Exhibit 1

Specifications/Qualifications

Solicitation 0900000545-ReBid

## SUPPLIER QUALIFICATIONS

Supplier must send bid as one combined file with documents in order with the outline

### Suppliers must have a proven process for reconciliation of Flexible Spending Account contributions and claims administration and the ability to interface and coordinate with the appropriate departments. These processes include the following:

#### Claims Administration

#### Web-based, online account inquiry and claims processing

#### Payment systems (Including, but not limited to, debit card, digital currencies, digital wallet, mobile payment, contactless payment, etc.…)

#### Customer Service 800 Number

#### Communication Materials

#### Dedicated Plan Administrator

#### Reporting Capabilities

#### Compliance with all state and federal laws, guidelines, rules, regulations, and reporting.

### Supplier shall be regularly and continuously engaged in the business of providing flexible spending account services for at least five (5) consecutive years.

### Supplier shall possess all permits, licenses, and professional credentials necessary to supply product and perform services as specified under this RFP.

### Supplier must be able to support multiple pay cycles.

**A.1.5** Supplier shall accept reimbursement of paid transactions weekly for paper claims and daily for debit charges.

## SUPPLIER RESPONSE SECTION

Suppliers MUST PROVIDE a written response concerning their ability to accommodate the items requested below. Supplier must send bid as one combined file with documents in order with the outline.

### Supplier must provide the most current annual report of your organization.

### Supplier must communicate directly with claimants to resolve problems and answer participant questions.

### Supplier must provide administration of all flexible spending accounts as well as any enhancements.

### Supplier must be able to administer a debit/credit card (and/or payment system options including, but not limited to, digital currencies, digital wallet, mobile payment, contactless payment, etc.…) under the Flexible Spending Account programs and have daily claim/reimbursement processing. Debit cards (and/or payment system options including, but not limited to, digital currencies, digital wallet, mobile payment, contactless payment, etc.…) shall be made available to claimants no later than the first of the year, or within 30 days of new participation.

### Supplier must provide clear communications regarding the features and functionality of such debit/credit card or payment system. Additionally, Supplier must provide clear guidance on how the payment system may be used.

### Supplier must provide a minimum of two (2) debit cards (and/or payment system options including, but not limited to, digital currencies, digital wallet, mobile payment, contactless payment, etc.…) to each account holder for reimbursement, at no additional cost to the participant.

### Supplier must ensure that the employer has administrative access to view and change information if needed.

### Supplier must maintain a fully automated claims adjudication system in compliance with electronic transmission standards and security requirements and all other regulations as required by HIPAA.

### Supplier must ensure that the plan design, plan documents, implementation, communication and reports are in compliance with all current applicable laws and regulations.

### Supplier’s system must accept plan enrollment elections and allow a feed via electronic file transmission and post to participant accounts.

### Supplier must accept Health Flexible Spending Accounts (FSA), Dependent Care Accounts (DCA) employer pre-tax contributions via our current Human Capital Management System – Workday. If TPA requires file conversion mapping, this service will be provided by the TPA at no cost to the state.

### Files will be transmitted to the TPA and will need to be posted to the participant accounts by the applicable pay date.

### Supplier must make account statements available at no cost to the State of Oklahoma or individual participants.

### Supplier must provide a grace period for FSA of two and a half months after the end of the plan year; or the maximum grace period as allowed in accordance to Publication 969 of the Internal Revenue Service. Claims from the previous plan year shall be processed by March 31st of the current year. .

### Supplier must track and generate enrollment and eligibility reports at least quarterly. Reports should include participants’ balances, annual election amounts and per-pay-period contributions. Reports must be available no later than the end of the calendar month following the end of the quarter.

### Supplier must provide reports of paid claims, contributions and expenses available on a weekly basis. The report must define if it was a manual claim or a Debit Card claim.

### Supplier must report the end of the year forfeitures by plan type.

### The Supplier must provide a complete description of administrative services including but not limited to the following:

#### Direct participant submissions;

#### Claims adjudication;

#### Direct deposit to participant accounts of claim reimbursement;

#### Reports to participant or including balancing and reconciliation of accounts;

#### Provide a toll-free 800 number for employer and participant;

#### Process Flexible Spending Account claims and claim checks;

#### Send reimbursements via US mail and/or direct deposit; and

#### Provide each Flexible Spending Account participant the ability to review account balance statements and quarterly statements throughout the year at no additional cost.

### Supplier must provide monthly invoices.

### Supplier must provide monthly and end of contract term program activity reports in electronic format to the State of Oklahoma staff including, but not limited to, the following:

#### Employee name, address, employee identifier, check digit and contribution amounts received and paid out per month and cumulative year-to-date;

#### Reconciliation of posted contributions to the number of enrolled participants;

#### Lost and/or stolen reimbursement checks; and

#### Ad hoc reports, as required.

#### Monthly reports shall be due the tenth (10th) of each month following the reporting period. End of contract term reports shall be due within five (5) business days of contract termination.

### Supplier must provide any information regarding incentives and fees pertaining to use of payment systems (Including, but not limited to, debit card, digital currencies, digital wallet, mobile payment, contactless payment, etc.…)

## BIDDER QUESTIONNAIRE

Each bidder must answer the questions in Appendix A. Questions are to be answered in a separate document and returned with the bid response. The question must be included before the answer. For each question, you should provide a full answer. Do not refer to other sections of your proposal, however if the questions are answered in a previous subsection of question(s) please note where specifically and elaborate as applicable; otherwise include the applicable information in the response to the question. Please answer the following questions in the various subsections as it relates to, or is applicable to, each category listed below:

1. Health Flexible Spending Account
2. Dependent Care Spending Account