

Media Services RFP: Log of Respondent Questions

1. Do you anticipate that we will have time to do qualitative research before launching the campaign?

Yes, with our current timeline our qualitative research should yield results by the beginning of July.

2. When do you plan to start the advertising campaign? When do you ideally want to be live?

For the general advertising campaign, we would like the final media assets to be delivered to us by ~~August 1, 2015~~ October 1, 2015. We would like most elements to be live by November 1st, 2015. For SHOP-related items, we want assets in-hand for ~~August 1st~~-October 1st, and are planning to go live in November 2015.

3. Will we be able to test creative concepts before going live?

That can definitely be built into your timeline and budget, just indicate that as part of your approach and methodology and we can discuss during the proposal review process. We would like to begin developing the messaging hierarchy and creative approach immediately after the contract is finalized, and testing those components will be key to clearing them to go live.

4. On page 8 in section IV you requested brief resumes of staff. Are you looking for formal professional resumes or will bios suffice?

Bios will suffice, just so we get a good idea of the professional background of those who will be working on this account, as well as an understanding of their focus for this project.

5. Regarding your request for “organizational qualifications”, the RFP contains two separate sections on the Approach & Methodology and Background Qualifications. Can you provide some clarification for us on what you mean by “Organizational Qualifications”?

In your response to “organizational qualifications” (1.d of section IV), we would like to see the information listed under “Background and Qualifications” as section 3.

6. What do you feel are the greatest challenges ahead for Access Health CT?

Some of our greatest challenges (for Marketing) heading into the third Open Enrollment period are related to demonstrating our value to our customers, retaining current enrollees and attracting new customers. Our initial research has shown that many of our current customers do not fully grasp the benefits contained in the insurance they purchased through us, and we believe that in order to retain these customers we must communicate the full value of our services. For the organization as a whole, one of the biggest challenges is for us to transition from start-up mode to a self-sustaining business, which involves us seeking new business ventures outside of Connecticut and capitalizing on our success as a state-based marketplace.

7. Will the fact that private sector payers i.e. UnitedHealthcare, Aetna and Anthem, offering government-mandated health plans to consumers cause confusion and/or competition in the marketplace?

Private sector payers have been offering identical plans directly to consumers and through Access Health CT since we opened for business. While we don't believe this causes any confusion for consumers, we do feel the need to reach those consumers and communicate the added value of purchasing through Access Health CT instead of directly from carriers.

8. Given the success of the most recent open enrollment campaign - pushing the uninsured rate in CT below 4%, which is the lowest in the country - why are you making an agency change? Is there something you're looking for in a new agency that your current agency does not provide?

We are making a change in agency at this stage because our former agency did not meet our needs during the last open enrollment. We need to partner with a firm that understands the value that AHCT brings to our current and potential customers and helps us accomplish our goals for both retention and acquisition.

9. If all assets are to be delivered on August 1, is that also the contract end date?

We would like our partner to stay on board until the end of Open Enrollment, which is January 31, 2016. The bulk of the work will be completed by ~~August 1~~ October 1, but we would like our partner to be in the loop as the enrollment period develops and on-hand in case we find the need to have additional items created. To be clear, any additional work that would pop up beyond what is stated in this RFP would be treated as an addendum to the contract with a separate SOW.

10. Which forms do you need to submit with the final proposal?

In addition to a written proposal that includes acknowledgement of compliance with sections 7-11, we require a completed W-9 and State Ethics Form 5. State Ethics Form 5 and a blank W-9 can be found on the RFP page of our website, at bit.ly/mediarfp.

11. What is the overall budget target for these activities?

We have a target budget of \$300,000, with a maximum budget of \$350,000 for these activities. There will be no flexibility on the cap for this contract, so you should ensure that the bid you submit accounts for all the resources needed to produce these assets. We will judge proposals partly on their approach to conserving costs and maximizing the resources available.

12. What are Access Health CT's selection criteria for this RFP process?

We will provide final selection criteria and scoring sheets to all those who are invited to present.

13. UPDATE: Timeline has been shifted because our research has been delayed. We want you to have the best data available before creating/finalizing messaging and media assets, so we are pushing back other delivery dates.

Our new timeline is as follows:

July 31 st :	Final research report from Pert to Access Health CT
August 1 st :	Delivery of your detailed project plan and timeline to Access Health CT
October 1 st :	Delivery of your final media assets to Access Health CT