EFFINGHAM COUNTY, GEORGIA REQUEST FOR QUOTE RFQ NO.17-18-001

QUOTATION FOR: Catastrophic Inmate Medical Insurance

EFFINGHAM COUNTY PURCHASING AGENT 601 N. LAUREL STREET SPRINGFIELD, GEORGIA 31329 (912) 754-2169 (PHONE) (912) 754-8413 (FAX) fcharleton@effinghamcounty.org DATE ISSUED: August 10, 2016
DATE DUE: August 29, 2016
TIME DUE: 1.00pm (local time)

DEPT. FOR: <u>Jail</u>

NOTE: Each Vendor or Contractor submitting a response to this request will be responsible for providing any or all of the items or services listed below, <u>as described</u> upon receipt of an Effingham County Purchase Order or executed Contract for such items or service. "Effingham County is an Equal Opportunity Employer", M/F/H, all vendors are required to be Equal Opportunity Employers M/F/H.

GENERAL INFORMATION:

The purpose of this proposal is to solicit written quotations for catastrophic inmate medical insurance for Effingham County Jail. ALL QUOTES SHOULD BE CONTAINED IN A SEALED OPAQUE ENVELOPE, CLEARLY MARKED "SEALED BID 17-18-001" AND WILL BE PUBLICLY OPENED AND READ ALOUD AT 1.00pm (Local Time), Monday August 29, 2016 AT THE ADMINISTRATIVE COMPLEX AT THE ADDRESS LISTED ABOVE.

Questions pertaining to the bid <u>must</u> be made in writing and must be received at the office of the Purchasing Agent no later than <u>11.00am</u> (local time) on Friday August 19, 2016. No response will be given to any questions received after <u>11.00am</u> (local time) on Friday August 19, 2016. Questions may be faxed to 912-754-8413; emailed to <u>fcharleton@effinghamcounty.org</u> or mailed to the address below. If questions are mailed, please DO NOT put the bid number on the outside of the envelope.

The response to all questions will be in the form of an addendum and will be posted on the Effingham County website www.effinghamcounty.org before 5.00pm (local time) on Wednesday August 24, 2016.

The only official answer or position of Effingham County will be the one stated in writing.

Effingham County Board of Commissioners reserves the right to reject any and all bids or any and all bids that are non-responsive or not responsible. Additionally, Effingham County Board of Commissioners has the right to waive any technicalities or informalities. Effingham County may issue change orders altering the original scope of work to address changes or unforeseen conditions necessary for the project completion.

Effingham County Board of Commissioners also reserves the right to make minor changes or further negotiate details and terms. Once the quote is accepted and terms are set, if the vendor fails to deliver within the agreed upon time Effingham County reserves the right to accept a quote from another vendor.

1.0 BILLING/INVOICES: All invoices are to be mailed to:

Effingham County Finance Department ATTN: ACCOUNTS PAYABLE 601 North Laurel Street Springfield, GA 31329

2.0 BID RECIPIENT: This bid is submitted to :

Effingham County Board of Commissioners 601 North Laurel Street Springfield, GA 31329

- **3.0 BIDDER'S ACKNOWLEDGEMENTS:** Bidder accepts all of the terms and conditions of the Instructions to Bidders. This Bid will remain subject to acceptance for 60 days after the Bid opening, or for such longer period of time that Bidder may agree to in writing upon request of Owner.
- **4.0 BIDDER'S REPRESENTATIONS:** In submitting this Bid, Bidder represents that Bidder has examined and carefully studied the Bidding Documents and other related data identified in the Bidding Documents.
- **5.0 BASIS OF BID:** Bidder acknowledges that estimated quantities are not guaranteed and are solely for the purpose of comparison of Bids, and final payment for all unit price Bid items will be based on actual quantities, as determined in the Purchase Order or Contract Documents.

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SPECIFICATIONS

The Effingham County Board of Commissioners is seeking quotes for Catastrophic Inmate Medical Insurance to cover major medical expenses on incarcerated individuals who are not under state custody.

Effingham County Jail currently houses an average daily population of 149.

Effingham County Jail currently has a maximum capacity of approximately 336.

The average time detained is as follows:

Under thirty days: 13%

Thirty days to six months: 50.5% Six months to one year: 24%

Over one year: 12.5%

Effingham County currently contracts with TransformHealthCS for correctional healthcare.

Effingham County Jail does not have an on premises infirmary.

Effingham County's correctional healthcare provider – TransformHealthCS – does not have a discount agreement in place with local hospitals and doctors but abide by House Bill 197 allowing them to utilize the current Georgia Medicaid reimbursement rates.

Effingham County's correctional healthcare provider - TransformHealthCS - does have a case management staff to assure proper monitoring of a hospital stay

The primary caregiver is Effingham County Hospital (not for profit).

2015-2016 Offsite inpatient hospital/outpatient surgical procedures and Physicians services claims which exceeded \$10,000:

0

<u>Diagnosis:</u> <u>Paid Claims:</u> <u>Pending Payment:</u>

Internal bleeding \$14,386.43

One patient is still in care / custody / control for acute psychosis

On the date of this RFQ there are no inmates off-site (inpatient)

NAME OF PROSPECTIVE INSURED:

Effingham County Jail (Effingham County Board of Commissioners)

CONTACT PERSON:

Fiona Charleton

ADDRESS:

601 N.Laurel Street Springfield, GA 31329

<u>TELEPHONE NUMBER:</u> <u>FAX NUMBER:</u> 912-754-8413

EMAIL ADDRESS:

fcharleton@effinghamcounty.org

VENDOR:	
ADDRESS:	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
CITY/STATE/ZIP:	
CONTACT NAME:	
PHONE NUMBER:	FAX:
THERE HOWELL.	
EMAIL:	_
DATE	SIGNATURE/TITLE

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EXCEPTION SHEET

If Commodity(s) and/or Service proposed in quote is in proposal, the Bidder is responsible for clearly identity Otherwise, it will be assumed that the Bidder's offer is in	fying all such differences in the space below
Below are the only differences between my offer and the	e County's proposal:
DATE	SIGNATURE/TITLE

COMPANY

LEGAL NOTICE

REQUEST FOR QUOTATION

RFQ No. 17-18-001 - Catastrophic Inmate Medical Insurance

Effingham County Board of Commissioners will be accepting quotes until **1.00pm (Local Time), Monday August 29, 2016** at the Effingham County Administrative Complex, 601 North Laurel Street, Springfield, GA 31329 for RFQ No. 17-18-001 - Catastrophic Inmate Medical Insurance

Bid packages and instructions are available at the address listed above or online at www.effinghamcounty.org - Purchasing tab. For additional information please contact Effingham County Purchasing office at (912) 754-2169 ext. 4572, or via email: fcharleton@effinghamcounty.org

EFFINGHAM COUNTY RESERVES THE RIGHT TO REJECT ANY/AND ALL BIDS / PROPOSALS AND TO WAIVE ALL FORMALITIES. "EFFINGHAM COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER, M/F/H/V; ALL PROPOSERS ARE REQUIRED TO BE EQUAL OPPORTUNITY EMPLOYERS".

EFFINGHAM COUNTY, GEORGIA DOCUMENT CHECK LIST

The following documents, when marked, are contained in and made a part of this Bid Package or are required to be submitted with the Bid. It is the responsibility of the Bidder to read, complete and sign, where indicated, and return these documents with his/her bid. FAILURE TO DO SO MAY BE CAUSE FOR DISQUALIFYING THE BID.

Company Name : _____

	1	
REQUIRED	COMPLETED	ITEM DESCRIPTION
		INSTRUCTIONS TO BIDDERS
		REQUEST FOR QUOTE
X		BID/QUOTE SUBMITTAL FORM
		SURETY REQUIREMENTS (Certified check or other security of _% required with BID SUBMITTAL – BID BOND FORM PROVIDED)
		PERFORMANCE BOND- UPON AWARD OF CONTRACT (FORM PROVIDED)
		PAYMENT BOND- UPON AWARD OF CONTRACT (FORM PROVIDED)
		CERTIFICATE OF INSURANCE (SAMPLE ATTACHED)
X		W-9
		LEGAL NOTICE
X		CONTRACTOR AFFIDAVIT & AGREEMENT (E-VERIFY)
		SUB-CONTRACTOR AFFIDAVIT & AGREEMENT (E-VERIFY)
		GEORGIA PROFESSIONAL LICENCE CERTIFICATIONS
		LIST OF SUB-CONTRACTORS (if applicable)
X		ATTACHMENTS COPY OF LLC CERTIFICATE OF ORGANIZATION AND OPERATING AGREEMENT OR COPY OF INC. CERTICATE OF INCORPORATION AND CORPORATE RESOLUTION DESIGNATING OFFICERS WITH AUTHORITY TO SUBMIT BID AND SIGN CONTRACT
X		RECEIPT OF ADDENDA IF ANY
Authorize	d Signature	Title
Print Nam	e	Date

THIS SHEET MUST BE INCLUDED WITH BID PACKET

INSTRUCTIONS TO BIDDERS

- **Purpose:** The purpose of this document is to provide general and specific information for use in submitting a Bid or Proposal to supply Effingham County with equipment, supplies and/or services as described herein. All bids / proposals are governed by the Code of Effingham County, and the laws of the State of Georgia.
- **1.2** How to Prepare Bid Proposals: All bid proposals shall be submitted on the form enclosed herewith, unless otherwise prescribed, and all documents must be submitted

All bid proposals shall be typewritten or completed with pen and ink, signed by the business owner or authorized representative, with all erasures or corrections initialed and dated by the official signing the bid / proposal. **All signature spaces must be signed.**

Bidders are encouraged to review carefully all provisions and attachments of this document prior to submission. Each bid constitutes an offer and may not be withdrawn except as provided herein.

- **1.3** How to Submit Bid Proposals: All bid proposals shall be:
 - A. Submitted in sealed opaque envelopes, plainly marked with the bid number, bid title, bid closing date, and company name.
 - B. Mailed or delivered as follows in sufficient time to ensure receipt by the Purchasing Agent on or before the time and date specified above.
 - Mailing Address: Effingham County Purchasing Agent, 601 North Laurel Street, Springfield, Georgia, 31329.
 - Hand Delivery: Effingham County Purchasing Agent, 601 North Laurel Street, Springfield, Georgia, 31329.

Please check the County's website www.effinghamcounty.org prior to submission for any addendum to the RFQ

BIDS NOT RECEIVED BY THE TIME AND DATE SPECIFIED WILL NOT BE OPENED OR CONSIDERED.

- 1.4 <u>How to Submit an Objection</u>: Objections from Bidders to this request for quote and/or these specifications should be brought to the attention of the County Purchasing Agent in writing. The objections contemplated may pertain to form and/or substance of the request for quote documents. Failure to object in accordance with the above procedure will constitute **a** waiver on the part of the business to protest this request for quote.
- **1.5** Failure to Bid: If a Bid is not submitted, the business should return this request for quote completing Attachment G, stating the reason therefore, and indicate whether the business should be retained or removed from the County's Bidders list.
- **1.6 Errors in Bids:** Bidders or their authorized representatives are expected to fully inform themselves as to the conditions, requirements, and specifications before submitting Bids. Failure to do so will be at the Bidder's own risk. In case of error in extension of prices in the bid, the unit price will govern.
- 1.7 <u>Standards for Acceptance of Bid for Contract Award:</u> The County reserves the right to reject any or all Bids and to waive any irregularities or technicalities in Bids received whenever such rejection or waiver is in the best interest of the County. The County reserves the right to reject the Bid of a Bidder who has previously failed to perform properly or complete on time contracts of a similar nature, or a Bid from a Bidder whom investigation shows is not in a position to perform the

contract.

- **1.8** Confidentiality of Documents: Upon receipt of a bid by the County the bid shall become the property of the County without compensation to the Vendor, for disposition or usage by the County at its discretion. The particulars of the bid documents will remain confidential until final award of the contract.
- **1.9** <u>Bidder:</u> Whenever the term "Bidder" is used it shall encompass the "person," "business," "contractor," "supplier," "vendor," or other party submitting a bid or proposal to Effingham County in such capacity before a contract has been entered into between such party and the County.

<u>Contract:</u> Whenever the term "Contract" is used it shall encompass "purchase order" and "agreement"

- **1.10** Responsible / Responsive Bidder: Responsible Bidder means a person or entity that has the capability in all respects to perform fully and reliably the contract requirements. Responsive Bidder means a person or entity that has submitted a bid or proposal that conforms in all material respects to the requirements set forth in the request for quote.
- 1.11 <u>Compliance with Laws:</u> The Bidder and/or contractor shall obtain and maintain all licenses, permits, liability insurance, workman's compensation insurance and comply with any and all other standards or regulations required by Federal, State or County statute, ordinances and rules during the performance of any contract between the contractor and the County. Any such requirement specifically set forth in any contract document between the contractor and the County shall be supplementary to this section and not in substitution thereof.
- **1.12 Governing Law:** Any contract and/or agreement and any addendums to it that result from this RFQ shall be governed by the laws of Georgia, with venue in Effingham County.
- 1.13 <u>Contractor:</u> Contractor or subcontractor means any person or business having a contract with Effingham County. The Contractor/Vendor of construction, supplies, goods, material, equipment or services certifies that they will follow equal employment opportunity practices in connection with the awarded contract as more fully specified in the contract documents.
- **1.14** County: Whenever the term "County" or "Owner" is used it is to refer to the Effingham County Board of Commissioners.
- 1.16 <u>Debarred Firms and Pending Litigation:</u> Any potential bidder/firm listed on the Federal or State of Georgia Parties Listing (barred from doing business) will not be considered for contract award. Proposers shall disclose any record of pending criminal violations (Indictment) and/or convictions, pending lawsuits, etc., and any actions that may be a conflict of interest occurring within the past five (5) years. Any bidder/firm previously defaulting or terminating a contract with the County will not be considered.

Bidder acknowledges that in performing contract work for the County, Bidder shall not utilize any firms that have been a party to any of the above actions. If Bidder has engaged any firm to work on this contract or project that is later debarred, Bidder shall sever its relationship with the firm with respect to County contract.

- ** All Bidders are to read and complete the Bidder's certification regarding debarment, suspension, ineligibility, and voluntary exclusion enclosed as Attachment C to be returned with response. Failure to do so may result in your solicitation response being rejected as non-responsive.
- 1.16 Protection of Resident Workers: Effingham County Board of Commissioners actively supports the Immigration and Nationality Act (INA) which includes provisions addressing employment eligibility, employment verification, and nondiscrimination. Under the INA, employers may hire only persons who may legally work in the Unites States (i.e., citizens and nationals of the U.S.) and aliens authorized to work in the U.S. The employer must verify the identity and employment eligibility of anyone to be hired, which includes completing the Employment Eligibility Verification Form (I-9). The Contractor shall establish appropriate procedures and controls so no services or products under the Contract Documents will be performed or manufactured by any worker who is

not legally eligible to perform such services or employment.

- 1.17 <u>Immigration</u>: On 1 July 2009, the Georgia Security and Immigration Compliance Act (SB 529, Section 2) became effective. All employers, contractors and subcontractors entering into a contract or performing work must sign an affidavit that he/she has used the E-Verify System. E-Verify is a no-cost federal employment verification system to insure employment eligibility. Affidavits are enclosed in this solicitation. You may download M-274 Handbook for Employers at http://www.dol.state.ga.us/spotlight/employment/rules. You may go to http://www.uscis.gov to find the E-Verify information.
 - ** All Bidders are to read and complete the E-Verify affidavit enclosed as Attachment E to be returned with response. *Failure to do so may result in your solicitation response being rejected as non-responsive*
- **1.18** Non-Collusion Affidavit: All Vendors must complete the non-collusion affidavit enclosed as Attachment D per OCGA 36-91-21 (e).
- **Statement of Disclosure:** All Vendors must provide a statement of disclosure which will allow the County to evaluate possible conflicts of interest.

Interests of Public Officials.

The vendor warrants for itself and any subcontractor that no elected or appointed official or employee of Effingham County, Georgia, has any interest in their bid or the proceeds of any contract/agreement which may result thereof. In the event that an elected or appointed official or employee acquires any interest in any contract/agreement which may result from this bid, or the proceeds thereof, the vendor agrees to disclose such interest to the BOARD immediately by written notice. For breach or violation of this clause, the BOARD may annul any contract/agreement resulting from this bid without liability, terminate any contract/agreement resulting from this bid for default, or take other remedial measures. "Interest" as used herein means direct or indirect pecuniary or material benefit accruing to a county commissioner, official or employee as a result of a matter which is or which is expected to become the subject of an official action by or with the county, except for such actions which, by their terms and by the substance of their provisions, confer the opportunity and right to realize the accrual of similar benefits to all other persons and/or property similarly situated. The term "interest" shall not include any remote interest. For purposes of this bid, a county commissioner, official or employee shall be deemed to have an interest in the affairs of: (1) his or her family; (2) any business entity in which the county commissioner, official or employee is a member, officer, director, employee, or prospective employee; and (3) any business entity as to which the stock, legal ownership, or beneficial ownership of a county commissioner, official or employee is in excess of five percent of the total stock or total legal and beneficial ownership, or which is controlled or owned directly or indirectly by the county commissioner, official or employee. Remote interest as used herein means the interest of (1) a volunteer director, officer, or employee of a nonprofit corporation; (2) a holder of less than 5 percent of the legal or beneficial ownership of the total shares of a business; (3) any person in a representative capacity, such as a receiver, trustee, or administrator. Family as used herein means the spouse, parents, children, and siblings, related by blood, marriage, or adoption, of a county official or employee.

- **1.20** Term of the Contract: The term of the coverage will be for one (1) year, commencing on October 1, 2016 and ending on September 30, 2017
 - **1.20.1** Unless otherwise directed by the Effingham County Board of Commissioners.
 - **1.20.2** Unless budgeted funds are not appropriated for said term
- 1.21 <u>Termination of Contract:</u> Effingham County shall have the right to terminate any contract to be made hereunder for its convenience by giving written notice 30 days in advance of its election to do so and by specifying the effective date of such termination. The Vendor shall be paid for services rendered through the effective date of such termination. Further, provided a contract is awarded, if a Vendor shall fail to fulfill any of its obligations hereunder, the County may, by giving written notice to the Vendor, terminate the agreement with said Vendor for such default. If this agreement is so terminated, the Vendor shall be paid only for work satisfactorily completed. The Vendor shall have the right to terminate the contract with Effingham County by giving written notice 90

days in advance of its election to do so and by specifying the effective date of such termination.

1.22 <u>Insurance Provisions:</u> The selected Bidder shall be required to procure and maintain for the duration of the contract insurance against claims for injuries to persons or damages to property which may arise from or in connection with the performance of the work hereunder by the Vendor, his agents, representatives, employees or subcontractors. The cost of such insurance shall be included in the Vendor's fee proposal. Contract work will not proceed unless Effingham County has in their possession, a current Certificate of Insurance. Effingham County invokes the defense of sovereign immunity. The County is not to be included as an additional insured on insurance contracts.

General Information that shall appear on a Certificate of Insurance:

- A. Name of Producer (contractor's insurance Broker/Agent).
- B. Companies affording coverage (there may be several).
- C. Name and address of the Insured (this should be the Company or Parent of the firm Effingham County is contracting with).
- D. A Summary of all current insurance for the insured (includes effective dates of coverage).
- E. A brief description of the operations to be performed, the specific job to be performed, or contract number.
- F. Certificate Holder (This is to always include Effingham County).

Limits of Insurance:

Effective coverage shall have the following limits:

- A. **Commercial General Liability:** Provides protection against bodily injury and property damage claims arising from operations of a contractor or tenant. Minimum limits: \$1,000,000 bodily injury and property damage per occurrence and annual aggregate.
- B. Worker's Compensation and Employer's Liability: Provides statutory protection against bodily injury, sickness or disease sustained by employees of the contractor while performing within the scope of duties. Minimum limits: \$500,000 for each accident, disease policy limit, and disease each employee and Statutory Worker's Compensation limit.
- C. **Business Automobile Liability:** Coverage insures against liability claims arising out of the contractor's use of automobiles. Minimum limit: \$1,000,000 combined single limit per accident for bodily injury, property damage, and should be written on an "Any Auto" basis.

Special Requirements:

- A. Claims-Made Coverage: The limits of liability shall remain the same as the occurrence basis, however, the Retroactive date shall be prior to or coincident with the date of any contract, and the Certificate of Insurance shall state the retroactive date and the coverage is claims-made.
- B. **Extended Reporting Periods:** The contractor shall provide the County with a notice of the election to initiate any Supplemental Extended Reporting Period and the reason(s) for invoking this option.
- C. **Reporting Provisions:** Any failure to comply with reporting provisions of the policies shall not affect coverage provided in relation to this invitation.
- D. **Cancellation/Non-Renewal Notification:** Each insurance policy supplied in response to this invitation shall be endorsed to state that it shall not be suspended, voided, or canceled, except after thirty (30) days prior to written notice by certified mail, return receipt, has been given to the County.
- E. **Proof of Insurance:** Effingham County shall be furnished with certificates of insurance and original endorsements affecting coverage required by this invitation. The certificates and endorsements are to be signed by a person authorized by the insurer to bind coverage on its behalf. All certificates of insurance are to be submitted prior to, and approved by, the County before services are rendered. The Vendor must ensure Certificates of Insurance are updated for the entire term of the Contract.
- F. **Insurer Acceptability:** Insurance is to be placed with an insurer having an A.M. Best's rating of A and a five (5)year average financial rating of not less than V. If an insurer does not qualify for averaging on a five year basis, the current total Best's rating will be used to evaluate insurer acceptability.
- G. Lapse in Coverage: A lapse in coverage shall constitute grounds for contract termination

- by Effingham County Board of Commissioners.
- H. **Deductible and Self-Insured Retention:** Any deductibles or self-insured retention must be declared to, and approved by, the County. At the option of the County, either: the insurer shall reduce or eliminate such deductibles or self-insured retention as related to the County, its officials, officers, employees, and volunteers; or the Vendor shall procure a bond guaranteeing payment of related suits, losses, claims and related investigation, claim administration and defense expenses
- 1.23 Additional Coverage for Engineering, Architectural and Surveying Services; Professional Liability: Insure errors or omission on behalf of architects, engineers, attorneys, medical professionals, and consultants. Minimum Limits: \$1,000,000 per claim/occurrence. Coverage Requirement: If "claims made," retroactive date must precede or coincide with the contract effective date or the date of the Notice to Proceed. The professional must state if "tail" coverage has been purchased and the duration of the coverage.
- Indemnification: The CONTRACTOR agrees to protect, defend, indemnify, and hold harmless Effingham County, Georgia, its commissioners, officers, agents, and employees from and against any and all liability, damages, claims, suits, liens, and judgments, of whatever nature, including claims for contribution and/or indemnification, for injuries to or death of any person or persons, or damage to the property or other rights of any person or persons caused by the CONTRACTOR or its subcontractors. The CONTRACTOR'S obligation to protect, defend, indemnify, and hold harmless, as set forth herein above shall include, but not be limited to, any matter arising out of any actual or alleged infringement of any patent, trademark, copyright, or service mark, or any actual or alleged unfair competition, disparagement of product or service, or other business tort of any type whatsoever, or any actual or alleged violation of trade regulations. CONTRACTOR further agrees to investigate, handle, respond to, provide defense for, and to protect, defend, indemnify, and hold harmless Effingham County, Georgia, at his sole expense, and agrees to bear all other costs and expenses related thereto, even if such claims, suits, etc., are groundless, false, or fraudulent, including any and all claims or liability for compensation under the Worker's Compensation Act arising out of injuries sustained by any employee of the CONTRACTOR or his subcontractors or anyone directly or indirectly employed by any of them. The CONTRACTOR'S obligation to indemnify Effingham County under this Section shall not be limited in any way by the agreed-upon contract price, or to the scope and amount of coverage provided by any insurance maintained by the CONTRACTOR.
- **1.25** Payments: Advance payments for work contracted as a result of this RFQ shall not be granted unless specified in writing in the contract.

Progress payments or draw for work contracted as a result of this RFQ shall not be granted unless specified in writing in the contract.

Payment of invoices resulting from work contracted as a result of this RFQ will be made within the time frame specified in the contract resulting from this RFQ.

Final payment for any work contracted as a result of this RFQ shall be made within the time frame specified in the contract resulting from this RFQ.

Notwithstanding any other payment provisions of a contract resulting from this RFQ, failure of the Contractor to submit required reports when due or failure to perform or deliver required work, supplies, or services, may result in the withholding of full payment under a contract resulting from this RFQ unless such failure arises out of causes beyond the control, and without the fault or negligence of the Contractor. The County will immediately notify the Contractor of its intention to withhold payment of any invoice or voucher submitted for work performed under a contract resulting from this RFQ.

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ATTACHMENT A

DRUG FREE WORKPLACE CERTIFICATION

The undersigned certifies that the provisions of Code Sections 50-24-1 through 50-24-6 of the Official Code to Georgia Annotated, related to the Drug Free Workplace have been complied with full.

- 1. A drug-free workplace will be provided for the employees during the performance of the contract; and;
- 2. Each Sub-Contractor under the direction of the Contractor shall secure the following written certification:

(Contractor) certifies to Effingham County that a drug-free workplace will be provided for the employees during the performance of this contract known as **RFQ No. 17-18-001 - Catastrophic Inmate Medical Insurance** pursuant to paragraph (7) of subsection (B) of Code Section 50-24-3. Also, the undersigned further certifies that he/she will not engage in the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.

CONTRACTOR	DATE	
NOTARY	DATE	

ATTACHMENT B

PROMISE OF NON-DISCRIMATION STATEMENT

Know all men by this presence, that I	(We)
Name	,(herein after "Company"), Title
	d on the following Effingham County Procurement titled RFQ No. 17-cal Insurance hereby consent, covenant, and agree as follows:
	m participation in, denied the benefit of, or otherwise discriminated national origin or gender in connection with the Bid submitted to e of the contract resulting there from;
	of this Company to provide equal opportunity to all business persons erested with the Company, including those companies owned and omen; and
C. That the promises of non-discriming the duration of this contract with Effin	ination as made and set forth herein shall be continuing throughout gham County.
	nation as made and set forth herein shall be and are hereby deemed y reference in the contract which this Company may be awarded;
made and set forth above may const	o satisfactorily discharge any of the promises of non-discrimination as itute a material breach of contract entitling the County to declare the appropriate remedies including but not limited to termination of the
SIGNATURE	

ATTACHMENT C

BIDDER'S CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION

The undersigned certifies, by submission of this bid / proposal or acceptance of this contract, that neither Contractor nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency, State of Georgia, Board of Education or local municipality. Bidder agrees that by submitting this bid / proposal that Bidder will include this clause without modification in all lower tier transactions, solicitations, proposals, contracts and subcontracts. Where the Bidder or any lower tier participant is unable to certify to this statement, that participant shall attach an explanation to this document.

Certification - the above information is true and complete to the best of my knowledge and belief.

(Printed or Typed Name of Signatory)
(Cimpatura)
(Signature)
(Date)
(2010)

NOTE: The penalty for making false statements in offers is prescribed in 18 U.S.C. 1001

ATTACHMENT D

NON-COLLUSION AFFIDAVIT

I,	_ certify that p	pursuant to O.C.G.A. Section 36-91-21 (d) and
(e),	ent competition e has not prev	has not, by itself or with others, directly or n in such bidding or proposals by any means evented or endeavored to prevent anyone from er, nor has Affiant caused or induced another to
	to get such pe	is bona fide, and that no erson or company to furnish the materials to the aterial shall be at a higher price.
(COMPANY NAME)		_
(PRESIDENT/VICE PRESIDENT)		_
Sworn to and subscribed before me this	day of	, 200
(SECRETARY/ASSISTANT SECRETARY) (Affix corporate seal here, if a corporation)		
Notary Public:		
County:		
Commission Expires:		

NOTE:

IF THE OFFEROR IS A PARTNERSHIP, ALL OF THE PARTNERS AND ANY OFFICER, AGENT, OR OTHER PERSON WHO MAY HAVE REPRESENTED OR ACTED FOR THEM IN BIDDING FOR OR PROCURING THE CONTRACT SHALL ALSO MAKE THIS OATH.

IF THE OFFEROR IS A CORPORATION, ALL OFFICERS, AGENTS, OR OTHER PERSONS WHO MAY HAVE ACTED FOR OR REPRESENTED THE CORPORATION IN BIDDING FOR OR PROCURING THE CONTRACT SHALL MAKE THE OATH.

ATTACHMENT E STATE OF GEORGIA EFFINGHAM COUNTY

CONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned Contactor verifies its compliance with O.C.GA § 13-10-91, stating affirmatively that the individual, firm, or corporation that is contracting with Effingham County has registered with and is participating in a federal work authorization program* [any of the electronic verification of work authorization programs operated by the United States Department of Homeland Security or any equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603], in accordance with the applicability provisions and deadlines established in O.C.G.A. § 13-10-91, and shall agree to use this program for any newly hired employees throughout the duration of the contract.

The undersigned further agrees that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to this contract with Effingham County, contractor will secure from such subcontractor similar verification of compliance with O.C.G.A. § 13-10-91on the subcontractor Affidavit provided in Rule 300-10-01-.08 or a substantially similar form. The contractor further agrees to provide notice to the County of the identity of each subcontractor hired under the contract within five (5) business days of entering into a contract for hire. Such notice shall include a copy of the Subcontractor Affidavit for each subsequent subcontractor attesting to the subcontractor's name, address, user identification number, and date of authorization to use the federal work authorization program. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the Effingham County within five (5) days of the time the subcontractor(s) is retained to perform such service.

EEV/ Basic Pilot Program* User Identification Number	
Date Authorized to use E-Verify	
BY: Authorized Officer or Agent (Contractor Name)	Date
Title of Authorized Officer or Agent of Contractor	
Printed Name of Authorized Officer or Agent	
SUBSCRIBED AND SWORN BEFORE ME ON THIS	ГНЕ
DAY OF 20	
Notary Public	
My Commission Expires:, 20, 20, As of the effective date of O.C.G.A. § 13-10-91, the app	licable federal work authorization program

* As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

ATTACHMENT F STATE OF GEORGIA EFFINGHAM COUNTY

SUBCONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned subcontributed subcontributed stating affirmatively that the individual, firm, performance of services under a contract with on behalf of Effingham County has registered with program* [any of the electronic verification of work at Department of Homeland Security or any equivalent United States Department of Homeland Security to verto the Immigration Reform and Control Act of 19	or corporation that is engaged in the physical (name of contractor) and is participating in a federal work authorization athorization programs operated by the United States federal work authorization program operated by the erify information of newly hired employees, pursuant 86 (IRCA), P.L. 99-603], in accordance with the
applicability provisions and deadlines established ir program for any newly hired employees throughou	
further agrees to provide a copy of the executed Sul	ocontractor Affidavit to the Contractor in order to be
provided to the County within five (5) days of entering	into the contract for hire.
EEV/ Basic Pilot Program* User Identification Number	_ r
,,	
Date of E-Verify Authorization	-
	_
Address	
BY: Authorized Officer or Agent (Subcontractor Name)	Date
(Subcontractor Name)	
Title of Authorized Officer or Agent of Subcontractor	-
The of Authorized Children of Agent of Caboonitation	
Printed Name of Authorized Officer or Agent	-
· ·	
SUBSCRIBED AND SWORN BEFORE ME ON THIS	THE
DAY OF 20	
Notary Public	-
Notally Lubile	
My Commission Expires: 20	

^{*} As of the effective date of O.C.G.A. § 13-10-91, the applicable federal work authorization program is the "EEV/Basic Pilot Program" operated by the U.S. Citizenship and Immigration Services Bureau of the U.S. Department of Homeland Security, in conjunction with the Social Security Administration (SSA).

ATTACHMENT G

NO-BID STATEMENT

In an effort to make the procurement of construction, goods and services for Effingham County as competitive as possible, we are soliciting information from contractors and or vendors who cannot Bid. Your "responsiveness" and "constructive" comments will be appreciated. Completion of this form will assist us in evaluating factors which relate to the competitiveness of our Bids. Please check any of the boxes below which may apply.

	Specifications - Restrictive, too "tight", unclear, specialty item, geared toward one (1) brand or manufacturer only. (Explain below)	
	Manufacturing - Unique item, production time for model or item has expired, etc.	
	Bid Time - Insufficient time to properly respond to bid or proposal.	
	Delivery Time - Specified delivery time cannot be met.	
	Payment - Delay in payment terms. Please be specific.	
	Bonding - We are unable to meet bonding requirements.	
	Insurance - We are unable to meet insurance requirements.	
	Removal - From Bidders list for this particular commodity or service.	
	Keep - Our Company on your Bidders list for future reference.	
	Project is - Too Large Too Small Site Location Too Distant .	
	Miscellaneous - Do not wish to Bid, do not handle this type of item (s), unable to compete, contract clause (s) not acceptable, etc. Please be specific.	
CONST	TRUCTION PROJECTS: Please provide reason for obtaining a Bid package. Check one below.	
□ Intere	est in this project as a: Prime Contractor,	
□ Sub-0	Contractor Supplier	
RFQ No. 17-18-001 - Catastrophic Inmate Medical Insurance		
Signat	ure: Telephone Number:	
Firm N	ame:	