#### PATRICIA A. PESHKA





#### SCOTT AVEDISIAN

**MAYOR** 

## **CITY OF WARWICK**

Purchasing Division 3275 Post Road Warwick, Rhode Island 02886 Tel (401) 738-2000 Ext. 6240 Fax (401) 737-2364

To: All Prospective Bidders

From: Patricia A. Peshka, Purchasing Agent

Date: December 9, 2016

Re: RFP #2017-199 Health and Dental Insurance Consultant

Addendum #1

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Please be advised that this memorandum comprises Addendum #1.

The Bid posting and opening dates were incorrectly dated for the year 2017.

<u>The Correct dates are: Posted – December 7<sup>th</sup>, 2016</u>

<u>Opening – December 19, 2016</u>

All other information remains the same.

Should you have any questions, please
Should you have any questions, please contact Jean Bouchard, Personnel Director, 3275 Post Rd.
Annex, Warwick, RI at 401-738-2000, extension 6246.

Thank you for your interest in this project.

#### PATRICIA A. PESHKA

#### SCOTT AVEDISIAN

PURCHASING AGENT MAYOR

## CITY OF WARWICK

Purchasing Division 3275 Post Road Warwick, Rhode Island 02886 Tel (401) 738-2000 Ext. 6240 Fax (401) 737-2364

The following notice is to appear on the City of Warwick's website December 7, <u>2016</u>. The website address is <a href="http://www.warwickri.gov">http://www.warwickri.gov</a> (Online Resources Tab).

# CITY OF WARWICK PROPOSALS REQUESTED FOR

### RFP #2017-199 Health and Dental Insurance Consultant

Specifications are available in the Purchasing Division, Warwick City Hall, Monday through Friday, 8:30 AM until 4:30 PM on or after December 7, 2016.

Sealed proposals will be received by the Purchasing Division, Warwick City Hall, 3275 Post Road, Warwick, Rhode Island 02886 up until 10:00 AM, December 19, 2016. The proposals will be opened publicly commencing at 10:00 AM on the same day in the Lower Level Conference Room, Warwick City Hall.

Awards shall be made on the basis of the lowest evaluated or responsive proposal price. Please note that no proposals can be accepted via email or fax.

Individuals requesting interpreter services for the hearing impaired must notify the Purchasing Division at 401-738-2000, extension 6241 at least 48 hours in advance of the proposal opening date.

## Original Signature on File

Patricia A. Peshka Purchasing Agent

## PLEASE SUBMIT THIS PAGE WITH YOUR PROPOSAL

## **Acknowledgement of Addendum (if applicable)**

	Addendum Number	Signature of Bidde	er
			-
			-
COMPANY NAM	ME:		
	ORESS:		
COMPANY ADI	ORESS:		
BIDDER'S SIGN	ATURE:		
	E (PRINT):		
TITLE:	TEL. NO.:_		
EMAIL ADDRE	SS:		*
•	email address. Future propo		
II. AWARD AND			
Agent/Finance Direct enters into a contract or receipt of the good	cCITY OF WARWICK, acting tor/Mayor (delete if inapplicate with the above party to pay to the sunless another payment solutions, both substantive and payment solutions, both substantive and payment solutions.	able), accepts the above pathe proposal price upon a hedule is contained in the	proposal and hereby completion of the project e specifications. All
DATE:			
	7-199 Health and Dental Consultant	PURCHASING AC	GENT

### **CERTIFICATION & WARRANT FORM\***

This form <u>must</u> be completed and submitted with sealed proposal. Failure to do so will result in automatic rejection.

Any and all proposals shall contain a certification and warrant that they comply with all relevant and pertinent statues, laws, ordinances and regulations, in particular, but not limited to Chapter 16-Conflicts of Interest, of the Code of Ordinances of the City of Warwick. Any proven violation of this warranty and representation by a bidder at the time of the proposal or during the course of the contract, included, but not limited to negligent acts, either directly or indirectly through agents and/or sub-contractors, shall render the bidder's contract terminated and the bidder shall be required to reimburse the City for any and all costs incurred by the City, including reasonable attorney fees, to prosecute and/or enforce this provision.

Signature	 Date
Company Name	
Address	
Address	

\*This form cannot be altered in any way

#### CITY OF WARWICK

#### NOTICE TO BIDDERS

#### RFP #2017-199 Health and Dental Insurance Consultant

Specifications are available in the Purchasing Division, Warwick City Hall, Through December 19th 8:30 AM until 4:30 PM on or after December 7, 2016.

Sealed proposals will be received by the Purchasing Division, Warwick City Hall, 3275 Post Road, Warwick, Rhode Island 02886 up until 11:00 AM, December 19, 2016. The proposals will be opened publicly commencing at 11:00 AM on the same day in the Lower Level Conference Room, Warwick City Hall.

If you received this document from our homepage or from a source other than the City of Warwick Purchasing Division, please check with our office prior to submitting your bid to ensure that you have a complete package. The Purchasing Division cannot be responsible to provide addenda if we do not have you on record as a plan holder.

Proposals received prior to the time of the opening will be securely kept, unopened. No responsibility will be attached to an officer or person for the premature opening of a proposal not properly addressed and identified. No proposals shall be accepted via facsimile or email.

The opening of proposals shall be in the order established by the posted agenda and the agenda shall continue uninterrupted until completion.

Once an item has been reached and any proposals on that item has been opened, no other proposals on that item will be accepted and any such proposal shall be deemed late.

The contractor will not discriminate against any employee or applicant for employment because of physical or mental handicap for any position for which the employee or applicant is qualified and that in the event of non-compliance the City may declare the contractor in breach and take any necessary legal recourse including termination or cancellation of the contract.

A bidder filing a proposal thereby certifies that no officer, agent, or employee of the City has a pecuniary interest in the proposal or has participated in contract negotiations on the part of the City, that the proposal is made in good faith without fraud, collusion, or connection of any kind with any other bidder for the same call for proposals, and that the bidder is competing solely in his own behalf without connection with, or obligation to, any undisclosed person or firm.

All proposals should be submitted with one (1) original and one (1) copy in a sealed envelope, which should read: *YOUR COMPANY NAME* plainly marked on the exterior of the envelope as well as "RFP #2017-199 Health and Dental Insurance Consultant"

Should you have any questions, please contact Jean Bouchard, Personnel Director, 3275 Post Rd. Annex, Warwick, RI at 401-738-2000, extension 6246.

All proposals should be written in ink or typed. If there is a correction with whiteout, the bidder must initial the change.

Any deviation from the specifications must be noted in writing and attached as part of the bid proposal. The bidder shall indicate the item or part with the deviation and indicate how the proposal will deviate from specifications.

When a bid is awarded to a corporation, limited liability company or other legal entity, prior to commencing work under the awarded bid, that corporation, company or legal entity may be required to provide to the Purchasing Agent a Certificate of Good Standing from <u>The Rhode Island Secretary of State</u> dated no more than thirty (30) days prior to the date upon which the bid award was made. Please note that no other State's Certificate of Good Standing will be accepted.

The successful bidder will provide said required Certificate of Good Standing within ten (10) calendar days after notification of award or the City reserves the right to rescind said award.

Failure to provide adequate documentation within the specified duration of time as set forth is a material breach of contract and grounds for termination of the contract.

The IRS Form W-9 attached should be completed and submitted with the proposal if the bidder falls under IRS requirements to file this form.

The City is exempt from the payment of the Rhode Island Sales Tax under the 1956 General Laws of the State of Rhode Island, 44-18-30, Paragraph I, as amended.

The contractor must carry sufficient liability insurance and agree to indemnify the city against all claims of any nature, which might arise as a result of his operations or conduct of work.

The Purchasing Agent reserves the right to reject any and all proposals, to waive any minor deviations or informalities in the proposals received, and to accept the proposal deemed most favorable to the interest of the City.

The City reserves the right to terminate the contract or any part of the contract in the best interests of the City, upon 30-day notice to the contractor. The City shall incur no liability for materials or services not yet ordered if it terminates in the best interests of the City. If the City terminates in the interests of the City after an order for materials or services have been placed, the contractor shall be entitled to compensation upon submission of invoices and proper proof of claim, in that proportion which its services and products were satisfactorily rendered or provided, as well as expenses necessarily incurred in the performance of work up to time of termination.

No extra charges for delivery, handling or other services will be honored. All claims for damage in transit shall be the responsibility of the successful bidder. Deliveries must be made during normal working hours unless otherwise agreed upon.

All costs directly or indirectly related to the preparation of a response to this solicitation, or any presentation or communication to supplement and/or clarify any response to this solicitation which may be required or requested by the City of Warwick shall be the sole responsibility of and shall be borne by the respondent.

If the respondent is awarded a contract in accordance with this solicitation and the respondents proposal or response and if the respondent fails or refuses to satisfy fully all of the respondents obligations thereunder, the City of Warwick shall be entitled to recover from the respondent any losses, damages or costs incurred by the City as a result of such failure or refusal.

The City reserves the right to award in part or full and to increase or decrease quantities in the best interest of the City.

Any quantity reference in the proposal specifications are estimates only, and do not represent a commitment on the part of the City of Warwick to any level of billing activity. It is understood and agreed that the agreement shall cover the actual quantities ordered during the contract period.

The City reserves the right to rescind award for non-compliance to proposal specifications.

The successful bidder must adhere to all City, State and Federal Laws, where applicable.

## **Health and Dental Insurance Consultant**

#### SCOPE OF SERVICES

### 1.1. Scope of Services

The Respondents ultimately selected through this RFP will be responsible for assisting the City in selecting health and dental insurance providers that would best serve the City's needs in a cost-effective manner and which would comport with the coverage requirements provided for in the City's various collective bargaining agreements it has with its employees, by performing the following tasks:

- A. Analyzing and evaluating all proposals in connection with health and dental insurance procurement and making a final recommendation to the City Administration and the City Council.
- B. Recommending and negotiating with various third parties to procure health and dental insurance coverage, prescription drug coverage, vision coverage and Medicare Supplement coverage.
- C. Preparation of a report and meeting with the City Administration and City Council.
- D. Fifteen (15) original copies of the report.

#### **FEES**

#### 2.1 Bid Proposal Fees

Respondents shall submit a comprehensive cost proposal that would include all of the above services. If there are any additional fees required above the cost proposal as submitted, Responders must list those fees separately as well as the estimated cost of such additional fees.

#### **TERM**

## 3.1. Term

The term of the City's insurance consultant contract will begin at time of award up to the selection and final approval of the Health and Dental Insurance Carriers by City Council. The City's policy year with respect to health, vision and prescription drug insurance and dental coverage begins on July 1<sup>st</sup> annually (note: some Medicare Supplement plans have a plan year that commences on January 1<sup>st</sup>). It is expected that the City will be seeking proposals from health and dental insurance carriers with terms of one - three years. City's current Health and Dental Insurance contracts expire on June 30, 2017.

#### **SCHEDULE**

## **4.1 Timetable for Completion of Work Products**

The City intends to present a recommendation for health insurance and dental carrier proposals to the City Council by May 1, 2017. To meet this schedule, the consultant must deliver an acceptable recommendation for group health and dental insurance providers to the City no later than early-April, 2017.

## SUBMISSION REQUIREMENTS

### **5.1 General Requirements**

All bidders must adhere to the Purchasing Division requirements for proposal submissions as listed below. Failure to do so may adversely affect a bidder from consideration.

- (a) A letter of transmittal indicating that the proposal is valid for at least 60 days from the date of submission.
- (b) A statement acknowledging that all the information contained in the proposal is factual and accurate.
- (c) A statement indicating that the individual submitting the proposal has the authority to bind the firm to all of the provisions contained in this RFP and to the firm's corresponding proposal.
- (d) A completed chart of the costs associated with the proposal as provided for under paragraph 8.1 and an additional sheet attached to the proposal containing additional fees, if any.

#### **QUALIFICATIONS AND STABILITY OF THE FIRM**

## 6.1 Qualifications – Experience and Stability of the Firm

The Responding firm must have a minimum of 15 years' experience in health and dental insurance consulting, and at least 10 years experience in consulting for a minimum of 3 other Rhode Island municipalities. Responders must provide a list of other municipalities in the state of Rhode Island for whom they have performed similar services.

## <u>6.2 Qualifications – Experience of the Consultants</u>

The principal individual consultants who would be assigned to handle the City's needs must have at least 10 years of experience as a health and dental insurance consultant with a minimum of 5 years of experience with Rhode Island municipalities. Responders must provide resumes of the principal individual consultants who would be assigned to the City of Warwick. These individuals should provide a listing of other engagements where services of the kind sought in this RFP were performed. Such listing should also provide the names of contact persons who supervised such engagements.

### **6.3 Other Qualifications**

The City will also base its selection upon other factors, including, but not limited to, the Responders knowledge and technical competence, ability to complete the work in a timely manner, and its understanding of the work required.

#### **6.4 Sub-contractors**

If a Respondent intends to utilize a sub-contractor to perform some of the work under this RFP, such fact must be revealed in the response along with the name of the firm of the intended subcontractor.

## EVALUATION, REVIEW, SELECTION AND AWARD PROCESS

## 7.1 Evaluation of Responders

The weight given in evaluating Responders shall be as follows:

Stability of the Firm —	20%
Experience of the Principals assigned to Warwick —	20%
Other Qualifications —	20%
Cost —	40%

### 7.2 Review and Evaluation

An individual or a committee will be assigned to review and evaluate all RFPs submitted. Said individual or committee shall make a recommendation to the City Council based upon the evaluation criteria set forth herein.

### 7.3 Selection

The City will make the selection of the successful bidder based upon what best meets the needs of the City. The City also reserves the right to reject all proposals.

### 7.4 Award

The successful bidder will be notified within 10 days of the date that such proposal is approved by the City Council.

## COST OF THE PROPOSAL

## **8.1 Costs**

Responders shall use the following chart to present the costs of their proposal. Please attach additional information if needed for pricing.

Cost for this services as outlined in this	
RFP (Section II)	
Any Additional Costs	
Total Cost	

## 9.1 Inquiries

Respondents with questions concerning this RFP should contact Jean Bouchard, Personnel Director, at (401) 738-2000, extension 6246.

### CITY OF WARWICK

### PROPOSAL AND CONTRACT FORM

TITLE OF SPECIFICATION: RFP #2017-199\_ Health and Dental Insurance Consultant

#### I. PROPOSAL:

WHEREAS, the CITY OF WARWICK has duly asked for proposals for performance of services and/or supply of goods in accordance with the above-indicated specifications.

The person or entity below does irrevocably offer to perform the services and/or furnish the goods in accordance with the specifications, which are hereby incorporated by reference in exchange for the proposal price below;

This offer shall remain open and irrevocable until the CITY OF WARWICK has accepted this proposal or another proposal on the specifications or abandoned the project.

The bidder agrees that acceptance below by the CITY OF WARWICK shall transform the proposal into a contract. This proposal and contract shall be secured by Bonds, if required by the specifications.

**Pricing as Submitted**