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ADVERTISEMENT PUBLICATION

Martin County School Board 2845 S.E. Dixie Highway Stuart, FL 34997

RFP# 5001-RH-2002

FULLY INSURED GROUP MEDICAL AND PHARMACY INSURANCE BENEFITS

The School Board of Martin County, Florida is soliciting proposals from qualified proposer to provide Fully Insured Group Medical and Pharmacy Insurance Benefits on a regular and as-needed basis for a three (3) year initial contract period with two (2) three one-year renewal periods.

Solicitation Documents may be obtained by registering with www.DemandStar.com or from the Purchasing Website: https://www.martinschools.org/page/public-notices

The District is not responsible for the content of any submittal package received through any 3rd party service or any other source.

Firms desiring to provide the services described shall submit one (1) complete electronic submittal, contained in one (1) file, PDF format preferred, submitted electronically through www.DemandStar.com or bids@martinschools.org containing all of the required information no later than 2:00pm, December 14, 2022.

Questions: Email <u>bids@martinschools.org</u> by no later than 2:00 pm eastern time on **November 28**, **2022**.

Publish Date: November 14, 2022

SECTION VII

EVALUATION OF SUBMISSIONS

7.1 **EVALUATION METHOD AND CRITERIA**

- Α. Purpose: The purpose of the Proposal is to demonstrate compliance with the evaluative criteria established, specifically the qualifications, knowledge, experience, and competence and capacity of the firms seeking to submit to this RFP. As such, the substance of proposals will carry more weight than their form or manner of presentation.
- В. General: The selection committee will evaluate proposals and will select the proposer which meets the best interests of the District. The District shall be the sole judge of its own best interests, the proposals, and the resulting negotiated agreement. The District's decisions will be final. This criterion shall be utilized in the evaluation of the proposals. The evaluation criteria will include, but not be limited to, consideration of the following:

EVALUATION CATEGORIES 100 POSSIBLE POINTS Organization Profile, Qualifications, References 15 25 Customer Service/Experience/Location/Availability of Staff 15 20 Approach and Methodology 20 15 Cost Proposed 35 25 Provider Networks and Discounts 20 5 5 References Organization Profile, Qualifications, References (Tab 1, 5) 15 points Service Ability and Service History Knowledge of Subject Ability to meet needs and perform work Qualifications of Servicing Team Public Entity References Customer Service/Experience/Location/Availability of Staff (Tab 2) 15 points Customer Service Account Administration Support Account Implementation Team Access Dedicated / Onsite Representative Approach Methodology (Tab 3) 15 points Wellness and Disease Management Programs Cost containment, reduction or avoidance strategies Implementation plan and Schedule 35 points Schedule of Benefits & Proposed Cost (Tab 4)

Plan Design

Proposed funds (wellness) other Participating contract (Surplus Share)

Multi-Year Rate Guarantee

Proposed Premium

Telemedicine

Provider Networks & Discounts

20 points

Greatest percentage of access Discount levels or add-on services Interactive Website

7.2 <u>SELECTION</u>

Proposals will be evaluated using the above criteria. The District will assign this task to an odd number Selection Committee. The District reserves the right to select the most qualified firms from review of the packages submitted and request authorization to negotiate an agreement with the highest ranked firm; or to interview the most qualified Respondents prior to requesting authorization to negotiate an agreement with the highest ranked respondent. Firms will be notified in writing if they are selected for an interview. Notices for interviews will contain explicit instructions concerning location, date, time and length of interviews.

7.3 PRESENTATIONS

The District may require oral and visual presentations from those firms that are ranked or short-listed. This shall be done at the District's sole discretion when it feels presentations are essential as part of the evaluation process and are in the best interests of the District. The District shall be the sole judge and final arbiter of its own best interests in this matter.

7.4 NEGOTIATIONS

After the Selection Committee evaluates and ranks the respondents, staff concludes negotiations with the respondent(s) selected will present the results of the negotiations to the Board for approval of award of a contract. If staff determines that it is unable to negotiate a satisfactory contract with the respondent(s) considered to be the most qualified at a price the District determines to be fair, competitive, and reasonable, negotiations with that respondent(s) shall be formally terminated. Should the staff be unable to negotiate a satisfactory contract with the selected respondent(s), staff may select additional respondent(s) in order of their original ranking, competence and qualification; and will continue negotiations until an agreement is reached. However, the District reserves the right to reject all proposals, to waive any irregularities, and to re-advertise and solicit for other proposals.

7.5 BEST AND FINAL OFFER

Furthermore, the District also reserves the right to negotiate with one or all of the shortlisted Proposers for the purpose of obtaining best and final offers. Proposers shall be accorded fair and equal treatment with respect to any opportunity for discussion and revision of proposals. Any such revisions may be permitted throughout negotiations after submissions and prior to award for obtaining best and final offers. Any revisions to scope or work will be offered to all Proposers for the purpose of obtaining the best and final offer. The District at any time during these negotiations may request a "best and final offer" from the shortlisted responsive and responsible Proposers that submitted proposals.

7.6 CONTINGENT FEES PROHIBITED

The proposing firm must warrant that it has not employed or retained a company or person, other than a bona fide employee, contractor or subcontractor, working in its employ, to solicit or secure a contract with the District, and that it has not paid or agreed to pay any person, company, corporation, individual or firm other than a bona fide employee, contractor or sub-consultant, working in its employ, any fee, commission, percentage, gift or other consideration contingent upon or resulting from the award or making of a contract with the District.

Section VII Page | 41 Evaluation of Submissions

ATTACHMENT "A" Return Completed with Proposal PROPOSER'S PROFILE STATEMENT

PROPOSER shall furnish the following information. Failure to comply with this requirement shall render the proposal non-responsive and shall cause its rejection. Additional sheets shall be attached as required. PROPOSER'S Name and Principal Address: Contact Person's Name and Title: PROPOSER'S Telephone, _____ Fax Number: ____ PROPOSER'S Email address: _____ PROPOSER'S License Number: (Please attach certificate of status, competency, and/or state registration.) Certification: MBE SFDB MWBE DVBE SBA Other (Please attach certificate) PROPOSER'S Federal Identification Number: Number of years your organization has been in business _____ State the number of years your firm has been in business under your present business name State the number of years your firm has been in business in the work specific to this RFP: Names and titles of all officers, partners or individuals doing business under trade name: The business is a: Sole Proprietorship Partnership Corporation IF USING A FICTITIOUS NAME, SUBMIT EVIDENCE OF COMPLIANCE WITH FLORIDA FICTITIOUS NAME STATUTE. (ATTACH IN PROPOSER EXHIBIT SECTION) Under what former name has your business operated? Include a description of the business. Failure to include such information shall be deemed to be intentional misrepresentation by the District and shall render the proposer RFQ submittals non-responsive. At what address was that business located? Have you ever failed to complete work awarded to you? If so, when, where and why?

Have you personally reviewed the proposed scope, and do you have a complete plan for its performance?

Will you subcontract any part of this scope? If so, give details including a list of each sub-contractor(s) (Use Attachment "B", Subcontractor List) that will perform work and the work that will be performed by each subcontractor(s).			
The foregoing list of subcontractors(s) may not be amended after award of the contract without the prior written approval of the Contract Administrator, whose approval shall not be reasonably withheld.			
List and describe all successful Bond claims made to your surety (ies) during the last five (5) years. The list and descriptions should include claims against the bond of the Proposer and its predecessor organization(s).			
Has the Proposer, its principals, officers or predecessor organization(s) been CONVICTED OF A Public Entity Crime, debarred or suspended from bidding by any government entity? If so, provide details.			
Are you an \square Original provider \square sales representative \square distributor, \square broker, \square manufacturer \square other, of the commodities/services proposed upon? If other than the original provider, explain below.			
The PROPOSER acknowledges and understands that the information contained in response to this Qualification Statement shall be relied upon by DISTRICT in awarding the contract and such information is warranted by PROPOSER to be true. The discovery of any omission or misstatement that materially affects the PROPOSER'S qualifications to perform under the contract shall cause the DISTRICT to reject the Proposal, and if after the award, to cancel and terminate the award and/or contract.			
Print Name/Title			

Signature



ATTACHMENT "B" Return Completed with Proposal NON-COLLUSIVE AFFIDAVIT

STATE OF			
DISTRICT OF			
being first duly sv	vorn, deposes and says that:		
PROPOSER is the(Owner, Partner, Officer, Representat	ive or Agent)		
PROPOSER is fully informed respecting the preparation and contents pertinent circumstances respecting such Proposal;	of the attached Proposal and of all		
Such Proposal is genuine and is not a collusive or sham Proposal;			
Neither the said PROPOSER nor any of its officers, partners, owners, agents, representative, employees or parties in interest, including this affidavit, have in any way colluded, conspired, connived or agreed, directly or indirectly, with any other PROPOSER, firm or person to submit a collusive or sham Proposal in connection with the Contract for which the attached Proposal has been submitted; or to refrain from bidding in connection with such Contract; or have in any manner, directly or indirectly, sought by agreement or collusion, or communications, or conference with any PROPOSER, firm, or person to fix the price or prices in the attached Proposal or any other PROPOSER, or to fix any overhead, profit, or cost element of the Proposal Price or the Proposal Price of any other PROPOSER, or to secure through any collusion conspiracy, connivance, or unlawful agreement any advantage against (Recipient), or any person interested in the proposed Contract; The price of items quoted in the attached Proposal are fair and proper and are not tainted by collusion,			
conspiracy, connivance, or unlawful agreement on the part of the PROPOSER or any other of its agents, representatives, owners, employees or parties in interest, including this affidavit.			
Ву			
Subscribed and sworn to before me this day of,	20		
SEAL Notary Po	ublic (Signature)		
Mv Comr	nission Expires:		

ATTACHMENT "C" Return Completed with Proposal

DISCLOSURE OF POTENTIAL CONFLICT OF INTEREST AND CONFLICTING EMPLOYMENT OR CONTRACTUAL RELATIONSHIP

In accordance with Instructions to Proposer's, each Proposer must disclose, in its RFP, the names of any employees who are employed by Proposer who are also an employee of MCSB. Persons identified below may have obligations and restrictions applicable to them under Chapter 112, Florida Statutes.

Name	of Proposer's Employee	MCSB Title or Position of Propos Employee	er's MCSB Department/ School of Proposer's Employee	
Chack	one of the following and sign			
			v Drangaer who are also an ampleyee	۰ŧ
Ш	MCSB.	are no known persons employed b	y Proposer who are also an employee	OI
	I hereby affirm that all kno MCSB, have been identific		Proposer, who are also an employee	of
Signat	ture	Company Nan	ne	
Name	, Title of Official	Business Addi	ess, City, State, Zip Code	_

ATTACHMENT "D"

Return Completed with Proposal

DRUG FREE WORKPLACE CERTIFICATION

<u>IDENTICAL TIE RFPS</u>: Preference shall be given to businesses with drug-free workplace programs. Whenever two or more RFPs which are equal with respect to price, quantity, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a RFP received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie RFPs will be followed if none of the tied vendors have a drug-free workplace program (Florida Statutes Section 287.087). In order to have a drug-free workplace program, a business shall:

- 1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- 2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug free workplace, and available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- 3. Give each employee engaged in providing the commodities or contractual services that are under RFP a copy of the statement specified in subsection (1).
- 4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under RFP, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- 5. Impose a sanction on or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- 6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

Signature
(Print or Type Name)

ATTACHMENT "E" Return Completed with Proposal SWORN STATEMENT ON PUBLIC ENTITY CRIMES

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC OR OTHER OFFICER AUTHORIZED TO ADMINISTER OATHS.

- 1. I understand that a "public entity crime" as defined in Paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with any agency or political subdivision of any other state or with the United States, including, but not limited to, any contract for goods or services to be provided to any public entity or an agency or political subdivision of any other state or of the United States and involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misrepresentation.
- 2. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of the public entity crime, with or without an adjudication of guilt, in any federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.
- 3. I understand that an "affiliate" as defined in Paragraph 287.133(1)(a), Florida Statutes, means:
 - a. A predecessor or successor of a person convicted of a public entity crime; or
 - b. An entity under the control of any person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.
- 4. I understand that a "person" as defined in Paragraph 287.133(1)(e), Florida Statutes means any natural person or entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract for the provision of goods or services let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

5.	Based on information and belief, the statement that I have marked below is true in relation to the entity submitting this sworn statement. (Indicate which statement applies.)
	Neither the entity submitting this sworn statement, nor any officers, directors, executives, partners, shareholders, employees, members or agents who are active in management of the entity, nor any affiliate of the entity have been charged with and convicted of a public entity crime subsequent to July 1, 1989.
	The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.
	The entity submitting this sworn statement, or one or more of the officers, directors, executives, partners, shareholders, employees, members, or agents who are active in management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989. However, there has been a subsequent proceeding before a Hearing Officer of the State of Florida, Division of

Administrative Hearings and the Final Order entered by the Hearing Officer determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (Attach a copy of the final order)

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND, THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THE PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017, FLORIDA STATUTES FOR CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

(Signature)		_			
STATE OF FLORIDA COUNTY OF					
Sworn to and subscribed					, 20 b
identification:	-	sonally know	vn to me or w	ho □ has pre	esented the following type o
Signature of Notary Public, Sta	te of Florida				
Notary seal (stamped in black i OR Printed, typed or stamped nam			an Number		

ATTACHMENT "F" Return Completed with Proposal SIGNATURE PAGE

The undersigned attests to his (her, their) authority to execute this submittal and to bind the firm(s) herein named to perform as per agreement. Further, by signature, the undersigned attests to the following:

- 1. The Proposer is financially solvent and sufficiently experienced and competent to perform all of the work required of the Proposer in the Contract;
- 2. The facts stated in the Proposer's response pursuant to this Request for Qualifications are true and correct in all respects;
- 3. The Proposer has read and complies with, and submits their proposal agreeing to all of the requirements, terms and conditions as set forth in the Request for Proposals.
- 4. Proposer certifies that he or she has not divulged, discussed, or compared his or her submittal with other proposers and has not colluded with any other proposer or parties to a submittal whatsoever. (Note: No premiums, rebates or gratuities permitted either with, prior to, or after any delivery of material. Any such violation shall result in one or more of the following: cancellation, return of materials (as applicable) and the removal of the Proposer from the District vendor list(s).
- 5. Proposer understands that if a team is short listed and selected to make oral presentations to the selection committee and/or DISTRICT, only the team members evaluated in the written submissions may present at the oral presentations. Any changes to the team at the oral presentations shall result in that team's disqualification.
- 6. The undersigned certifies that if the firm is selected by the District, the firm shall negotiate in good faith to establish an agreement.
- 7. Proposer understands that all information listed above may be checked by Martin District School District and Proposer authorizes all entities or persons listed in this proposal submittal to answer any and all questions. Proposer hereby indemnifies the Martin District School District and the persons and entitles listed above and holds them harmless from any claim arising from such authorization or the exercise thereof, including the dissemination of information pursuant thereto.

Submitted on this day of	, 20	·
Please check one: Individu	ıal Partnership	Non-incorporated Organization
Witness		Company
Witness		Ву
(if a corporation, affix seal)		Print Name & Title
Incorporated under the laws of the	State of (if applicable)	