B.J.F. Cruz

2013 APR - 5 PM 12:44

AN ACT TO PROVIDE HEALTH INSURANCE TO
GOVERNMENT OF GUAM EMPLOYEES AND
RETIREES FOR FISCAL YEAR 2014

BE IT ENACTED BY THE PEOPLE OF GUAM:

1 **Section 1. Legislative Findings and Intent.** *I Liheslaturan Guåhan*
2 finds that the FY2013 Government of Guam Health Insurance Program
3 (“GHIP”) procurement is being perpetually continued with the existing
4 insurance company at FY2012 rates due to protests and the subsequent
5 cancellation of Procurement No. DOA/HRD-RFP-GHI-13-001. A reissuance
6 of another Request for Proposal (“RFP”) under identical rules, or in the
7 absence of more particular rules, requires a longer protracted process that
8 will prolong the non-competitive perpetual continuation with the existing
9 insurance company at FY2012 rates.

10 *I Liheslaturan Guåhan* finds that the initial protest filed in the
11 FY2013 GHIP procurement by TakeCare Insurance occurred on August 8,
12 2012. On August 10, the Director of Administration solicited an extension of
13 the current GHIP contract at the current premiums with Calvo’s Selectcare
14 for up to twelve (12) months citing the guaranteed renewability provisions in
15 the Health Insurance Portability and Accountability Act (“HIPAA”) for
16 employers. Calvo’s Selectcare responded affirmatively to the request on
17 August 16, 2012 and coverage has been extended to cover October 2012 at

1 the current rates. Over One (1) month after its initial filing, the TakeCare
2 Insurance (“TakeCare”) protest was accepted by the Government of Guam
3 Negotiations Team (“GGNT”) which required the cancellation and re-
4 solicitation of the FY2013 GHIP contract.

5 The basis for the decision of the Negotiating Team to cancel this
6 solicitation was 1) the failure of the government to follow the General
7 Procedures set out in the Request For Proposals DOA/HRD-RFP-GHI-13-
8 001, beginning at page 17, Section III; more specifically, the failure of the
9 government to determine both the responsiveness of proposals and the
10 qualification of proposals during Phase I of the Proposal Evaluation and
11 Negotiation Procedure, as required by the Request for Proposals; and 2) the
12 release of a draft copy of the Evaluation Memorandum to only two offerors,
13 to the detriment of other offerors.

14 *I Liheslaturan Guåhan* further finds that on September 19, 2012,
15 Calvo’s SelectCare filed an appeal in protest of the cancellation of
16 DOA/HRD-RFP-GHI-13-001, stating that the GGNT did not provide
17 sufficient evidence to support its decision to cancel the RFP that was in the
18 best interest of the Territory. Hearings for the appeal were delayed in
19 November, January and now are cancelled due to the passing of six (6)
20 months of Fiscal Year 2013. The cancellation effectively has forced the
21 Government of Guam and its employees to overpay insurance premiums for
22 the third consecutive year. *I Liheslaturan Guåhan* finds that invoking the
23 HIPAA guaranteed renewability provision was costly and inefficient and is
24 not the preferred method of securing insurance for the employees and
25 retirees of the GHIP.

26 *I Liheslaturan Guåhan* finds that the FY2013 GHIP Procurement No.
27 DOA/HRD-RFP-GHI-13-001 resulted in very competitive proposals from

1 Island Home Insurance (“Staywell”), SelectCare, TakeCare and Aetna
2 International Insurance, represented by Netcare Life and Health Insurance
3 (“Netcare”).

4 All proposals would have more than likely resulted in the government
5 and its employees and retirees realizing a significant reduction in premiums
6 compared to the FY 2013 rates and would have allowed Government of
7 Guam employees and retirees the right to choose from more than one (1)
8 insurance option.

9 *I Liheslaturan Guåhan* finds that the most recent medical and dental
10 claims submitted by Calvo’s Selectcare to *I Liheslaturan Guåhan* on
11 February 14, 2013 contain all paid claims between October 1, 2011 and
12 February 14, 2012 or sixteen (16) months of actual data for the FY2012
13 contract. The Office of Finance and Budget (“OFB”) performed an analysis
14 of the submitted data using insurance industry standard underwriting tools
15 and concluded that the GHIP is projected to overpay premiums by
16 approximately Five Million Dollars (\$5,000,000.00) above the cost of
17 services provided for the second year in a row according to Participating
18 Experience Contract standards.

19 *I Liheslaturan Guåhan* finds that the actual loss ratio for FY2011
20 equaled sixty percent (60%) and the projected loss ratio for FY2012 is
21 seventy percent (77%). Both loss ratios are well below the eighty-five
22 percent (85%) threshold required in the Section 2718 provision of the
23 PPACA.

24 *I Liheslaturan Guåhan* finds that the Government of Guam is not in a
25 position where it can afford to continue to overpay annual medical and
26 dental premiums in excess of Five Million Dollars (\$5,000,000.00) a year.
27 This takes income out of government employees and retirees pockets every

1 pay period creating hardship for families as well as presenting unnecessary
2 financial burden on the government.

3 *I Liheslaturan Guåhan* finds that the optimal approach for the GHIP
4 to purchase coverage for its eligible employees and retirees is to use health
5 insurance underwriting rating tools and the historical claims data to develop
6 the required projected premiums for the GHIP at an eighty five percent
7 (85%) loss ratio.

8 *I Liheslaturan Guåhan* finds that upon the direction of *I Liheslaturan*
9 *Guåhan*, the OFB utilized health insurance industry standard methodologies
10 and tools with the most recent twelve months of claims data and trended the
11 data for twenty four (24) months which resulted in total required premiums
12 of Sixty Eight Million Three Hundred Sixty One Thousand Seventy Four
13 Dollars (\$68,361,074.00) for the existing medical and dental plans for
14 FY2014.

15 *I Liheslaturan Guåhan* finds that the projected required premium for
16 FY2014 results in a savings of approximately Five Million Eighty Six
17 Thousand One Hundred Thirty Nine Dollars (\$5,086,139.00) when
18 compared to the current FY2013 contract.

19 *I Liheslaturan Guåhan* further finds that Government of Guam
20 employees and retirees desire competition in the GHIP in order to provide a
21 choice of health insurance and lower premiums resulting from said
22 competition. On August 22, 2012 a roundtable discussion was held to
23 discuss the procurement of medical and dental insurance with members of *I*
24 *Liheslaturan Guåhan*, Staywell, TakeCare, Netcare and Calvo's Selectcare.
25 The discussion focused in depth on the procurement process used for the
26 Federal Employees Health Benefits Plans ("FEHB"). Both TakeCare and
27 Calvo's Selectcare discussed the ease of the FEHB process with respect to

1 submitting annual pricing proposals for covering federal employees and
2 annuitants.

3 *I Liheslaturan Guåhan* finds that the FEHB procurement resembles a
4 sealed invitation for bid process where pricing proposals are submitted by
5 each eligible offeror and accepted unconditionally if no objectionable
6 pricing assumptions or obvious data errors are detected by the Office of
7 Personnel Management contract specialists and its actuaries. The basis of
8 choice available to federal employees is determined by the price and
9 perceived quality of the product and service offered by each vendor. This
10 type of arrangement promotes maximum competition resulting in the best
11 price and products for the FEHB.

12 Dr. Robert E. Moffit, a senior fellow in domestic and economic policy
13 studies at the Heritage Foundation who specializes in health care cites the
14 FEHB program as “historically achieving superior performance in cost
15 control” by incorporating “fundamental market principles of real consumer
16 choice, genuine competition, and light and reasonable regulation,” the result
17 of which is “to deliver high quality health care and high levels of consumer
18 satisfaction.”

19 *I Liheslaturan Guåhan* finds that the resulting financial burden placed
20 upon the Government of Guam and its employees and retirees caused by the
21 no bid extension of the FY2012 GHIP benefits and rates is unacceptable and
22 requires *I Liheslaturan Guåhan* to intercede by introducing a solution that 1)
23 lowers the current cost of the GHIP contract; 2) provides multiple choices of
24 insurance providers and 3) does not present opportunities to continue to
25 delay the GHIP procurement through protests.

1 *I Liheslaturan Guåhan* further finds that an invitation for bid that
2 requires all bidders to submit its best and final offer at a sealed bid opening
3 is the most prudent and best method to award GHIP contracts for FY2014.

4 *I Liheslaturan Guåhan* finds that the FEHB uses a similar process to
5 the solution presented and *I Liheslaturan Guåhan* is committed to
6 implementing fundamental market principles of real consumer choice,
7 genuine competition, and light and reasonable regulation as means to an
8 expedient and market driven procurement of medical and dental insurance in
9 FY2014.

10 Three of the four offerors to the FY 2013 GHIP RFP, SelectCare,
11 TakeCare and Aetna International Insurance are all qualified and currently
12 provide insurance to the FEHB program. The fourth offeror is a company
13 approved by the Office of the Insurance and Banking Commission of the
14 Department of Revenue and Taxation as a company in good standing with
15 the necessary financial resources to provide insurance coverage to private
16 companies on Guam.

17 *I Liheslaturan Guåhan* finds that the FEHB program implements the
18 highest standard of scrutiny on health insurance providers to ensure that its
19 employee and annuitants are protected. *I Liheslaturan Guåhan* finds that
20 any company currently providing insurance to the FEHB program is well
21 vetted by the professionals within the federal government's Office of
22 Personnel Management and is qualified to provide insurance to the
23 government of Guam and its employees and retirees.

24 **Section 2. Invitation for Bid for the Government of Guam's**
25 **Group Health Insurance Program for Fiscal Year 2014.** Notwithstanding
26 any other provision of law, the procurement of medical and dental insurance
27 for government of Guam employees and retirees for Fiscal Year 2014

1 (“FY2014”) shall conform to the competitive sealed bidding procedures set
2 forth in this Act.

3 (A) The Chief Procurement Officer of the Government of
4 Guam (“CPO”), as defined by 5 G.C.A. §§ 5030(c) and 5110, shall
5 serve as Chairperson of the Government of Guam Health Insurance
6 Negotiating Team (“GGNT”). The CPO, on behalf of the GGNT,
7 shall issue an invitation for bid (“IFB”) for medical and dental
8 insurance for Government of Guam employees and retirees no later
9 than May 23, 2013 for FY2014. The GGNT membership of the CPO
10 shall be non-voting and the Director of the Department of
11 Administration shall remain a voting member.

12 (B) Any previous procurement solicitations for the GHIP
13 FY2014 medical and dental insurance, prior to enactment of this Act
14 are hereby cancelled as of the enactment of this Act and shall not be
15 reissued except by IFB pursuant to the provisions of this Act.

16 (C) All actions related to the IFB shall occur in meetings
17 announced by the CPO and must comply with the Open Government
18 Law of Guam. For purposes of this Act, all meetings of the GGNT
19 shall be deemed special meetings of a public agency for which notice
20 shall be provided pursuant to 5 G.C.A. § 8107(b); and which shall be
21 open meetings pursuant to 5 G.C.A. § 8103. A recording shall be
22 made of all meetings of the GGNT which shall be further documented
23 by public minutes compiled by the Department of Administration.
24 The electronic recording and public minutes shall comply with the
25 provisions outlined in 5 G.C.A. § 8113.1. No actions related to the
26 IFB shall be considered privileged, including legal advice provided to
27 the GGNT or CPO. Nothing in this Act shall prevent the Office of the

1 Attorney General from representing the government of Guam in any
2 court or Office of Public Accountability proceedings related to the FY
3 2014 GHIP procurement. The IFB for FY2014 shall:

4 (1) solicit medical and dental insurance for the period
5 starting October 1, 2013 and ending September 30, 2014;

6 (2) be announced in publications of general circulation
7 in Guam and in top publications nationally and in leading
8 publications internationally; and

9 (3) require all responses to the IFB by prospective
10 bidders be submitted at a predetermined meeting date and time,
11 no more than twenty-three (23) calendar days, after the initial
12 publication of the solicitation of the IFB. If the twenty-third day
13 falls on a Saturday, Sunday, or legal holiday the meeting shall
14 be held on the next business day. At the same meeting, the bids
15 will be unsealed by the CPO in the presence of a quorum of the
16 GGNT and the names of all bidders and the amounts of their
17 bids shall be entered in the minutes. The GGNT shall
18 unconditionally accept all bids and award a contract to all
19 bidders that meet the requirements in Section 5 of this Act.

20 (4) A quorum for purposes of this act shall be seven
21 (7) total members who may be voting or non-voting.

22 **Section 3. Invitation for Bid Requirements.** Notwithstanding any
23 other provision of Guam procurement law, the procurement of medical and
24 dental insurance for Government of Guam employees and retirees for
25 FY2014 shall conform to the requirements set forth in this Section.

26 (A) The Medical and Dental plans offered by all bidders shall
27 provide the same benefits and levels of coverage consistent with the

1 Schedules of Benefits previously defined in Exhibit R of Procurement
2 No. DOA/HR-RFP-GHI-13-001 inclusive of the Wellness Benefit that
3 meets the requirements outlined in Exhibit 2 of this Act. Bidders may
4 opt to cover items that are listed as exclusions in Exhibit R of
5 Procurement No. DOA/HRD-RFP-GHI-13-001. A formal request to
6 cover any excluded items shall be included as part of the sealed bid
7 and are subject to the approval of the GGNT.

8 (B) The medical and dental plans shall use the following
9 subscriber tiers and weighting of premiums:

- | | | |
|----|-------------------------------------|-----|
| 10 | (1) Employee/Retiree Only | 1.0 |
| 11 | (2) Employee/Retiree and Spouse | 2.2 |
| 12 | (3) Employee/Retiree and Child(ren) | 1.8 |
| 13 | (4) Employee/Retiree and Family | 3.0 |

14 (C) The monthly government contribution for the medical
15 and dental plans shall be applied uniformly to all bidders awarded a
16 contract and shall equal the following amount by tier by plan by
17 subscriber. If any plan's monthly government contribution in any tier
18 exceeds the total monthly premium for said tier then the monthly
19 government contribution shall decrease for said tier such that the
20 government contribution for said tier equals the total monthly
21 premium.

- | | | | |
|----|---------------------------|------------------|----------|
| 22 | (1) Employee/Retiree Only | | |
| 23 | i. HSA2000 | Active | \$131.83 |
| 24 | ii. 1500 Deductible | Active | \$200.79 |
| 25 | iii. HSA/HRA2000 | Retiree | \$343.34 |
| 26 | iv. 1500 Deductible | Retiree | \$623.78 |
| 27 | v. Dental | Active & Retiree | \$17.73 |

1	(2)	Employee/Retiree and Spouse		
2		i. HSA2000	Active	\$210.94
3		ii. 1500 Deductible	Active	\$390.85
4		iii. HSA/HRA2000	Retiree	\$676.25
5		iv. 1500 Deductible	Retiree	\$1321.45
6		v. Dental	Active & Retiree	\$21.12
7	(3)	Employee/Retiree and Child(ren)		
8		i. HSA2000	Active	\$172.58
9		ii. 1500 Deductible	Active	\$319.80
10		iii. HSA/HRA2000	Retiree	\$553.29
11		iv. 1500 Deductible	Retiree	\$1,081.20
12		v. Dental	Active & Retiree	\$17.29
13	(4)	Employee/Retiree and Family		
14		i. HSA2000	Active	\$287.64
15		ii. 1500 Deductible	Active	\$532.99
16		iii. HSA/HRA2000	Retiree	\$922.12
17		iv. 1500 Deductible	Retiree	\$1801.99
18		v. Dental	Active & Retiree	\$28.80

19 (D) The total monthly premium rates for retirees for all plans
20 shall equal exactly 2.5x the premium rates of Active employees.

21 (E) The total monthly premiums of the 1500 Deductible plan
22 shall equal exactly 2x the premium rates of the HSA2000 and
23 HRA2000 plan.

24 (F) The Government shall contribute Seven Hundred Fifty
25 Dollars (\$750.00) to single subscribers [tier] and One Thousand Five
26 Hundred Dollars (\$1,500.00) for all other subscribers [tiers] who elect
27 the HSA2000 plan provided the subscriber has a Health Savings

1 Account pursuant to 26 U.S.C. Section 223(d), as amended. The
2 government shall distribute the contribution amount to eligible Health
3 Savings Accounts in two equal installments with a pay date Thirty
4 (30) days after the start of the plan year and a pay date One Hundred
5 Eighty (180) days after the start of the plan year.

6 (G) The government shall contribute Seven Hundred Fifty
7 Dollars (\$750.00) to single subscribers [tier] and One Thousand Five
8 Hundred Dollars (\$1,500.00) for all other subscribers [tiers] who elect
9 the HRA2000 plan provided that the subscriber has a Health
10 Reimbursement Arrangement Plan pursuant to Sections 105 and 106
11 of the Internal Revenue Service Code and as defined in IRS Notice
12 2002-45. The government shall distribute the contribution amount to
13 eligible HRA accounts in two equal installments with a pay date
14 Thirty (30) days after the start of the plan year and a pay date One
15 Hundred Eighty (180) days after the start of the plan year.

16 (H) The calculation of medical and dental premiums in
17 Section 5(D) of this Act shall use the January 2013 enrollment data
18 submitted as an official message to *I Liheslaturan Guåhan* registered
19 as document 32GL-13-123. The SC2000 plan shall be the equivalent
20 of the HSA2000/HRA2000 and the SC1500 plan shall be the
21 equivalent of the 1500 Deductible for the purposes of calculating
22 premiums in the IFB.

23 (I) The Group Health Insurance Agreements (Contracts) for
24 the HSA2000/HRA2000, 1500 Deductible and Dental plans shall be
25 exactly the same as the FY2012 Contracts with revisions deemed, by
26 the GGNT, in the best interest of the government, its employees and
27 retirees for all successful bidders with the exception of a separate

1 Article for each offeror's medical and dental premium rates submitted
2 as part of bid process outlined in Section 2(C)(3) of this Act. A
3 written report of the revisions deemed in the best interest of the
4 government by the GGNT shall include the justification for such
5 changes and shall be submitted by the GGNT to the Speaker of *I*
6 *Liheslaturan Guåhan* no later than when the Contracts are finalized.
7 The Contracts shall be finalized by the AGO *no later than* May 15,
8 2013 and included in the IFB. The contract shall include a one page
9 addendum for bidders that agree to submit to a Participating
10 Experience Contract that requires eighty six percent (86%) of
11 premiums to be spent on medical and dental claims pursuant to
12 Section 5(F).

13 (J) The IFB package shall, at the minimum, contain the
14 following information:

15 (1) Copy of a uniform contract to be executed by all
16 prospective offerors who participate in the provision of medical
17 and dental insurance to the government;

18 (2) Electronic Microsoft Excel files containing the
19 GHIP Claims data for the period October 1, 2010 to March 31,
20 2013 provided to the Department of Administration and Office
21 of Finance and Budget pursuant to 4GCA, Chapter 4, §4302(g);

22 (3) Schedule of Benefits of the dental and medical
23 plans previously identified as Exhibit R of Procurement No.
24 DOA/HRD-RFP-GHI-13-001 inclusive of the wellness benefit
25 that meets the requirements outlined in Exhibit 2; and

26 (4) The Microsoft Excel template "Exhibit 1 –
27 Required Premium Calculation" for the calculation of the

1 premium by prospective offerors. Exhibit 1 of this Act shall be
2 the template included in the IFB.

3 (5) No bid bond shall be required.

4 (K) The financial solvency of all bidders shall be subject to
5 the review of the Office of Banking and Insurance Commissioner
6 (Commissioner), with the exception of those companies who have
7 already been deemed financially sound by the Commissioner in July
8 2012, as part of Procurement No. DOA/HRD-RFP-GHI-13-001.

9 (L) Offerors awarded a contract *shall* file the health
10 insurance policy with the Commissioner at least fifteen (15) days prior
11 to the policy's effective date and pay the applicable fees.

12 **Section 4. Authorization to Establish Health Reimbursement**
13 **Arrangement Plan for Eligible Retirees and Dependents.** It is the intent
14 of *I Liheslaturan Guåhan* for the government of Guam to provide Health
15 Reimbursement Arrangement (HRA) Plans to eligible retirees and
16 dependents who do not qualify for a Health Savings Account (HSA). The
17 government of Guam *shall* offer a plan (HRA2000) with the same benefits
18 as the HSA2000 and a Health Reimbursement Arrangement (HRA) for the
19 benefit of its retirees and dependents who are not eligible for a Health
20 Savings Account. Eligibility criteria is as follows:

21 (A) Retirees who are enrolled in Medicare, or

22 (B) Retirees who are covered by another non-High
23 Deductible High Premium (HDHP) health plan, or

24 (C) Retirees who are otherwise not eligible for a Health
25 Savings Account (HSA).

26 **Section 5. Invitation for Bid Responsiveness.** Notwithstanding any
27 other provision of Guam procurement law, for the purposes of procuring

1 health insurance for government of Guam employees and retirees in FY
2 2014, a responsive bidder shall mean a bidder conforming to the
3 requirements set forth in this section:

4 (A) All bidders shall provide a copy of a current Certificate
5 of Authority issued by the Commissioner at the time of bid
6 submission.

7 (B) In the event any risks for health is reinsured or
8 transferred by the bidder to a reinsurance company, the reinsurer that
9 assumes the risk shall also provide a copy of a current Certificate of
10 Authority to transact reinsurance business on Guam.

11 (C) All bidders, to include agents, reinsurers and
12 underwriters, must submit a copy of a current Guam business license.

13 (D) The total annual medical and dental premium calculation
14 of the bid shall not exceed Sixty Eight Million Three Hundred Sixty
15 One Thousand Seventy Four Dollars (\$68,361,074.00) for all carriers
16 for twelve months. The premium calculation shall be derived by
17 multiplying the total number of subscribers by twelve by the
18 equivalent submitted plan rates. Exhibit 1 of this Act shall be used to
19 calculate the premiums and identify whether the rates conform to the
20 requirements in Section 3(B), (D) and (E). In the event all the bids
21 exceed the amount specified in this subsection, then the solicitation
22 shall be cancelled.

23 (E) All bidders shall submit signed Contracts for the
24 HSA2000/HRA2000, 1500 Deductible and Dental plans as part of its
25 submitted sealed bid package.

26 (F) Bidder shall declare whether it agrees to a Participating
27 Experience Contract that requires eighty six percent (86%) of

1 premiums to be spent on medical and dental claims. Bidders not
2 agreeing to a Participating Experience Contract shall by default be
3 required to reconcile premiums and claims pursuant to PPACA
4 Section 2718 MLR standards.

5 **Section 6. Inquiries of Prospective Offerors.** All prospective
6 offerors shall submit in writing all inquiries relating to the interpretation and
7 technical details of the IFB at a pre-bid conference meeting no more than
8 eleven (11) calendar days after the IFB issuance. If the eleventh day falls on
9 a Saturday, Sunday, or legal holiday the meeting shall be held on the next
10 business day.

11 At the same meeting, the inquiries will be received by the CPO in the
12 presence of a quorum of the GGNT. To the maximum extent practicable, all
13 inquiries will be answered by the CPO and members of the GGNT at the
14 meeting. In the event the CPO is unable to provide an answer to an inquiry
15 at the meeting, the GGNT shall respond within seven (7) calendar days of
16 the meeting. Copies of all inquiries and responses shall be delivered to all
17 prospective offerors. All written determinations allowable under Guam
18 procurement law shall be made by the GGNT.

19 **Section 7. Binding Offer.** After bid opening, a bidder may not change
20 the price or any other provision of the bid in a manner prejudicial to the
21 interests of the governmental body or fair competition. An award on the bid
22 is a binding contract with terms and conditions that do not vary from the
23 terms and conditions of the invitation and addenda.

24 **Section 8. Non-Exclusive Awards.** Notwithstanding any other
25 provision of law, the award(s) resulting from the solicitation provided for in
26 this Act shall be non-exclusive award(s) for health insurance coverage for
27 qualified active employees and qualified retirees of the Government of

1 Guam, who shall have a choice of one of the insurers receiving an award for
2 FY 2014 for health insurance.

3 **Section 9. Duties of GGNT.** Notwithstanding any other provision of
4 law, for the FY 2014 GHIP procurement, the GGNT shall not develop a
5 ranking system to rank the proposals or rank said proposals.

6 **Section 10. Severability.** If any provisions of this Act or the
7 application thereof to any person or circumstance is held invalid, such
8 invalidity *shall* not affect any other provision or application of this Act
9 which can be given effect without the invalid provision or application, and to
10 this end the provisions of this Act are severable.

I MINA'TRENTAI DOS NA LIHESLATURAN GUÅHAN
2013 (FIRST) REGULAR SESSION

Bill No. 81-32 (COR)

As Substituted by the Committee on General
Government Operations and Cultural Affairs.

Introduced by:

V.C. Pangelinan
B.J.F Cruz

**AN ACT TO PROVIDE HEALTH INSURANCE TO
GOVERNMENT OF GUAM EMPLOYEES AND
RETIREES FOR FISCAL YEAR 2014**

BE IT ENACTED BY THE PEOPLE OF GUAM:

1 **Section 1. Legislative Findings and Intent.** *I Liheslaturan Guåhan*
2 finds that the FY2013 Government of Guam Health Insurance Program
3 (“GHIP”) procurement is being perpetually continued with the existing
4 insurance company at FY2012 rates due to protests and the subsequent
5 cancellation of Procurement No. DOA/HRD-RFP-GHI-13-001. A reissuance
6 of another Request for Proposal (“RFP”) under identical rules, or in the
7 absence of more particular rules, requires a longer protracted process that
8 will prolong the non-competitive perpetual continuation with the existing
9 insurance company at FY2012 rates.

10 *I Liheslaturan Guåhan* finds that the initial protest filed in the
11 FY2013 GHIP procurement by TakeCare Insurance occurred on August 8,
12 2012. On August 10, the Director of Administration solicited an extension of
13 the current GHIP contract at the current premiums with Calvo’s SelectCare
14 for up to twelve (12) months citing the guaranteed renewability provisions in
15 the Health Insurance Portability and Accountability Act (“HIPAA”) for
16 employers. Calvo’s SelectCare responded affirmatively to the request on

1 August 16, 2012 and coverage has been extended to cover October 2012 at
2 the current rates. Over One (1) month after its initial filing, the TakeCare
3 Insurance (“TakeCare”) protest was accepted by the Government of Guam
4 Negotiations Team (“GGNT”) which required the cancellation and re-
5 solicitation of the FY2013 GHIP contract.

6 The basis for the decision of the Negotiating Team to cancel this
7 solicitation was 1) the failure of the government to follow the General
8 Procedures set out in the Request For Proposals DOA/HRD-RFP-GHI-13-
9 001, beginning at page 17, Section III; more specifically, the failure of the
10 government to determine both the responsiveness of proposals and the
11 qualification of proposals during Phase I of the Proposal Evaluation and
12 Negotiation Procedure, as required by the Request for Proposals; and 2) the
13 release of a draft copy of the Evaluation Memorandum to only two offerors,
14 to the detriment of other offerors.

15 *I Liheslaturan Guåhan* further finds that on September 19, 2012,
16 Calvo’s SelectCare filed an appeal in protest of the cancellation of
17 DOA/HRD-RFP-GHI-13-001, stating that the GGNT did not provide
18 sufficient evidence to support its decision to cancel the RFP that was in the
19 best interest of the Territory. Hearings for the appeal were delayed in
20 November, January and now are cancelled due to the passing of six (6)
21 months of Fiscal Year 2013. The cancellation effectively has forced the
22 Government of Guam and its employees to overpay insurance premiums for
23 the third consecutive year. *I Liheslaturan Guåhan* finds that invoking the
24 HIPAA guaranteed renewability provision was costly and inefficient and is
25 not the preferred method of securing insurance for the employees and
26 retirees of the GHIP.

1 *I Liheslaturan Guåhan* finds that the FY2013 GHIP Procurement No.
2 DOA/HRD-RFP-GHI-13-001 resulted in very competitive proposals from
3 Island Home Insurance (“Staywell”), SelectCare, TakeCare and Aetna
4 International Insurance, represented by Netcare Life and Health Insurance
5 (“Netcare”).

6 All proposals would have more than likely resulted in the government
7 and its employees and retirees realizing a significant reduction in premiums
8 compared to the FY 2013 rates and would have allowed Government of
9 Guam employees and retirees the right to choose from more than one (1)
10 insurance option.

11 *I Liheslaturan Guåhan* finds that the most recent medical and dental
12 claims submitted by Calvo’s SelectCare to *I Liheslaturan Guåhan* on
13 February 14, 2013 contain all paid claims between October 1, 2011 and
14 February 14, 2012 or sixteen (16) months of actual data for the FY2012
15 contract. The Office of Finance and Budget (“OFB”) performed an analysis
16 of the submitted data using insurance industry standard underwriting tools
17 and concluded that the GHIP is projected to overpay premiums by
18 approximately Five Million Dollars (\$5,000,000.00) above the cost of
19 services provided for the second year in a row according to Participating
20 Experience Contract standards.

21 *I Liheslaturan Guåhan* finds that the actual loss ratio for FY2011
22 equaled sixty percent (60%) and the projected loss ratio for FY2012 is
23 seventy percent (77%). Both loss ratios are well below the eighty-five
24 percent (85%) threshold required in the Section 2718 provision of the
25 PPACA.

26 *I Liheslaturan Guåhan* finds that the Government of Guam is not in a
27 position where it can afford to continue to overpay annual medical and

1 dental premiums in excess of Five Million Dollars (\$5,000,000.00) a year.
2 This takes income out of government employees and retirees pockets every
3 pay period creating hardship for families as well as presenting unnecessary
4 financial burden on the government.

5 *I Liheslaturan Guåhan* finds that the optimal approach for the GHIP
6 to purchase coverage for its eligible employees and retirees is to use health
7 insurance underwriting rating tools and the historical claims data to develop
8 the required projected premiums for the GHIP at an eighty five percent
9 (85%) loss ratio.

10 *I Liheslaturan Guåhan* finds that upon the direction of *I Liheslaturan*
11 *Guåhan*, the OFB utilized health insurance industry standard methodologies
12 and tools with the most recent twelve months of claims data and trended the
13 data for twenty four (24) months which resulted in total required premiums
14 of Sixty Eight Million Nine Hundred Eighty Eight Thousand One Dollars
15 (\$68,988,001.00) for the existing medical and dental plans for FY2014.

16 *I Liheslaturan Guåhan* finds that the projected required premium for
17 FY2014 results in a savings of approximately Five Million Four Hundred
18 Fifty Nine Thousand Seven Hundred Fifty Seven Dollars (\$5,459,757.00)
19 when compared to the current FY2013 contract.

20 *I Liheslaturan Guåhan* further finds that Government of Guam
21 employees and retirees desire competition in the GHIP in order to provide a
22 choice of health insurance and lower premiums resulting from said
23 competition. On August 22, 2012 a roundtable discussion was held to
24 discuss the procurement of medical and dental insurance with members of *I*
25 *Liheslaturan Guåhan*, Staywell, TakeCare, Netcare and Calvo's SelectCare.
26 The discussion focused in depth on the procurement process used for the
27 Federal Employees Health Benefits Plans ("FEHB"). Both TakeCare and

1 Calvo’s SelectCare discussed the ease of the FEHB process with respect to
2 submitting annual pricing proposals for covering federal employees and
3 annuitants.

4 *I Liheslaturan Guåhan* finds that the FEHB procurement resembles a
5 sealed invitation for bid process where pricing proposals are submitted by
6 each eligible offeror and accepted unconditionally if no objectionable
7 pricing assumptions or obvious data errors are detected by the Office of
8 Personnel Management contract specialists and its actuaries. The basis of
9 choice available to federal employees is determined by the price and
10 perceived quality of the product and service offered by each vendor. This
11 type of arrangement promotes maximum competition resulting in the best
12 price and products for the FEHB.

13 Dr. Robert E. Moffit, a senior fellow in domestic and economic policy
14 studies at the Heritage Foundation who specializes in health care cites the
15 FEHB program as “historically achieving superior performance in cost
16 control” by incorporating “fundamental market principles of real consumer
17 choice, genuine competition, and light and reasonable regulation,” the result
18 of which is “to deliver high quality health care and high levels of consumer
19 satisfaction.”

20 *I Liheslaturan Guåhan* finds that the resulting financial burden placed
21 upon the Government of Guam and its employees and retirees caused by the
22 no bid extension of the FY2012 GHIP benefits and rates is unacceptable and
23 requires *I Liheslaturan Guåhan* to intercede by introducing a solution that 1)
24 lowers the current cost of the GHIP contract; 2) provides multiple choices of
25 insurance providers and 3) does not present opportunities to continue to
26 delay the GHIP procurement through protests.

1 *I Liheslaturan Guåhan* further finds that an invitation for bid that
2 requires all bidders to submit its best and final offer at a sealed bid opening
3 is the most prudent and best method to award GHIP contracts for FY2014.

4 *I Liheslaturan Guåhan* finds that the FEHB uses a similar process to
5 the solution presented and *I Liheslaturan Guåhan* is committed to
6 implementing fundamental market principles of real consumer choice,
7 genuine competition, and light and reasonable regulation as means to an
8 expedient and market driven procurement of medical and dental insurance in
9 FY2014.

10 Three of the four offerors to the FY 2013 GHIP RFP, SelectCare,
11 TakeCare and Aetna International Insurance are all qualified and currently
12 provide insurance to the FEHB program. The fourth offeror is a company
13 approved by the Office of the Insurance and Banking Commission of the
14 Department of Revenue and Taxation as a company in good standing with
15 the necessary financial resources to provide insurance coverage to private
16 companies on Guam.

17 *I Liheslaturan Guåhan* finds that the FEHB program implements the
18 highest standard of scrutiny on health insurance providers to ensure that its
19 employee and annuitants are protected. *I Liheslaturan Guåhan* finds that
20 any company currently providing insurance to the FEHB program is well
21 vetted by the professionals within the federal government's Office of
22 Personnel Management and is qualified to provide insurance to the
23 government of Guam and its employees and retirees.

24 **Section 2. Invitation for Bid for the Government of Guam's**
25 **Group Health Insurance Program for Fiscal Year 2014.** Notwithstanding
26 any other provision of law, the procurement of medical and dental insurance
27 for government of Guam employees and retirees for Fiscal Year 2014

1 (“FY2014”) shall conform to the competitive sealed bidding procedures set
2 forth in this Act. Provisions of Title 4, Guam Code Annotated, Chapter 4,
3 Article 3 and Title 5, Guam Code Annotated, Chapter 5 not inconsistent
4 herewith are applicable to achieve the purposes of Sections 2 through
5 Section 10.

6 (A) The Chief Procurement Officer of the Government of
7 Guam (“CPO”), as defined by 5 G.C.A. §§ 5030(c) and 5110, shall
8 serve as Chairperson of the Government of Guam Health Insurance
9 Negotiating Team (“GGNT”). The CPO, on behalf of the GGNT,
10 shall issue an invitation for bid (“IFB”) for medical and dental
11 insurance for Government of Guam employees and retirees no later
12 than May 23, 2013 for FY2014. The GGNT membership of the CPO
13 shall be non-voting and the Director of the Department of
14 Administration shall remain a voting member.

15 (B) Any previous procurement solicitations for the GHIP
16 FY2014 medical and dental insurance, prior to enactment of this Act
17 are hereby cancelled as of the enactment of this Act and shall not be
18 reissued except by IFB pursuant to the provisions of this Act.

19 (C) All actions related to the IFB shall occur in meetings
20 announced by the CPO and must comply with the Open Government
21 Law of Guam. For purposes of this Act, all meetings of the GGNT
22 shall be deemed special meetings of a public agency for which notice
23 shall be provided one time, at least 48 hours prior to the start of such
24 meeting, and in all other respects consistent with 5 G.C.A. § 8107(b);
25 and which shall be open meetings pursuant to 5 G.C.A. § 8103. A
26 recording shall be made of all meetings of the GGNT which shall be
27 further documented by public minutes compiled by the Department of

1 Administration. The electronic recording and public minutes shall
2 comply with the provisions outlined in 5 G.C.A. § 8113.1. Except as
3 stated herein, no actions related to the IFB shall be considered
4 privileged, including legal advice provided to the GGNT or CPO.
5 Nothing in this Act shall prevent the Office of the Attorney General
6 from representing the government of Guam in any court or Office of
7 Public Accountability proceedings related to the FY 2014 GHIP
8 procurement. The attorney-client privilege between the Office of the
9 Attorney General and the Government of Guam Negotiating Team is
10 retained and shall be asserted in the event of a procurement protest or
11 appeal, or in the event of any other legal action that is commenced
12 concerning the solicitation of medical and dental insurance for FY
13 2014. The IFB for FY2014 shall:

14 (1) solicit medical and dental insurance for the period
15 starting October 1, 2013 and ending September 30, 2014;

16 (2) be announced in publications of general circulation
17 in Guam and in top publications nationally and in leading
18 publications internationally; and

19 (3) require all responses to the IFB by prospective
20 bidders be submitted at a predetermined meeting date and time,
21 no more than twenty-three (23) calendar days, after the initial
22 publication of the solicitation of the IFB. If the twenty-third day
23 falls on a Saturday, Sunday, or legal holiday the meeting shall
24 be held on the next business day. At the same meeting, the bids
25 will be unsealed by the CPO in the presence of a quorum of the
26 GGNT and the names of all bidders and the amounts of their
27 bids shall be entered in the minutes. The GGNT shall accept all

1 bids and award a contract to all bidders that meet the
2 requirements in Section 5 of this Act.

3 (4) A quorum for purposes of this act shall be seven
4 (7) total members who may be voting or non-voting.

5 **Section 3. Invitation for Bid Requirements.** Notwithstanding any
6 other provision of Guam procurement law, the procurement of medical and
7 dental insurance for Government of Guam employees and retirees for
8 FY2014 shall conform to the requirements set forth in this Section.

9 (A) The Medical and Dental plans offered by all bidders shall
10 provide the same benefits and levels of coverage consistent with the
11 Schedules of Benefits previously defined in Exhibit R of Procurement
12 No. DOA/HR-RFP-GHI-13-001, as modified to be in compliance with
13 the provisions of the Patient Protection and Affordable Care Act
14 applicable to Guam and inclusive of the Wellness Benefit that meets
15 the requirements outlined in Exhibit 2 of this Act. Bidders may opt to
16 cover items that are listed as exclusions in Exhibit R of Procurement
17 No. DOA/HRD-RFP-GHI-13-001. A formal request to cover any
18 excluded items shall be included as part of the sealed bid and are
19 subject to the approval of the GGNT.

20 (B) The medical and dental plans shall use the following
21 subscriber tiers and weighting of premiums:

- | | | |
|----|-------------------------------------|-----|
| 22 | (1) Employee/Retiree Only | 1.0 |
| 23 | (2) Employee/Retiree and Spouse | 2.2 |
| 24 | (3) Employee/Retiree and Child(ren) | 1.8 |
| 25 | (4) Employee/Retiree and Family | 3.0 |

26 (C) The monthly government contribution for the medical
27 and dental plans shall be applied uniformly to all bidders awarded a

1 contract and shall equal the following amount by tier by plan by
2 subscriber. If any plan's monthly government contribution in any tier
3 exceeds the total monthly premium for said tier then the monthly
4 government contribution shall decrease for said tier such that the
5 government contribution for said tier equals the total monthly
6 premium.

7 (1) Employee/Retiree Only

8	i. HSA/HRA2000	Active	\$119.97
9	ii. 1500 Deductible	Active	\$172.67
10	iii. HSA/HRA2000	Retiree	\$312.44
11	iv. 1500 Deductible	Retiree	\$586.77
12	v. Dental	Active & Retiree	\$16.13

13 (2) Employee/Retiree and Spouse

14	i. HSA/HRA2000	Active	\$191.96
15	ii. 1500 Deductible	Active	\$336.11
16	iii. HSA/HRA2000	Retiree	\$615.39
17	iv. 1500 Deductible	Retiree	\$1,245.02
18	v. Dental	Active & Retiree	\$19.22

19 (3) Employee/Retiree and Child(ren)

20	i. HSA/HRA2000	Active	\$157.05
21	ii. 1500 Deductible	Active	\$275.01
22	iii. HSA/HRA2000	Retiree	\$503.49
23	iv. 1500 Deductible	Retiree	\$1,019.03
24	v. Dental	Active & Retiree	\$15.73

25 (4) Employee/Retiree and Family

26	i. HSA/HRA 2000	Active	\$261.75
27	ii. 1500 Deductible	Active	\$458.34

1	iii. HSA/HRA2000	Retiree	\$839.13
2	iv. 1500 Deductible	Retiree	\$1,698.04
3	v. Dental	Active & Retiree	\$26.21

4 (D) The total monthly premium rates for retirees for all plans
5 shall equal exactly 2.5x the premium rates of Active employees.

6 (E) The total monthly premiums of the 1500 Deductible plan
7 shall equal exactly 2x the premium rates of the HSA2000 and
8 HRA2000 plan.

9 (F) The Government shall contribute Seven Hundred Fifty
10 Dollars (\$750.00) to single subscribers [tier] and One Thousand Five
11 Hundred Dollars (\$1,500.00) for all other subscribers [tiers] who elect
12 the HSA2000 plan provided the subscriber has a Health Savings
13 Account pursuant to 26 U.S.C. Section 223(d), as amended. The
14 government shall distribute the contribution amount to eligible Health
15 Savings Accounts in two equal installments with a pay date Thirty
16 (30) days after the start of the plan year and a pay date One Hundred
17 Eighty (180) days after the start of the plan year.

18 (G) The government shall contribute Seven Hundred Fifty
19 Dollars (\$750.00) to single subscribers [tier] and One Thousand Five
20 Hundred Dollars (\$1,500.00) for all other subscribers [tiers] who elect
21 the HRA2000 plan provided that the subscriber has a Health
22 Reimbursement Arrangement Plan pursuant to Sections 105 and 106
23 of the Internal Revenue Service Code and as defined in IRS Notice
24 2002-45. The government shall distribute the contribution amount to
25 eligible HRA accounts in two equal installments with a pay date
26 Thirty (30) days after the start of the plan year and a pay date One
27 Hundred Eighty (180) days after the start of the plan year.

1 (H) The calculation of medical and dental premiums in
2 Section 5(D) of this Act shall use the January 2013 enrollment data
3 submitted as an official message to *I Liheslaturan Guåhan* registered
4 as document *32GL-13-0123*. The HSA2000 plan shall be the
5 equivalent of the HSA2000/HRA2000 and the SC1500 plan shall be
6 the equivalent of the 1500 Deductible for the purposes of calculating
7 premiums in the IFB.

8 (I) The Group Health Insurance Agreements (Contracts) for
9 the HSA2000/HRA2000, 1500 Deductible and Dental plans shall be
10 exactly the same as the FY2012 Contracts with revisions deemed, by
11 the GGNT, in the best interest of the government, its employees and
12 retirees for all successful bidders with the exception of a separate
13 Article for each bidder's medical and dental premium rates submitted
14 as part of bid process outlined in Section 2(C)(3) of this Act. A
15 written report of the revisions deemed in the best interest of the
16 government by the GGNT shall include the justification for such
17 changes and shall be submitted by the GGNT to the Speaker of *I*
18 *Liheslaturan Guåhan* no later than when the Contracts are finalized.
19 The Contracts shall be finalized by the AGO *no later than* fifteen (15)
20 working days after the provisions of this Act become law and
21 included in the IFB. The contract shall include a one page addendum
22 for bidders that agree to submit to a Participating Experience Contract
23 that requires eighty six percent (86%) of premiums to be spent on
24 medical and dental claims pursuant to Section 5(F).

25 (J) The IFB package shall, at the minimum, contain the
26 following information:

1 (1) Copy of a uniform contract to be executed by all
2 prospective bidders who participate in the provision of medical
3 and dental insurance to the government;

4 (2) Electronic Microsoft Excel files containing the
5 GHIP Claims data for the period October 1, 2010 to March 31,
6 2013 provided to the Department of Administration and Office
7 of Finance and Budget pursuant to 4GCA, Chapter 4, §4302(g);

8 (3) Schedule of Benefits of the dental and medical
9 plans previously identified as Exhibit R of Procurement No.
10 DOA/HRD-RFP-GHI-13-001, as modified to be in compliance
11 with the provisions of the Patient Protection and Affordable
12 Care Act applicable to Guam and inclusive of the wellness
13 benefit that meets the requirements outlined in Exhibit 2; and

14 (4) The Microsoft Excel template “Exhibit 1 –
15 Required Premium Calculation” for the calculation of the
16 premium by prospective bidders. Exhibit 1 of this Act shall be
17 the template included in the IFB.

18 (5) No bid bond shall be required.

19 (K) The financial solvency of all bidders shall be subject to
20 the review of the Office of Banking and Insurance Commissioner
21 (Commissioner).

22 (L) Bidders awarded a contract *shall* file the health insurance
23 policy with the Commissioner at least fifteen (15) days prior to the
24 policy's effective date and pay the applicable fees.

25 **Section 4. Authorization to Establish Health Reimbursement**
26 **Arrangement Plan for Eligible Actives, Retirees and Dependents.** It is
27 the intent of *I Liheslaturan Guåhan* for the government of Guam to provide

1 Health Reimbursement Arrangement (HRA) Plans to eligible actives,
2 retirees and dependents who do not qualify for a Health Savings Account
3 (HSA). The government of Guam *shall* offer a plan (HRA2000) with the
4 same benefits as the HSA2000 and a Health Reimbursement Arrangement
5 (HRA) for the benefit of its actives, retirees and dependents that are not
6 eligible for a Health Savings Account due to enrollment in Medicare.

7 **Section 5. Invitation for Bid Responsiveness.** Notwithstanding any
8 other provision of Guam procurement law, for the purposes of procuring
9 health insurance for government of Guam employees and retirees in FY
10 2014, a responsive bidder shall mean a bidder conforming to the
11 requirements set forth in this section:

12 (A) All bidders shall provide a copy of a current Certificate
13 of Authority issued by the Commissioner at the time of bid
14 submission.

15 (B) In the event any risks for health is reinsured or
16 transferred by the bidder to a reinsurance company, the reinsurer that
17 assumes the risk shall also provide a copy of a current Certificate of
18 Authority to transact reinsurance business on Guam.

19 (C) All bidders, to include agents, reinsurers and
20 underwriters, must submit a copy of a current Guam business license.

21 (D) The total annual medical and dental premium calculation
22 of the bid shall not exceed Sixty Eight Million Nine Hundred Eighty
23 Eight Thousand One Dollars (\$68,988,001.00) for all carriers for
24 twelve months. The premium calculation shall be derived by
25 multiplying the total number of subscribers by twelve by the
26 equivalent submitted plan rates. Exhibit 1 of this Act shall be used to
27 calculate the premiums and identify whether the rates conform to the

1 requirements in Section 3(B), (D) and (E). In the event all the bids
2 exceed the amount specified in this subsection, then the solicitation
3 shall be cancelled.

4 (E) All bidders shall submit signed Contracts for the
5 HSA2000/HRA2000, 1500 Deductible and Dental plans as part of its
6 submitted sealed bid package.

7 (F) Bidder shall declare whether it agrees to a Participating
8 Experience Contract that requires eighty six percent (86%) of
9 premiums to be spent on medical and dental claims. Bidders not
10 agreeing to a Participating Experience Contract shall by default be
11 required to reconcile premiums and claims pursuant to PPACA
12 Section 2718 MLR standards.

13 **Section 6. Bid Submittal.** All bids shall be submitted to the General
14 Services Agency and shall be maintained by the General Services Agency
15 throughout the solicitation consistent with the provisions of Title 5, Chapter
16 5 Guam Code Annotated not inconsistent herewith, established policies of
17 the General Services Agency and with instructions to be provided in the
18 Invitation For Bids and Section 2(C)(3) of this Act.

19 **Section 7. Inquiries of Prospective Bidders.** All prospective bidders
20 shall submit in writing all inquiries relating to the interpretation and
21 technical details of the IFB at a pre-bid conference meeting no more than
22 eleven (11) calendar days after the IFB issuance. If the eleventh day falls on
23 a Saturday, Sunday, or legal holiday the meeting shall be held on the next
24 business day.

25 At the same meeting, the written inquiries will be received by the
26 CPO in the presence of a quorum of the GGNT. To the maximum extent
27 practicable, all written inquiries will be reviewed by the CPO and members

1 of the GGNT at the meeting to assure that the inquiry is understood. All
2 written inquiries shall be responded to in writing by the CPO, with input
3 from the GGNT, within seven (7) calendar days of the meeting. Copies of all
4 written inquiries and written responses shall be delivered to all prospective
5 bidders. All written determinations allowable under Guam procurement law
6 shall be made by the GGNT.

7 **Section 8. Binding Bid.** After bid opening, a bidder may not change
8 the price or any other provision of the bid. An award on the bid is a binding
9 contract with terms and conditions that do not vary from the terms and
10 conditions of the contract, the Invitation For Bids and any addenda.

11 **Section 9. Non-Exclusive Awards.** Notwithstanding any other
12 provision of law, the award(s) resulting from the solicitation provided for in
13 this Act shall be non-exclusive award(s) for health insurance coverage for
14 qualified active employees and qualified retirees of the Government of
15 Guam, who shall have a choice of one of the insurers receiving an award for
16 FY 2014 for health insurance.

17 **Section 10. Duties of GGNT.** Notwithstanding any other provision
18 of law, for the FY 2014 GHIP procurement, the GGNT shall not develop a
19 ranking system to rank the bids or rank said bids.

20 **Section 11. Expedited Protest Process.** Notwithstanding any other
21 provision of law and any rules promulgated therefore, *if* an actual or non-
22 selected bidder is aggrieved by the solicitation of or an award or a contract
23 for medical and dental insurance for government employees and retirees for
24 FY 2014 the procedure for the protest outlined in this Section *shall* apply,
25 and *shall* be the exclusive means available to resolve the concerns of persons
26 aggrieved in connection with awards or solicitations, in whole or in part.

1 The protest *shall* be submitted to the Public Auditor who may settle and
2 resolve a protest by one (1) or more of the following means:

3 (A) amending or canceling the solicitation;

4 (B) terminating the contract that was awarded;

5 (C) declaring the contract null and void from the time of its
6 award; *or*

7 (D) affirming the contract award decision.

8 If the protest is *not* resolved by mutual agreement, the Public Auditor
9 *shall* issue a decision, in writing, within *no more than* ten (10) working days
10 of receipt of the protest. The decision *shall* state the reasons taken. A copy
11 of the written decision *shall* be mailed, using certified mail, *or* otherwise
12 furnished to the bidder who initiated the protest, the person awarded the
13 contract, and to all other non-selected bidders.

14 For purposes of this Section, the determination of facts and decision
15 by the Public Auditor for the resolution of protests *shall* be final and
16 conclusive with *no* right of appeal *or* judicial review. The fact that a protest
17 has been filed pursuant to this Section *shall not* stay the procurement process
18 or award any contract for medical and dental insurance for government
19 employees and retirees for FY 2014, whether in whole or in part, *unless* so
20 ordered by the Public Auditor. A request for reconsideration *shall also not*
21 stay the award of any contract, whether in whole or in part, *unless* so ordered
22 by the Public Auditor.

23 **Section 12. Severability.** If any provisions of this Act or the
24 application thereof to any person or circumstance is held invalid, such
25 invalidity *shall* not affect any other provision or application of this Act
26 which can be given effect without the invalid provision or application, and to
27 this end the provisions of this Act are severable.

Exhibit 1 - Required Premium Calculation Government of Guam Health Insurance Program FY 2014

Instructions: Enter single rate for HSA/HRA2000 Plan in cell [K13] and single rate for Dental in cell [K24]

[A]	[B]	[C]	[D]	[E]	[F]	[G]	[H]
FY MONTH		FY2013 January					
		EE	EE+SP	EE+CHILD(REN)	EE+FAMILY	TOTAL SUBS	TOTAL MEMS
[1]	MEDICAL	6,682	984	1,741	1,825	11,232	21,868
[2]	HSA2000	2,735	279	586	666	4,266	7,895
[3]	ACTIVE	1,918	187	546	608	3,259	6,562
[4]	RETIREE	817	92	40	58	1,007	1,333
[5]	SC1500	3,947	705	1,155	1,159	6,966	13,973
[6]	ACTIVE	2,171	323	985	978	4,457	10,239
[7]	RETIREE	1,776	382	170	181	2,509	3,734

[J]	[K]	[L]	[M]	[N]
	EE	EE+SP	EE + CHILD(REN)	EE + FAMILY
MEDICAL				
HSA/HRA2000				
A	\$128.00	\$281.60	\$230.40	\$384.00
R	\$320.00	\$704.00	\$576.00	\$960.00
1500 DEDUCTIBLE				
A	\$256.00	\$563.20	\$460.80	\$768.00
R	\$668.50	\$1,470.70	\$1,203.30	\$2,005.50

FY MONTH		FY2013 January					TOTAL MEMS
		EE	EE+SP	EE+CHILD(REN)	EE+FAMILY	TOTAL SUBS	
[8]	DENTAL	5,283	689	1,622	1,670	9,264	18,922

	EE	EE+SP	EE + CHILD(REN)	EE + FAMILY
DENTAL	\$29.00	\$63.80	\$52.20	\$87.00

PROJECTED MEDICAL & DENTAL PREMIUM

	EE	EE+SP	EE + CHILD(REN)	EE + FAMILY	TOTAL
[29] MEDICAL					
[30] HSA/HRA2000					
[31] ACTIVE	\$2,946,048	\$631,910	\$1,509,581	\$2,801,664	\$7,889,203
[32] RETIREE	\$3,137,280	\$777,216	\$276,480	\$668,160	\$4,859,136
[33] 1500 DEDUCTIBLE					
[34] ACTIVE	\$6,669,312	\$2,182,963	\$5,446,656	\$9,013,248	\$23,312,179
[35] RETIREE	\$14,247,072	\$6,741,689	\$2,454,732	\$4,355,946	\$27,799,439
[36] TOTAL MEDICAL	\$26,999,712	\$10,333,778	\$9,687,449	\$16,839,018	\$63,859,957
[38] TOTAL DENTAL	\$1,838,484	\$527,498	\$1,016,021	\$1,743,480	\$5,125,483
[40] TOTAL MEDICAL & DENTAL	\$28,838,196	\$10,861,277	\$10,703,470	\$18,582,498	\$68,985,440

Premiums Below IFB Required Level Bid is Responsive

Exhibit 2

WELLNESS & FITNESS BENEFIT must include at least the following:

- A) Cardiovascular Training;
- B) Resistance and Strength Training;
- C) Flexibility Training conducted by certified personal trainers;
- D) Regular Group Exercise Classes with options to provide additional classes to organized groups of subscribers upon request;
- E) Monthly Nutrition Classes by certified nutritionists;
- F) Fitness Assessments including Body Mass Index (BMI) by certified personal trainers;
- G) Have the capacity to service large number of subscribers with fitness attendants available at all times to assist subscribers with Cardia Vascular Machines, Circuit Weight Machines, and Free Weight Areas;
- H) Assistance to the physically impaired and meet the laws on equal access and comply with the Americans with Disability Act Regulations;
- I) Provide child care services to subscribers utilizing wellness program facilities;
- J) Hours of operation Monday through Sunday, except for holidays and special events.
- K) Free utilization of any gym facilities per member/per dependent per the plan year as an integral part of the wellness benefit.

EXHIBIT R

FY12 Plan Design Details

Schedule of Benefits

Important information about your coverage	When you go to PARTICIPATING Providers after Deductible is met	When you go to NON-PARTICIPATING Providers after Deductible is met
Deductible Per Individual Member	\$1,500	\$3,000
Deductible Per Family The entire family deductible amount of \$4,500 must be satisfied by one or more family members before the plan begins to pay for any covered expenses	\$4,500	\$9,000
Coverage Maximums Individual member annual maximum		\$750,000
Out-of-Pocket Maximums (including deductible)		
• Per Individual member per policy year	\$3,000	No Maximum
• Per Family per policy year	\$9,000	No Maximum
Any Services In The Philippines, Hawaii & the U.S. Mainland (Pre-Certification Required)	Requires a Referral from your Doctor and approval in advance from Calvo's SelectCare	

Your Benefits	Deductible does not apply to these benefits when you go to a Participating Provider	PARTICIPATING Providers Deductible does not apply in this benefit	NON-PARTICIPATING Providers after the Deductible is met
Annual Refraction Eye Exam \$50 per member per plan year		\$20 Member Co-Payment Covered in Guam only	Not Covered
Immunizations (Routine) U.S. Public Health schedule of immunizations up to 18 years of age		Plan pays 100%	Plan 70%* Member 30%
Outpatient Physician Care & Services			
1. Primary Care visits		\$20 Member Co-Payment	Plan 70%* Member 30%
2. Specialist Care Visits		\$40 Member Co-Payment	Plan 70%* Member 30%
3. Voluntary Second Surgical Opinion		\$40 Member Co-Payment	Plan 70%* Member 30%
4. Home Health Care Visit		\$40 Member Co-Payment	Plan 70%* Member 30%
5. Hospice Care in Guam only, maximum 180 days at a maximum of \$100 per member per plan year (Pre-Certification required)		\$40 Member Co-Payment	Not Covered
6. Outpatient Laboratory		\$20 Member Co-Payment	Plan 70%* Member 30%
7. X-Ray Service		\$20 Member Co-Payment	Plan 70%* Member 30%
8. Injections		\$20 Member Co-Payment	Plan 70%* Member 30%
Prescription Drugs (Including Birth Control Pills) Limited to generics only, unless specified by your doctor			Plan pays 50% of Average Wholesale Price
1. Formulary generic drugs per prescription unit (30 day supply)		\$15 Member Co-Payment	
2. Formulary brand name drugs per prescription unit (30 day supply)		\$30 Member Co-Payment	
3. Mail Order		\$5 Member Co-Payment	
4. Non-Formulary (Pre-Certification and prior approval by plan is required) (30 day supply)		\$30 Member Co-Payment	
Preventive Services (Routine) Annual Physical Exam includes Gynecological Exam, Mammogram and Labs (In accordance with the guidelines established by the U.S. Preventive Services Task Force with a Grade A or B)		Plan pays 100%	Not Covered
Well-Baby Care For children up to age two. Maximum 5 visits per member per plan year		Plan 80% Member 20%	Plan 70%* Member 30%

Your Benefits	What Calvo's SelectCare covers	PARTICIPATING Providers after Deductible is met	NON-PARTICIPATING Providers after Deductible is met
Acupuncture 10 visits at \$50 per visit per member per plan year		Plan 80% Member 20%	Not Covered
AIDS Treatment Exclusive of Experimental drugs		Plan 80% Member 20%	Not Covered
AIRFARE Benefit to Centers of Excellence Only For members who meet qualifying conditions, SelectCare provides roundtrip airfare (Plan Approval Required)		Plan pays 100%	Not Covered
Allergy Testing/Treatment \$500 per member per plan year		Plan 80% Member 20%	Plan 70%* Member 30%
Ambulatory Surgi-Center Care (Pre-Certification Required)		Plan 80% Member 20%	Plan 70%* Member 30%
Blood & Blood Derivatives \$50,000 per member per plan year		Plan 80% Member 20%	Plan 70%* Member 30%
Breast Reconstructive Surgery (In accordance with 1998 W.H.C.R.A)		Plan 80% Member 20%	Plan 70%* Member 30%
Cardiac Surgery \$50,000 per member per plan year		Plan 80% Member 20%	Plan 70%* Member 30%
Cataract Surgery Includes Lens Implant, Outpatient only		Plan 80% Member 20%	Plan 70%* Member 30%

This booklet is designed to provide general information about the Calvo's SelectCare plans offered to Government of Guam employees, retirees and survivors. In the event of a discrepancy between this booklet and the contract, the terms of the contract will prevail.

Your Benefits	What Calvo's SelectCare covers	PARTICIPATING Providers after Deductible is met:	NON-PARTICIPATING Providers after Deductible is met:
Chemical Dependency		Plan 80% Member 20%	Plan 70%* Member 30%
Chemotherapy Benefit		Plan 80% Member 20%	Plan 70%* Member 30%
Chiropractic Care 20 visits per member per plan year. Maximum \$25 per visit		Plan 80% Member 20%	Not Covered
Congenital Anomaly Diseases Coverage		Plan 80% Member 20%	Plan 70%* Member 30%
Diagnostic Testing MRI, CT scan, and other diagnostic procedures. Limited to one test per member per plan year per anatomical region (Pre-Certification Required)		Plan 80% Member 20%	Plan 70%* Member 30%
Durable Medical Equipment (DME) Purchase or Rental of crutches, walkers, wheelchairs, hospital beds, suction machines, or oxygen and accessories when prescribed by a Physician (Pre-Certification Required)		Plan pays 80% Member pays 20% of the total rental cost or Purchase	Not Covered
Elective Surgery (Pre-Certification Required)		Plan 80% Member 20%	Plan 70%* Member 30%
Emergency Care 1. On/Off Island emergency facility, physician services, laboratory, X-rays 2. Ambulance Services (Ground Transportation Only)		Plan 80% Member 20%	Plan 70%* Member 30%
End Stage Renal Disease/Hemodialysis		Plan 80% Member 20%	Plan 70%* Member 30%
Hearing Aids Maximum \$500 per member per plan year		Plan 80% Member 20%	Plan 70%* Member 30%
Hospitalization & Inpatient Benefits 1. Room & Board for a semi-private room, intensive care, coronary care and surgery 2. All other inpatient hospital services including laboratory, x-ray, operating room, anesthesia and medication 3. Physician's hospital services		Plan 80% Member 20%	Plan 70%* Member 30%
Implants Limited to cardiac pacemakers, heart valves, stents, intraocular lenses, orthopedic internal prosthetic devices (Limitations apply, please refer to contract)		Plan 80% Member 20%	Plan 70%* Member 30%
Inhalation Therapy		Plan 80% Member 20%	Plan 70%* Member 30%
Maternity Care Pre-natal care and Delivery		Plan 80% Member 20%	Plan 70%* Member 30%
Maternity Care For Non-spouse Dependents Outpatient care only. Maximum \$500 per member per plan year		Plan 80% Member 20%	Not Covered
Mental Health Care		Plan 80% Member 20%	Plan 70%* Member 30%
Nuclear Medicine Maximum \$25,000 per member per plan year (Pre-Certification required)		Plan 80% Member 20%	Plan 70%* Member 30%
Orthopedic Conditions Internal and External Prostheses Maximum \$50,000 per member per plan year for Chronic Conditions and related services		Plan 80% Member 20%	Plan 70%* Member 30%
Physical Therapy (Pre-Certification required)		Plan pays 80% for the first 20 visits and 50% thereafter	Plan 70%* Member 30%
Rehabilitation Therapy Maximum \$25,000 per member per plan year (Pre-Certification required)		Plan 80% Member 20%	Plan 70%* Member 30%
Skilled Nursing Facility Maximum 90 days per member per plan year (subject to pre-approval by Plan)		Plan 80% Member 20%	Plan 70%* Member 30%
Specialty Drugs (Pre-Certification and prior approval from SelectCare is required)		Plan pays 80% of AWP	Not Covered
Sterilization Procedures 1. Tubal Ligation 2. Vasectomy (Outpatient Only)		Plan 80% Member 20%	Plan 70%* Member 30%

Additional Benefits	What Calvo's SelectCare covers		
Wellness & Fitness Benefit *Refer to attachment		Plan pays 80% of the first \$200. Member pays 20% of the first \$200. Plan pays 80% of charges thereafter	Not Covered
1. Wellness Benefit at SDA Wellness Center (Pre-certification required)			
2. Fitness Benefit • Norddada Gym • Paradise Fitness Center		Free access to the Gym for the plan year	

Off-Island

* Eligible Charges for Non-Participating Providers are limited to the lesser of actual charges or Medicare's participating provider fee schedule in the geographic location where the service was rendered, unless otherwise provided in the Agreement. The Covered Person pays any excess above Eligible Charges.

This booklet is designed to provide general information about the Calvo's SelectCare plans offered to Government of Guam employees, retirees and survivors. In the event of a discrepancy between this booklet and the contract, the terms of the contract will prevail.

Important information about your coverage	When you go to PARTICIPATING Providers after deductible is met	When you go to NON-PARTICIPATING Providers after deductible is met
Deductible Per Individual Member	\$2,000	\$4,000
Deductible Per Family The entire family deductible amount of \$6,000 must be satisfied by one or more family members before the plan begins to pay for any covered expenses	\$6,000	\$12,000
Coverage Maximums Individual member annual maximum	\$750,000	
Out-of-Pocket Maximums (including deductible) • Per Individual member per policy year • Per Family per policy year	\$4,000 \$11,900	No Maximum No Maximum
Any Services In The Philippines, Hawaii & the U.S. Mainland (Pre-Certification Required)	Requires a Referral from your Doctor and approval in advance from Calvo's SelectCare	

Your Benefits	What Calvo's SelectCare covers	PARTICIPATING Providers after deductible is met	NON-PARTICIPATING Providers after deductible is met
Acupuncture 10 visits at \$50 per visit per member per plan year		Plan 80% Member 20%	Not Covered
AIDS Treatment Exclusive of Experimental drugs		Plan 80% Member 20%	Not Covered
AIRFARE Benefit to Centers of Excellence Only For members who meet qualifying conditions, SelectCare provides roundtrip airfare (Plan Approval Required)		Plan pays 100%	Not Covered
Allergy Testing/Treatment \$500 per member per plan year		Plan 80% Member 20%	Plan 50%* Member 50%
Ambulatory Surg-Center Care (Pre-Certification Required)		Plan 80% Member 20%	Plan 50%* Member 50%
Annual Refraction Eye Exam \$50 per member per plan year		\$20 Member Co-Payment Covered In Guam only	Not Covered
Blood & Blood Derivatives \$50,000 per member per plan year		Plan 80% Member 20%	Plan 50%* Member 50%
Breast Reconstructive Surgery (In accordance with 1988 W.H.C.R.A)		Plan 80% Member 20%	Plan 50%* Member 50%
Cardiac Surgery \$50,000 per member per plan year		Plan 80% Member 20%	Plan 50%* Member 50%
Cataract Surgery Includes Lens Implant, Outpatient only		Plan 80% Member 20%	Plan 50%* Member 50%
Chemical Dependency		Plan 80% Member 20%	Plan 50%* Member 50%
Chemotherapy Benefit		Plan 80% Member 20%	Plan 50%* Member 50%
Chiropractic Care 20 visits per Plan Year, Maximum \$25 per visit		Plan 80% Member 20%	Not Covered
Congenital Anomaly Diseases Coverage		Plan 80% Member 20%	Not Covered
Diagnostic Testing MRI, CT scan, and other diagnostic procedures. Limited to one test per member per plan year per anatomical region (Pre-Certification Required)		Plan 80% Member 20%	Plan 50%* Member 50%
Durable Medical Equipment (DME) Purchase or Rental of crutches, walkers, wheelchairs, hospital beds, suction machines, or oxygen and accessories when prescribed by a Physician (Pre-Certification Required)		Plan pays 80% Member pays 20% of the total rental cost or Purchase	Not Covered
Elective Surgery (Pre-Certification Required)		Plan 80% Member 20%	Plan 50%* Member 50%
Emergency Care 1. On/Off Island emergency facility, physician services, laboratory, X-rays 2. Ambulance Services (Ground Transportation Only)		Plan 80% Member 20%	Plan 50%* Member 50%
End Stage Renal Disease/Hemodialysis		Plan 80% Member 20%	Plan 50%* Member 50%
Hearing Aids Maximum \$500 per member per plan year		Plan 80% Member 20%	Not Covered
Hospitalization & Inpatient Benefits 1. Room & Board for a semi-private room, intensive care, coronary care and surgery 2. All other inpatient hospital services including laboratory, x-ray, operating room, anesthetics and medication 3. Physician's hospital services		Plan 80% Member 20%	Plan 50%* Member 50%
Immunizations (Routine) U.S. Public Health schedule of immunizations up to 18 years of age		Plan pays 100%	Plan 50%* Member 50%
Deductible for Participating Providers does not apply for this benefit			

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Your Benefits	What Calvo's SelectCare covers	PARTICIPATING Providers after Deductible is met	NON-PARTICIPATING Providers after Deductible is met
Implants Limited to cardiac pacemakers, heart valves, stents, intraocular lenses, orthopedic internal prosthetic devices (Limitations apply, please refer to contract)		Plan 80% Member 20%	Plan 50%* Member 50%
Inhalation Therapy		Plan 80% Member 20%	Plan 50%* Member 50%
Maternity Care Pre-natal care and Delivery		Plan 80% Member 20%	Plan 50%* Member 50%
Maternity Care For Non-spouse Dependents Outpatient care only, Maximum \$500 per member per plan year		Plan 80% Member 20%	Plan 50%* Member 50%
Mental Health Care		Plan 80% Member 20%	Plan 50%* Member 50%
Nuclear Medicine Maximum \$25,000 per member per plan year (Pre-Certification required)		Plan 80% Member 20%	Plan 50%* Member 50%
Orthopedic Conditions Internal and External Prosthesis Maximum \$50,000 per member per plan year for Chronic Conditions and related services		Plan 80% Member 20%	Plan 50%* Member 50%
Outpatient Physician Care & Services			
1. Primary Care visits		\$20 Member Co-Payment	Plan 50%* Member 50%
2. Specialist Care Visits		\$40 Member Co-Payment	Plan 50%* Member 50%
3. Voluntary Second Surgical Opinion		\$40 Member Co-Payment	Plan 50%* Member 50%
4. Home Health Care Visit		\$40 Member Co-Payment	Plan 80%* Member 50%
5. Hospice Care in Guam only, maximum 180 days at a maximum of \$100 per member per plan year (Pre-Certification required)		\$40 Member Co-Payment	Not Covered
6. Outpatient Laboratory		\$20 Member Co-Payment	Plan 50%* Member 50%
7. X-Ray Services		\$20 Member Co-Payment	Plan 50%* Member 50%
8. Injections		\$20 Member Co-Payment	Plan 50%* Member 50%
Physical Therapy (Pre-Certification required)		Plan pays 80% for the first 20 visits and 50% thereafter	Plan 50%* Member 50%
Preventive Services (Routine) Annual Physical Exam includes Gynecological Exam, Mammogram and Labs (In accordance with the guidelines established by the U.S. Preventive Services Task Force with a Grade A or B) Deductible for Participating Providers does not apply for this benefit		Plan pays 100%	Not Covered
Prescription Drugs (Including Birth Control PILLS) Limited to generics only, unless specified by your doctor			
1. Formulary generic drugs per prescription unit (30 day supply)		\$15 Member Co-Payment	Plan pays 50% of Average Wholesale Price
2. Formulary brand name drugs per prescription unit (30 day supply)		\$30 Member Co-Payment	
3. Mail Order		\$5 Member Co-Payment	
4. Non-Formulary (Pre-Certification and prior approval by plan is required) (30 day supply)		\$30 Member Co-Payment	
Recreation Therapy Maximum \$25,000 per member per plan year (Pre-Certification required)		Plan 80% Member 20%	Plan 50%* Member 50%
Skilled Nursing Facility Maximum 60 days per member per plan year (subject to pre-approval by Plan)		Plan 80% Member 20%	Plan 50%* Member 50%
Specialty Drugs (Pre-Certification and prior approval from SelectCare is required)		Plan pays 80% of AWP	Not Covered
Sterilization Procedures			
1. Tubal Ligation		Plan 80% Member 20%	Plan 50%* Member 50%
2. Vasectomy (Outpatient Only)			
Well-Baby Care For children up to age two, Maximum 5 visits per member per plan year Deductible for Participating Providers does not apply for this benefit		Plan 80% Member 20%	Plan 50%* Member 50%

Additional Benefits	What Calvo's SelectCare covers	PARTICIPATING Providers after Deductible is met	NON-PARTICIPATING Providers after Deductible is met
Wellness & Fitness Benefit * refer to attachment		Plan pays 80% of the first \$200. Member pays 20% of the first \$200. Plan pays 50% of charges thereafter	Not Covered
1. Wellness Benefit at SDA Wellness Center (Pre-certification required)			
2. Fitness Benefit • Korbenides Gym • Paradise Fitness Center		Free access to the Gym for the plan year	

Off-Island

* Eligible Charges for Non-Participating Providers are limited to the lesser of actual charges or Medicare's participating provider fee schedule in the geographic location where the service was rendered, unless otherwise provided in the Agreement. The Covered Person pays any excess above Eligible Charges.

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2. Resistance and Strength Training;
3. Flexibility Training conducted by certified personal trainers;
4. Regular Group Exercise Classes with options to provide additional classes to organized groups of subscribers upon request;
5. Monthly Nutrition Classes by certified nutritionists;
6. Fitness Assessments including Body Mass Index (BMI) by certified personal trainers;
7. Have the capacity to service a large number of subscribers with fitness attendants available at all times to assist subscribers with Cardio Vascular Machines, Circuit Weight Machines, and Free Weight Areas;
8. Assistance to the physically impaired and meet the laws on equal access and comply with the Americans with Disability Act Regulations;
9. Provide child care services to subscribers utilizing wellness program facilities;
10. Hours of operation Monday through Sunday, except for holidays and special events.



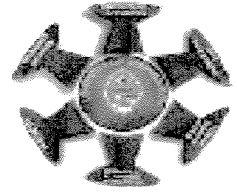
Eddie Baza Calvo
Governor
Ray Tenorio
Lieutenant Governor

GOVERNMENT OF GUÅHAN
(GUBETNAMENTON GUÅHAN)

DEPARTMENT OF ADMINISTRATION
(DIPATTAMENTON ATMENESTRASION)

DIRECTOR'S OFFICE

(Ufisinan Direktot)
Post Office Box 884 * Hagåtña, Guam 96932
TEL: (671) 475-1101/1250 * FAX: (671) 477-6788



Benita A. Manglona
Director
Anthony C. Blaz
Deputy Director

April 22, 2013

Office of the Vice Speaker
Senator Benjamin F. Cruz
Chairman, Committee General Government Operations and Cultural Affairs,
I Mina' trentai Dos Na Liheslaturan Guåhan
Suite 107
155 Hessler Street
Hagatna, Guam 96932

RE: Testimony on Bill 81-32

Buenas Dias and Hafa Adai Senator Cruz:

Thank you for the opportunity to comment on Bill 81-32 (COR) relative to providing health insurance coverage to government of Guam employees and retirees for Fiscal Year 2014.

Upon reviewing the proposed bill, we sought the assistance of our consultants, Hay Group, who helped us in the formulation of our response. The comments we are providing herewith are not in support of Bill 81-32.

We refute the first paragraph that states that the GHIP procurement is being perpetually continued with the existing insurance company at FY2012 rates. The procurement is being continued through the current plan year and was necessary to continue coverage, and therefore, is not intended to be perpetually continued. The negotiating team has every commitment, through its RFP process to attract carriers in submitting proposals for the upcoming FY2014 benefit year. The team, comprised of statutory members from various government agencies, will aggressively seek the best qualified plan(s) for government of Guam employees, retirees and survivors.

Page 2 beginning on line 20 states that GovGuam has been overpaying insurance premiums for the third consecutive year. The legislative branch has failed to realize that the FY12 rates (which were the result of a successful RFP

process and negotiations) reduced the annual premiums by \$7.5M. Further, as advised by our consultants, GovGuam is fully protected because the current contract has a Participating Agreement in it which requires a full settlement at the end of the contract period. This will mean that total premiums are reduced by total claims paid and the guaranteed retention and any excess would be returned to GovGuam. Thus, GovGuam is protected from any overpayment that might be inherent. In addition, the carrier must rebate amounts in excess of the PPACA minimum loss ratio (MLR) requirements of 85%, further lowering the actual premium charges.

The Bill further states that invoking the HIPAA guaranteed renewability provision is not the preferred method of securing insurance. The Negotiating Team was underway with negotiations and was advised to cease all proceedings in recognition of the protest. The Negotiating Team had little choice but to renew the FY2012 contract by invoking the HIPAA guaranteed renewability provisions, as the alternative would have been to not have **any** health insurance coverage. As a result, this left the Negotiating Team without the ability to renegotiate rates. Had this not been the case, the negotiating team was prepared for aggressive negotiations and would have pursued such. Nevertheless, GovGuam, its employees, retirees and survivors are still protected from any overpayment with the Participating Agreement in place to refund excess premiums.

Page 10 paragraph E states that "the premium for the 1500 plan will be 2x the premium for the 2000 plan." Directing an insurer what rates to charge for each plan is highly irregular to say the least. This will discourage vendors from bidding, and most importantly, there is no law requiring vendors to quote. This is risking the ability of GovGuam to acquire competitive bids and to aggressively go through the negotiations process.

Page 11 paragraph G suggests that subscribers can have Health Reimbursement Arrangement (HRA) plans. The government as employer would have to maintain the HRAs which could not be used for anything but medical benefits. We have been advised by our consultants that Patient-Centered Outcomes Research Fee (PCORF) will be assessed on HRAs as well as a plan in which a retiree is enrolled, and that, for plan years beginning on or after 1/1/2014, non-retiree HRAs will not be permitted unless integrated with a medical plan covering the account holder.

Page 14 (5(d)) makes reference to the annual medical and dental premium calculation. We are unsure of the likelihood that the total annual medical and dental calculation will not exceed \$68.361 million for all carriers for 12 months. Generally speaking, typically in the insurance business, a non-exclusive contract approach results in overall higher costs because no one vendor gets all of the risk and from an underwriting standpoint must assume it will get many of the bad risks, thus raising the premium rates for each one. This approach will definitely cost GovGuam more money. This was seen in the past years in which the government offered several carriers who no longer became viable and eventually removed themselves from the government account. Additionally, this provision will discourage

vendors from bidding and this is risking the ability of GovGuam to acquire competitive bids. On that note, beginning on line 20 which states "In the event all bids exceed the specified amount the solicitation will be cancelled", we ask the senators what is GovGuam's recourse to obtaining health insurance when the solicitation is cancelled? Is this something that the legislature is willing to risk at the expense of our employees, retirees, and survivors? We may find ourselves in a repeat of FY2013 and invoking the HIPAA renewability clause. This will, once again, leave the government with no leverage and negotiating power.

Another issue is the calculations used in the proposed bill. Relying on available claims data, the bill identifies over \$65 million in required premiums or, in other words, in claims paid. Using the 85% medical loss ratio allowed under the PPACA, \$65 million represents 85% of almost \$76.5 million. There is no mathematical formula under which the available information supports a combined medical and dental premium cap of \$69 million. That is even more the case when the bill solicits non-exclusive contracts with multiple carriers. This was highly evident in the most recent RFP submissions.

In 2004, Senator Pangelinan co-sponsored Bill 351-27, later enacted into law as P.L. 27-125. Public Law 27-125 created the Health Insurance Review Committee and appropriated \$150,000 to conduct a study and make recommendations on how to provide affordable quality health care to active and retired GovGuam employees. This committee commissioned Lewis & Ellis, Inc. Actuaries and Consultants. Page 4 of the bill references that employees and retirees desire competition in the GHIP in order to provide a choice of health insurance and lower premiums. Page 8 of the bill states that the Government of Guam Negotiating Team (GGNT) "shall unconditionally accept all bids and award a contract to all bidders that meet the requirements...". As previously stated in our testimony on PL31-197, this goes against the advice of the study commissioned by the legislature and the results of the report of the Health Insurance Review Committee. Their analysis indicated that "GovGuam would be better off with fewer benefit offerings (no more than 2) and probably only one carrier." This bill goes against the advice of the experts this Legislature commissioned for an objective, independent and comprehensive analysis. It is evident with past practice that the multiple carrier concept is more costly and less effective. The method used in the FY2012 contract has proved to be more successful in decreasing rates while expanding benefits.

Furthermore, by awarding a contract to all those who "meet the requirements," we are not doing justice for our GovGuam employees, retirees, and survivors by removing the negotiations process. The negotiations process is essential in that it is a way to further reduce the proposed rates. This could not be achieved through an IFB process. There are too many elements involved that only an RFP process would be most conducive.

As mentioned earlier, the government was able to reduce the annual premiums by \$7.5m through the negotiations

process. By removing negotiations and simply awarding a contract to everyone who qualifies, the government loses the ability to negotiate the best rates and the highest benefits for the employees of the government.

Page 14-15(5(f)): Bidders will be required to follow MLR standards whether the contract is participating or not. The MLR rebate, if any, because it is based on total Guam experience of carrier (not just GovGuam experience) will result in different amounts flowing back to GovGuam.

Page 16, Section 9, stipulates that “the GNNT shall not develop a ranking system to rank the proposals or rank said proposals. The absence of a ranking system will deprive GovGuam of the ability to distinguish carriers based on any factors other than price – such as service, capabilities, and quality. What would be the basis in ensuring that these carriers are professionally qualified to provide such services? Providing quotes and proposals that meet the requirements are not the sole purpose of determining the best carrier for GovGuam. Effective negotiations and absolute scrutiny from the negotiating team ensures that the best qualified plan(s) are selected for the best interest of the members.

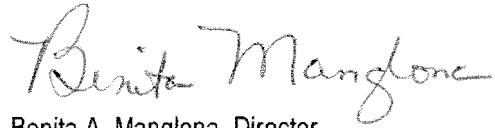
The whole process solicits professionals from the various government agencies and professionals within the health industry field. In fact, the team of professionals working on this project from the actuarial standpoint involves several actuaries, consultants and legal review. Approximately over 1300 manpower hours are spent in the process from the development of the RFP, review of proposals and negotiations process. Bill 81-32 has no regard to this highly technical and essential vetting process. The procurement of health insurance is the largest solicitation for GovGuam. As stated earlier, **there are too many elements involve to resort the procurement of health insurance to an IFB process.** It does not solicit the input from these professionals. Bill 81-32 attempts to “rush” through the negotiation process without any legal or actuarial professional input and against the professionals in the field that recommends that GovGuam would be better off with 1 carrier. Bill 81-32 seems to fast track the whole process.

Lastly, the announcement for the FY2014 Insurance RFP is being announced today in the local and tomorrow in international publications. The Negotiating Team has been meeting for months working on the Rules of Procedure and the RFP.

Thank you for the opportunity to comment on Bill 81-32 (cor).

Testimony on Bill 81-32

Senseramente,

A handwritten signature in cursive script that reads "Benita Manglona". The signature is written in black ink and is positioned above the printed name.

Benita A. Manglona, Director

Department of Administration

Enclosure

Cc: All Senators

Lt. Governor Ray Tenorio

employees and GBB's project manager.

In a special report submitted to the court, the receiver said GBB, GEPA, and the U.S. Environmental Protection Agency have been engaged in a comprehensive environmental investigation and monitoring effort to ensure the final design plan for the closure of the Odet Dump will meet all the requirements of local and federal laws.

A final design has already been drafted for the closure of the dump, but GBB said stakeholders will need to attend technical meetings in San Francisco, Calif., to be held from April 30 to May 3.

Those who will attend the meetings are GBB project manager Christopher Lund, and GEPA employees Vince

**GOVERNMENT OF GUAM
HUMAN RESOURCES DIVISION
DEPARTMENT OF ADMINISTRATION**

**REQUEST FOR PROPOSAL (RFP)
(DOA-HRD - RFP - G41-14-001)**

FY2014 Group Health Insurance Program

The Government of Guam is accepting proposals from interested and qualified health insurance companies licensed under the applicable Guam laws to provide health insurance coverage for eligible government of Guam active employees, retired employees, survivors of retired employees and their dependents.

The RFP will be available on the Department of Administration, Human Resources Division's website at www.hrd.dha.guam.gov on **May 6, 2013, Guam time, at no charge.**

All questions regarding this RFP must be submitted in writing and received by the Director of the Department of Administration, no later than **4:00 p.m., May 13, 2013, Guam time.**

All hard copies and electronic files of the entire proposal must be received by the Director of the Department of Administration no later than 4:00 p.m., May 29, 2013, Guam time.

Should you have any questions regarding this RFP please call the Human Resources Division at (671) 475-1179/1296.

BENITA A. MANUELONA, Director
Department of Administration

Liabilities and Net Assets	
Accounts payable	\$17,992
Total current liabilities	17,992
Net assets - unrestricted	2,156,355
Total liabilities and unrestricted net assets	\$2,174,347
STATEMENT OF ACTIVITIES	
Year Ended December 31, 2012	
Unrestricted revenues and support:	
Grant and donations	\$,951,343
Leagues	200,347
Donor	1,300
Total unrestricted revenues and support	952,990
Expenses:	
Program and league expenses	1,078,429
Field Maintenance	90,246
General and administrative	71,260
Total Expenses	1,239,935
Increase in unrestricted net assets	(272,945)
Unrestricted net assets at beginning of year	2,428,290
Unrestricted net at end of year	\$2,156,345

LEONARDO M. RAPADAS
Attorney General



PHILLIP J. TYDINGCO
Chief Deputy Attorney General

OFFICE OF THE ATTORNEY GENERAL

April 18, 2013

The Honorable Benjamin J.F. Cruz
Vice-Speaker
Chairman, Committee on Procurement, Cultural
Affairs, Public Broadcasting, Youth & General
Government Operation
32nd Guam Legislature
155 Hesler Street
Hagatna, Guam 96910

Re: **Written Testimony on Bill No. 81-32**

Dear Vice-Speaker Cruz,

Thank you for the opportunity to provide testimony concerning Bill No. 81-32. Bill 81 seeks to acquire medical and dental insurance plans for government employees and retirees for Fiscal 2014 that are very similar to the medical and dental insurance plans solicited for Fiscal 2013. However, Bill 81 provides for the solicitation of group health insurance utilizing a specialized Invitation For Bids procedure set out in the Bill. In addition, it is important to note that in a bill similar to Bill 81 that was contemplated in 2012, the legal issues and concerns we raised at that time have been addressed, and we are providing this written testimony and comments about Bill 81 that we have discussed in part through consultation with the author of the bill, Honorable Vicente “ben” C. Pangelinan, as well as discussed in part at the recent public hearing on the same. Its provisions establish in specific detail the terms and conditions for the pricing of the insurance plans, the relationship of rates as between classes of insured persons, and, as well, the relationship of rates as between active employees and retirees. Given the specialized nature of Bill 81 in the acquisition of medical and dental insurance for government employees and retirees, and the unique solicitation method established for this, the following comments are offered in the spirit of assuring that the objectives of the Bill are accomplished if it becomes law.

1. The first substantive provision of Bill 81 provides that “Notwithstanding any other provision of law, the procurement of medical and dental insurance for government of Guam employees and retirees for Fiscal Year 2014 shall conform to the competitive sealed bidding procedures set forth in the Act.”¹ Aside from the provisions of Bill 81, all existing substantive procedure and process for the acquisition of group medical and dental insurance is contained in

¹ Section 2, page 6, beginning at line 24.

statute at Title 4, Chapter 4, Article 3, which might be referred to as group insurance law for government employees and retirees, and Title 5, Chapter 5, the procurement law for government acquisition of supplies, services and construction. A literal and strict interpretation of that provision of Section 2, set out above, might result in the inapplicability of provisions of Title 4 and Title 5 that would otherwise be applicable to the acquisition of medical and dental insurance. The insertion of a savings clause would allow for existing provisions of law to continue to be applicable, as necessary. See Exhibit A for a proposed amendment to Section 2.

2. The solicitation of medical and dental insurance under Bull 81 utilizes competitive bidding and an Invitation For Bids. There are several references to offerors and/or proposals in Bill 81, language used in solicitations that utilize a Request For Proposals², that result in confusion.³ See Exhibit A for proposed amendments at Section 6 and Section 9.

3. Bill 81 eliminates the attorney-client privilege for the process of developing and implementing the IFB, and carrying out the solicitation.⁴ It is strongly urged that the attorney client privilege be maintained in the event that a procurement protest, a procurement appeal, or any other type of litigation is commenced concerning the solicitation of medical and dental insurance plans for government employees and retirees for Fiscal 2014. See Exhibit A for proposed amendments to Section 2.

4. Bill 81 provides that medical and dental plans offered by all bidders shall be consistent with the Schedule of Benefits defined in the FY 2013 solicitation [DOA/HRD-RFP-GHI-13-001].⁵ There must be allowance for any additional services or coverage that may be required by the federal Patient Protection and Affordable Care Act for this coming contract year. See Exhibit A for proposed amendment to Section 3(A).

5. Bill 81, at Section 2, (C), (3) states: “The GGNT shall unconditionally accept all bids and award a contract to all bidders that meet the requirements in Section 5 of this Act.” The term ‘unconditionally’ should be struck. It is clear, and it is enough to state “The GGNT shall accept all bids and award a contract to all bidders that meet the requirements in Section 5 of this Act.” See Exhibit A for proposed amendment to Section 2.

6. Bill 81 should contain an expedited procurement protest process that will provide adequate due process protection by virtue of an administrative appeal to the Public Auditor, but eliminate any appeal of that decision to the Superior Court of Guam. The Office of Public Accountability, and, in particular, the Public Auditor, have demonstrated since October of 2006 the capacity to handle procurement disputes efficiently and effectively, giving all parties more

² Bill 81 is intended to discontinue the use of proposals and Request For Proposals methodology for the FY 2014 solicitation. Unintended use of proposal terminology should be avoided.

³ See Section 6, Title, at page 15, line 5; Section 6, page 15, line 6; and line 17, where the term ‘offerors’ should be amended to read ‘bidders’. See Section 9, page 16, line 5 where the term ‘proposals’, used two times, should be amended to read ‘bids’.

⁴ See Section 2, page 7, at line 25.

⁵ See Section 3, (A) at pages 8 and 9.

than adequate opportunity for a redress of grievances, and a fair opportunity to address procurement errors. The solicitation of medical and dental insurance for government employees and retirees is time sensitive and the process must be completed in time for one or more contracts to be in effect by October 1, 2013. See Exhibit A for the proposed addition of a new Section 11, modeled after P.L. 31-012.

7. Consistent with other procedures set out in Bill 81, it is recommended that bids be submitted to the General Services Agency for handling, as is the practice with bids generally. This might be placed into a new Section 6, ~~as follows~~, with subsequent Sections being renumbered. See Exhibit A for a proposed new Section 6.

8. It is recommended that the procedure for responding to inquiries of prospective bidders found at Section 6 of Bill 81 be amended. First, it is appropriate that prospective bidders submit inquiries in writing, as provided in Bill 81. Second, it is highly recommended that all responses from the government to inquiries be written and provided to all registered prospective bidders at the time provided after the pre-bid conference. Prospective bidders should be advised, both in the Invitation For Bids, and at the meeting, that only written responses to inquiries will be binding upon the government. Third, it is recommended that all responses to written inquiries be provided by the Chief Procurement Officer after consultation with the Government of Guam Negotiating Team. See Exhibit A for proposed amendments to Section 6.

9. It is recommended that Section 7 of Bill 81 be amended for clarity. The reference in the first sentence of Section 7 to “manners prejudicial to the interests of the governmental body and fair competition” is outside of the parameters of current procurement law. Bids are not able to be amended for any reason once bids are opened. There is no reason to add a condition to this already existing state of the law. Also, the award language of the second sentence should reference the contract, as well as the Invitation For Bids and any addenda. See Exhibit A for proposed amendments to Section 7.

10. It is recommended that the provision found at Section 3, (I), on page 12, line 7, that the Office of the Attorney General finalize the contracts to be appended to the Invitation For Bids “*no later than May 15, 2013*” be amended to read: “... *no later than fifteen (15) working days* after the provisions of this Act become law, and included in the IFB.” See Exhibit A for proposed amendment to Section 3.

11. Bill 81 provides for the work of the Government of Guam Negotiating Team to be subject to the Open Government Act.⁶ It is recommended that notice provisions for these meetings be shortened due to time constraints already existing in the solicitation process, so that

⁶ See Section 2, (C), page 7.

Letter to the Honorable Benjamin J.F. Cruz
dated April 18, 2013
page 4

all meeting notices be provided within forty-eight (48) hours of the meeting consistent with the Open Government Act. See Exhibit A for proposed amendments to Section 2.

Thank you for the opportunity to provide this written testimony on Bill No. 81-32. Please do not hesitate to contact me if you have questions about this matter.

Sincerely,

PHILLIP J. TYDINGCO
Chief Deputy Attorney General

Enclosure

cc: Honorable Leonardo M. Rapadas
Attorney General of Guam
Honorable Vicente "ben" C. Pangelinan
Senator, 32nd Guam Legislature

Eddie Baza Calvo
Governor



GENERAL SERVICES AGENCY

(Ahenslan Setbision Hinirat)
Department of Administration

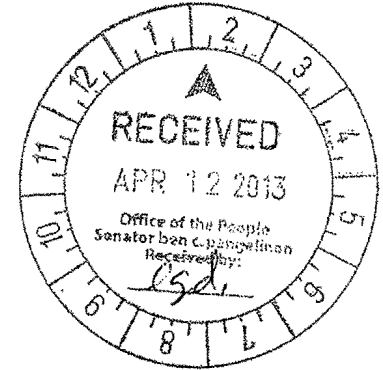
Ray Tenorio
Lieutenant Governor

Benita A. Manglona
Director

148 Route 1 Marine Drive, Piti, Guam 96915
Tel: (671) 475-1707 Fax Nos: (671) 475-1727 / 475-1716

Anthony C. Blaz
Deputy Director

April 12, 2013



Memorandum

Honorable Vicente (ben) Cabrera Pangelinan
Senator, 32nd Guam Legislature
Chairman, Committee on Appropriations,
Public Debt, Legal Affairs, Retirement, Public Parks
Recruitment, Historic Preservation and Land
324 W. Soledad Avenue Suite 100
Hagatna, Guam 96910

Re: Bill 81

Dear Senator Pangelinan:

Thank you for the opportunity to comment on Bill 81 "An Act To Provide Health Insurance To Government of Guam Employees and retirees for Fiscal Year 2014". I

I have the following comments regarding this bill:

Is the intent that the Chief Procurement Officer handle the bids in the same manner as other bids in regards to procedures? For example, will bids be submitted to the General Services Agency office? Will the Chief Procurement Officer be responsible for the handling and security of the bids?

This legislation intent is to have the procurement handled quickly. Is there going to be the right to protest or appeal provided other than the normal process?

The legislation talks about the Negotiation Team voting on all action. The Chief Procurement Officer is the person responsible for procurement process. Is it the intent of the legislation to now have the Negotiation Team make the procurement process decisions?

Further, you indicated that all actions must be done via the Open Government. If the intent is to move quickly, the Open Government requires notice of five (5) days and two (2) days. First who is going to provide the funds for the notice to the press? We suggest that notice may be acceptable by notice on the website. Second, we suggest that the notice be only for two (2) days so that the government can move quickly on this bid.

Thank you for allow us to comment on Bill 81.



CLAUDIA S. ACFALLE
Chief Procurement Officer



COMMITTEE ON RULES

I Mina'trentai Dos na Liheslaturan Guåhan • The 32nd Guam Legislature
155 Hesler Place, Hagåtña, Guam 96910 • www.guamlegislature.com
E-mail: roryforguam@gmail.com • Tel: (671)472-7679 • Fax: (671)472-3547

Senator
Rory J. Respicio
CHAIRPERSON
MAJORITY LEADER

Senator
Thomas C. Ada
VICE CHAIRPERSON
ASSISTANT MAJORITY LEADER

Senator
Vicente (Ben) C. Pangelinan
Member

Speaker
Judith T.P. Won Pat, Ed.D.
Member

Senator
Dennis G. Rodriguez, Jr.
Member

Vice-Speaker
Benjamin J.F. Cruz
Member

Legislative Secretary
Tina Rose Muña Barnes
Member

Senator
Frank Blas Aguon, Jr.
Member

Senator
Michael E.Q. San Nicolas
Member

Senator
V. Anthony Ada
Member
MINORITY LEADER

Senator
Aline Yamashita
Member

April 12, 2013

VIA FACSIMILE
(671) 472-2825

John A. Rios
Director
Bureau of Budget & Management Research
P.O. Box 2950
Hagåtña, Guam 96910

RE: Request for Fiscal Note – Bill Nos. 79-32(COR), 80-32(COR), 81-32(COR), 82-32(COR), 83-32(COR), 84-32(COR), 85-32(COR), 86-32(COR), and 87-32(COR)

Håfa Adai Mr. Rios:

Transmitted herewith is a listing of *I Mina'trentai Dos na Liheslaturan Guåhan's* most recently introduced bill. Pursuant to 2 GCA §9103, I respectfully request the preparation of fiscal notes for the referenced bill.

Si Yu'os ma'åse' for your attention to this matter.

Very Truly Yours,

Senator Rory J. Respicio
Chairperson, Committee on Rules

Attachments

Cc: Clerk of the Legislature

2013 APR 12 AM 10:14

Bill Nos.	Sponsor	Title
79-32 (COR)	Judith T. Won Pat, Ed.D.	AN ACT TO AMEND S106911(k) OF CHAPTER 106, TITLE 11, GUAM CODE ANNOTATED, RELATIVE TO AUTHORIZING THE TRANSFER OF DORMANT AND UNCLAIMED BANK ACCOUNT FUNDS FROM THE TREASURER OF GUAM TO THE GUAM HOUSING CORPORATIONS'S HOUSING TRUST FUND.
80-32 (COR)	Vicente (ben) Pangelinan	AN ACT TO ADD A NEW SUBSECTION (f) to SECTION 2, PART III, CHAPTER II OF PUBLIC LAW 31-233, RELATIVE TO THE APPROPRIATION TO THE GUAM COMMUNITY COLLEGE APPRENTICESHIP PROGRAM
81-32 (COR)	Vicente (ben) Pangelinan	AN ACT TO PROVIDE HEALTH INSURANCE TO GOVERNMENT OF GUAM EMPLOYEES AND RETIREES FOR FISCAL YEAR 2014
82-32 (COR)	Frank B. Aguon, Jr.	AN ACT TO REPEAL CHAPTER 25 OF TITLE 8 GUAM CODE ANNOTATED
83-32 (COR)	Judith T. Won Pat, Ed.D.	AN ACT TO AMEND §77403, §77404, §77405 AND §77407 OF CHAPTER 77, ARTICLE 4, DIVISION 2, TITLE 12, GUAM CODE ANNOTATED, RELATIVE TO THE CONSTRUCTION, DEVELOPMENT, UPGRADING, REPAIR OR MAINTENANCE OF PUBLIC SCHOOL SPORTS FACILITIES.
84-32 (COR)	Vicente (ben) Pangelinan Tina Rose Muña Barnes	AN ACT TO ADD A NEW SUBSECTION (f) to SECTION 2, PART III, CHAPTER II OF PUBLIC LAW 31-233, RELATIVE TO THE APPROPRIATION TO THE GUAM COMMUNITY COLLEGE APPRENTICESHIP PROGRAM
85-32 (COR)	Vicente (ben) Pangelinan	AN ACT TO PROHIBIT THE USE OF GOVERNMENT FUNDS FOR THE APPEAL OF CIVIL CASE 1:11-CV-00008, REA MIALIZA O. PAESTE ET AL V. GOVERNMENT OF GUAM AND EDDIE BAZA CALVO, BENITA MANGLONA, AND JOHN CAMACHO, IN THEIR OFFICIAL CAPACITIES AND TO ADD A NEW SUBSECTION (i) TO SECTION 30109, CHAPTER 30 OF TITLE 5 GUAM CODE ANNOTATED.
86-32 (COR)	T.C. Ada	AN ACT TO ADD §10238 TO ARTICLE 2, CHAPTER 10 OF TITLE 12 GUAM CODE ANNOTATED TO AUTHORIZETH THE JOSE D. LEON GUERRERO PORT AUTHORITY OF GUAM (PORT) TO WAIVE SOVEREIGN IMMUNITY TO SATISFY A PREREQUISITE FOR APPROVAL OF A \$10,000,000 COMMERCIAL LOAN
87-32 (COR)	T. A. Morrison, M. F. Q. San Nicolas, C. M. Duenas, B. J. F. Cruz, T. R. Muna Barnes	AN ACT TO AMEND §§3305 AND 3305.1 CHAPTER 3 OF 16GCA RELATIVE TO IMPLEMENTING A UNIVERSAL HELMET LAW.



COMMITTEE ON RULES

I Mina'trentai Dos na Liheslaturan Guåhan • The 32nd Guam Legislature
155 Hesler Place, Hagåtña, Guam 96910 • www.guamlegislature.com
E-mail: roryforguam@gmail.com • Tel: (671)472-7679 • Fax: (671)472-3547

Senator
Rory J. Respicio
CHAIRPERSON
MAJORITY LEADER

Senator
Thomas C. Ada
VICE CHAIRPERSON
ASSISTANT MAJORITY LEADER

Senator
Vicente (Ben) C. Pangelinan
Member

Speaker
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Vice-Speaker
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Legislative Secretary
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Frank Blas Aguon, Jr.
Member

Senator
Michael F.Q. San Nicolas
Member

Senator
V. Anthony Ada
Member
MINORITY LEADER

Senator
Aline Yamashita
Member

April 5, 2013

MEMORANDUM

To: **Rennae Meno**
Clerk of the Legislature

Attorney Therese M. Terlaje
Legislative Legal Counsel

From: **Senator Rory J. Respicio**
Majority Leader & Rules Chair

Subject: **Referral of Bill No. 81-32(COR)**

As the Chairperson of the Committee on Rules, I am forwarding my re referral of Bill No. **81-32(COR)**.

Please ensure that the subject bill is referred, in my name, to the respective committee, as shown on the attachment. I also request that the same be forwarded to all members of *I Mina'trentai Dos na Liheslaturan Guåhan*.

Should you have any questions, please feel free to contact our office at 472-7679.

Si Yu'os Ma'åse!

Attachment

I Mina'Trentai Dos Na Liheslaturan Guahan
Bill Log Sheet

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	FISCAL NOTES
81-32 (COR)	Vicente (ben) Pangelinan	AN ACT TO PROVIDE HEALTH INSURANCE TO GOVERNMENT OF GUAM EMPLOYEES AND RETIREES FOR FISCAL YEAR 2014	4/5/2013 12:44PM	4/5/13	Committee on General Governmental Operations and Cultural Affairs			



April 8, 2013

MEMORANDUM

To: All Members/All Senators
From: Chairman, Committee on General Government Operations and Cultural Affairs
Re: First Notice of Public Hearing – Five Day Notice – April 15, 2013

Hafa Adai! Please be advised that the Committee on General Government Operations and Cultural Affairs will conduct a Public Hearing on **Monday, April 15, 2013, beginning at 10:00AM in I Liheslatura's Public Hearing Room** with the following agenda:

Appointment of Mr. Goring Tedtaotao Dueñas to the Guam Parole Board

Reappointment of Ms. Conception Duenas to the Guam Parole Board

Bill No. 81-32 (COR) - V.C. Pangelinan / B.J.F. Cruz - An act to provide health insurance to government of Guam employees and retirees for Fiscal Year 2014.

Please provide written testimonies at least one day prior to the hearing to the Office of Vice Speaker Benjamin J.F Cruz, 155 Hesler Place, Hagatña Guam 96910. They may be sent via facsimile to 477-2522, or via email to mike.lidia@senatorbjcruz.com.

We comply with Title II of the Americans with Disabilities Act (ADA). Should you require assistance or special accommodations, please contact Mike Lidia at the Office of the Vice Speaker Benjamin J.F Cruz at 477-2521 or via email at mike.lidia@senatorbjcruz.com.

Senseramente,

Mike Lidia
Research Analyst
Office of Vice Speaker Cruz
477-2520



Mike Lidia <mike.lidia@senatorbjcruz.com>

First Notice of Public Hearing – Five Day Notice – April 15, 2013

4 messages

Mike Lidia <mike.lidia@senatorbjcruz.com> Fri, Apr 5, 2013 at 11:13 AM

To: phnotice@guamlegislature.org
Cc: jose.sanagustin@doc.guam.gov, dean.taitague@doc.guam.gov, mpqute@yahoo.com, Lisa.castro@doc.guam.gov, ron.santos@doc.guam.gov, riaka.mccormick@doc.guam.gov, mark.fleming@doc.guam.gov, ricardo.leonguerrero@doc.guam.gov, Matthew Santos <matthew.santos@senatorbjcruz.com>, goringduenas@yahoo.com, sgrarmes@guamlegislature.org, Adam Bearce <adam@guamlegislature.org>, Yong Pak <yong@guamlegislature.org>, Charissa Tenorio <charissatenorio@gmail.com>

April 5, 2013

MEMORANDUM

To: All Members/All Senators
From: Chairman, Committee on General Government Operations and Cultural Affairs
Re: First Notice of Public Hearing – Five Day Notice – April 15, 2013

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Senseramente,

Mike Lidia

Committee Director

Office of Vice Speaker Cruz
477-2520

Mail Delivery Subsystem <mailer-daemon@googlemail.com>

Fri, Apr 5, 2013 at 11:13 AM

To: mike.lidia@senatorbjcruz.com

Delivery to the following recipient failed permanently:

sgrarmes@guamlegislature.org

Technical details of permanent failure:

Google tried to deliver your message, but it was rejected by the server for the recipient domain guamlegislature.org by aspmx.l.google.com. [173.194.75.26].

The error that the other server returned was:

550-5.1.1 The email account that you tried to reach does not exist. Please try
550-5.1.1 double-checking the recipient's email address for typos or
550-5.1.1 unnecessary spaces. Learn more at
550 5.1.1 http://support.google.com/mail/bin/answer.py?answer=6596_cr8si9695715vdc.142-gsmtp

----- Original message -----

X-Google-DKIM-Signature: v=1; a=rsa-sha256; c=relaxed/relaxed;

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:from:to:cc:content-type:x-gm-message-state;

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azUQ==

MIME-Version: 1.0

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Thu, 04 Apr 2013 18:13:46 -0700 (PDT)

Received: by 10.220.242.3 with HTTP; Thu, 4 Apr 2013 18:13:46 -0700 (PDT)

X-Originating-IP: [202.128.4.44]

Date: Fri, 5 Apr 2013 11:13:46 +1000

Message-ID: <CAFRf6VY3RhWg9+-Si0ho9b=AXt=1xZHA8AY+bSMRRo56uo87Fg@mail.gmail.com>

Subject: =?windows-1252?Q?First_Notice_of_Public_Hearing_96_Five_Day_Notice_?=

=?windows-1252?Q?=96_April_15=2C_2013?=?

From: Mike Lidia <mike.lidia@senatorbjcruz.com>

To: phnotice@guamlegislature.org

Cc: jose.sanagustin@doc.guam.gov, dean.taitague@doc.guam.gov, mpqute@yahoo.com,

Lisa.castro@doc.guam.gov, ron.santos@doc.guam.gov,
riaka.mccormick@doc.guam.gov, mark.fleming@doc.guam.gov,
ricardo.leonguerrero@doc.guam.gov,
Matthew Santos <matthew.santos@senatorbjcruz.com>, goringduenas@yahoo.com,
sgrarmes@guamlegislature.org, Adam Bearce <adam@guamlegislature.org>,
Yong Pak <yong@guamlegislature.org>, Charissa Tenorio <charissatenorio@gmail.com>
Content-Type: multipart/alternative; boundary=14dae9ccd59483ba3604d992cc5b
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SWjnu4WbDOMIWxCyef1P

April 5, 2013

MEMORANDUM

To: All Members/All Senators

From: Chairman, Committee on General Government Operations
and Cultural Affairs

Re: First Notice of Public Hearing – Five Day Notice –
April 15, 2013

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Operations and Cultural Affairs will conduct a Public Hearing on ***Monday,**
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Room*with the following agenda:

Appointment of Mr. Goring Tedtaotao Dueñas to the Guam Parole Board
[Quoted text hidden]

Dean J. Taitague <dean.taitague@doc.guam.gov>
To: Mike Lidia <mike.lidia@senatorbjcruz.com>

Fri, Apr 5, 2013 at 1:38 PM

Sir,

Here's an additional email address for Ms. Taitano our Chairperson for the Guam Parole Board..
chellegu@gmail.com

Sent from my iPhone
[Quoted text hidden]

Adam Bearce <adam@guamlegislature.org>

Fri, Apr 5, 2013 at 1:54 PM



April 10, 2013

MEMORANDUM

To: All Members/All Senators
From: Chairman, Committee on General Government Operations and Cultural Affairs
Re: Second Notice of Public Hearing – Two Day Notice – April 15, 2013

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Senseramente,

Mike Lidia
Research Analyst
Office of Vice Speaker Cruz
477-2520



Mike Lidia <mike.lidia@senatorbjcruz.com>

Second Notice of Public Hearing – Two Day Notice – April 15, 2013

4 messages

Mike Lidia <mike.lidia@senatorbjcruz.com>

Wed, Apr 10, 2013 at 2:55 PM

To: phnotice@guamlegislature.org

Cc: jose.sanagustin@doc.guam.gov, dean.taitague@doc.guam.gov, mpqute@yahoo.com,

Lisa.castro@doc.guam.gov, ron.santos@doc.guam.gov, riaka.mccormick@doc.guam.gov,

mark.fleming@doc.guam.gov, ricardo.leonguerrero@doc.guam.gov, Matthew Santos

<matthew.santos@senatorbjcruz.com>, goringduenas@yahoo.com, sgrarmes@guamlegislature.org, Adam

Bearce <adam@guamlegislature.org>, Yong Pak <yong@guamlegislature.org>, Charissa Tenorio

<charissatenorio@gmail.com>, MiChelle Taitano <chellegu@gmail.com>, benita.manglona@doa.guam.gov,

BENITA A MANGLONA <bmanglonacpa@gmail.com>, "Benjamin J.F. Cruz" <senator@senatorbjcruz.com>

April 10, 2013

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To: All Members/All Senators

From: Chairman, Committee on General Government Operations and Cultural Affairs

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Senseramente,

Mike Lidia

Research Analyst

Office of Vice Speaker Cruz

477-2520

Mail Delivery Subsystem <mailer-daemon@googlemail.com>

Wed, Apr 10, 2013 at 2:55 PM

To: mike.lidia@senatorbjcruz.com

Delivery to the following recipient failed permanently:

sgrarmes@guamlegislature.org

Technical details of permanent failure:

Google tried to deliver your message, but it was rejected by the server for the recipient domain guamlegislature.org by aspmx.l.google.com. [74.125.143.27].

The error that the other server returned was:

550-5.1.1 The email account that you tried to reach does not exist. Please try

550-5.1.1 double-checking the recipient's email address for typos or

550-5.1.1 unnecessary spaces. Learn more at

550 5.1.1 http://support.google.com/mail/bin/answer.py?answer=6596_sk2si6156232lbb.233 - gsmtip

----- Original message -----

X-Google-DKIM-Signature: v=1; a=rsa-sha256; c=relaxed/relaxed;

d=google.com; s=20120113;

h=mime-version:x-received:x-originating-ip:date:message-id:subject

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f0OQ==

MIME-Version: 1.0

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09 Apr 2013 21:55:04 -0700 (PDT)

Received: by 10.112.60.40 with HTTP; Tue, 9 Apr 2013 21:55:04 -0700 (PDT)

X-Originating-IP: [202.128.4.44]

Date: Wed, 10 Apr 2013 14:55:04 +1000

Message-ID: <CAFRf6VaybzR4UqfE9o2b_UQKEFavdwQu+DT3JKgsJFxCrkQ5mg@mail.gmail.com>
Subject: =?windows-1252?Q?Second_Notice_of_Public_Hearing_=96_Two_Day_Notice_?=
=?windows-1252?Q?=96_April_15=2C_2013?=
From: Mike Lidia <mike.lidia@senatorbjcruz.com>
To: phnotice@guamlegislature.org
Cc: jose.sanagustin@doc.guam.gov, dean.taitague@doc.guam.gov, mpqute@yahoo.com,
Lisa.castro@doc.guam.gov, ron.santos@doc.guam.gov,
riaka.mccormick@doc.guam.gov, mark.fleming@doc.guam.gov,
ricardo.leonguerrero@doc.guam.gov,
Matthew Santos <matthew.santos@senatorbjcruz.com>, goringduenas@yahoo.com,
sgrarmes@guamlegislature.org, Adam Bearce <adam@guamlegislature.org>,
Yong Pak <yong@guamlegislature.org>, Charissa Tenorio <charissatenorio@gmail.com>,
MiChelle Taitano <chellegu@gmail.com>, benita.manglona@doa.guam.gov,
BENITA A MANGLONA <bmanglonacpa@gmail.com>, "Benjamin J.F. Cruz"
<senator@senatorbjcruz.com>
Content-Type: multipart/alternative; boundary=14dae94738cd28baff04d9fa792f
X-Gm-Message-State: ALoCoQmpHFZmpceNpyaddalKKvsG051oOFNu9hOXu2DF+
nQjazJetOYY8zB46iUkWR4U+dcug1Nw

April 10, 2013

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Reappointment of Ms. Conception Duenas to the Guam Parole Board



PUBLIC HEARING AGENDA

Monday, April 15, 2013 – 10:00AM

I Liheslatura • Public Hearing Room • Hagåtña, Guam

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