

Financial Affairs
Richard H. Hinds, Chief Financial Officer

SUBJECT: REQUEST FOR AUTHORIZATION TO RELEASE REQUEST FOR PROPOSAL (RFP) #094-BB10, CONSULTING SERVICES, EMPLOYEE BENEFIT PROGRAM

At the Board meeting of June 20, 2001, the Board authorized the Superintendent to begin work on a Request For Proposal (RFP) for fringe benefits consulting services to be brought back to the Board for approval prior to distribution, with a contract effective date of July 1, 2002. Staff has created RFP# 094-BB10, Consulting Services, Employee Benefit Program, which is attached as part of this agenda item, to solicit proposals from prospective firms to provide consulting services for an initial three year period, with the ability to renew the contract for two additional one-year periods.

Pursuant to School Board Rule 6Gx13- 3F-1.022, Professional Service Contracts for Insurance or Risk Management Programs - Policy, an Ad-Hoc Insurance Committee will review received proposals, and make recommendations which will be taken to the Board at a future Board meeting. The Ad-Hoc Insurance Committee will consist of the following individuals:

School Board Member
Chief Financial Officer, Financial Affairs
Chief of Staff
Chief Personnel Officer
Assistant Superintendent, Office of Procurement Management
Administrative Director, Office of Risk and Benefits Management
Director, Business Development and Assistance
Risk Manager, Miami-Dade County

Additionally, a representative from the Board Attorney's Office will serve as a resource person to the Ad-Hoc Committee.

RECOMMENDED: That The School Board of Miami-Dade County, Florida:

1. authorize the Superintendent to issue Request For Proposal (RFP) #094-BB10, Consulting Services, Employee Benefit Program;
2. approve the Ad-Hoc Committee; and
3. appoint a School Board Member to serve on the Ad-Hoc Committee.

RHH:sc

**REPLACEMENT
G-48**

THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA



giving our students the world

**REQUEST FOR PROPOSALS
FOR
CONSULTING SERVICES, EMPLOYEE BENEFIT PROGRAM**

PROPOSAL RETURN DATE: APRIL 16, 2002

RFP NUMBER: 094-BB10

MARCH, 2002

**Replacement
G-48**

Miami-Dade County Public Schools

School Board Members

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Superintendent of Schools

Mr. Merrett R. Stierheim



Miami-Dade County Public Schools
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SECTION I

INTRODUCTION AND GENERAL REQUIREMENTS

SCOPE OF REQUEST FOR PROPOSALS

The School Board of Miami-Dade County, Florida, (hereinafter referred to as "the Board"), is seeking proposals for Employee Benefit Consulting Services including, but not limited to, responding through the staff of the Office of Risk and Benefits Management to a variety of issues relating to a full spectrum of employee benefit issues. The Board currently has four different health plan choices including one PPO and three HMOs. It has a very comprehensive qualified Section 125 flexible benefits plan, which includes pre-tax and post-tax benefits including life insurance, two dental programs, vision, long term disability, short term disability, hospital income, long term care and others. Both a medical account flexible spending account (FSA) and a dependent care FSA are offered. It also administers an active Tax Sheltered Annuity 403(b) program, and a 401(k) plan administered by the third party administrator for flexible benefits.

Because of the size of the Board's programs and eligible employee base, a full complement of services will be required on this account. It has been determined that the following services will, from time to time, be sought:

Medical consulting services through a Florida licensed physician knowledgeable about local and national managed care issues, who can respond in both oral and written form to a variety of health care questions, usually requiring a rapid turn-around time limit

Legal consulting services through an attorney or law firm knowledgeable about employee benefit issues, including tax law

This service is designed to make sure that the Board's collectively bargained benefits are in compliance with all laws, rules and regulations. It will be necessary to research legal matters and sign off on legal opinions in evaluating responses. Knowledge of Florida law as it pertains to employee benefits for political subdivisions of the State is essential. Also, knowledge of Federal laws such as Health Insurance Portability and Accountability Act of 1996 (HIPAA), Consolidated Omnibus Budget Reduction Act (COBRA), as well as others, and assistance in the construction of plans to make sure that the Board is in compliance is required.

Actuarial services for routine annual reserving, analysis of GASB rules, estimating cash flow adjustments, etc. will be required for any loss sensitive programs, and any other Board-funded program, including retirement incentive programs

Auditing services for claims reviews and financial evaluations as needed

Negotiating contract renewals, including review of claims (loss) runs and the ability to provide the Board assistance in the review of vendor administrative costs

General Employee Benefit consulting requiring attendance at scheduled meetings as needed

Prior Experience in creating and reviewing Requests for Proposal (RFP) for all benefits

Experience in state of the art computer programs including web-based human resource and enrollment programs, and knowledge of electronic data interchanges (EDI), as outlined in the Federal requirements for Health Insurance Portability and Accountability Act of 1996 (HIPAA)

PROPOSAL RETURN DATE

Sealed proposals (three (3) originals and nine (9) unbound stapled copies) will be received on behalf of the Board by:

Bid Clerk
Bureau of Procurement and Materials Management, Room 352
1450 NE 2nd Avenue
Miami, FL 33132

until 2:00 P.M. on April 16, 2002. Proposals should be enclosed in packages plainly marked on the outside as "CONSULTING SERVICES, EMPLOYEE BENEFIT PROGRAM", RFP #094-BB10". **NO PROPOSAL WILL BE CONSIDERED IF NOT SUBMITTED BY THE DEADLINE AND AT THE LOCATION SPECIFIED.**

ADDENDA TO RFP

If any addenda are issued, a good faith attempt will be made to deliver a copy of each to all prospective proposers who picked up the RFP or were mailed an RFP by the Bureau of Procurement and Materials Management. However, **PRIOR TO SUBMITTING THE PROPOSAL, IT SHALL BE THE RESPONSIBILITY OF EACH PROPOSER TO CONTACT THE BUREAU OF PROCUREMENT AND MATERIALS MANAGEMENT TO DETERMINE IF ADDENDA WERE ISSUED, AND IF SO, TO OBTAIN SUCH ADDENDA FOR ATTACHMENT TO THE PROPOSAL.**

CURRENT PROGRAM DEVELOPMENT

The Board is the fourth largest public school system in the United States, comprising a county-wide territory, covering approximately 2,100 square miles, with 370,00 full-time students. Total full and part time employees number approximately 47,000.

The Office of Risk and Benefits Management is responsible for all aspects of the Board's fringe benefits program which includes the administration of the life, health, and flexible benefits for active employees, retirees, their dependents, and employees on leave of absence. The Board's current consultant for its Fringe Benefits program is William M. Mercer, Inc., Atlanta, Georgia. That current contract which has been in place 1996, expires July 1, 2002.

ADDITIONAL INFORMATION

Requests for additional information should be in writing and addressed to:

Mr. Scott B. Clark, Administrative Director
Office of Risk and Benefits Management
1500 Biscayne Blvd., Room 127
Miami, FL 33132 (305) 995-7155 telephone and (305) 995-7170 FAX

INFORMATION TO BE INCLUDED IN THE SUBMITTED PROPOSAL:

1. Number of copies: Submit three (3) original and nine (9) unbound stapled copies of the proposal
2. Title Page: Show the RFP subject and number, tax identification number, name of contact person(s) and the date submitted
3. Proposal Format: Please consecutively number each page of proposal, and if additional supplemental information is included, have it reference the appropriate page.

AUTHORIZED PROPOSERS

The Authorized Signature on the proposal must be made by an officer of the Corporation if the Proposer is a corporation, by a partner if the firm is a partnership, or by the proprietor, if the firm is a sole proprietorship. Proposals shall clearly indicate the legal name, address and telephone number of the Proposer (corporation, firm, partnership, individual). Proposals shall be signed above the typed or printed name and title of the signer.

Proposers submitting proposals must be approved to do business in the State of Florida.

ANALYSIS SCHEDULE

Proposals opened at the bid opening of April 16, 2002, will be analyzed from a technical perspective by the Board's Office of Risk and Benefits Management. The technical analysis will be distributed to the Superintendent's Ad-Hoc review committee, pursuant to the provisions of School Board Rule 6Gx13- 3F-1.022, Professional Service Contracts for Insurance or Risk Management Programs – Policy, which consists of the following individuals:

Chief Financial Officer
Chief of Staff
Chief Personnel Officer
Assistant Superintendent, Office of Procurement Management
Administrative Director, Office of Risk and Benefits Management
Director, Business Development and Assistance
Risk Manager, Miami-Dade County Risk Management
Board Member
Resource Person: Board Attorney's Office

The committee will then meet to discuss their analysis and prepare a written recommendation to the Board. Committee members will be instructed to neither meet with proposers nor discuss proposals received in conjunction with the RFP.

SELECTION FACTORS (EVALUATION OF PROPOSALS)

Pursuant to Department of Education Rule 6A-1.012(11), the Board will negotiate and directly contract with the proposer or proposers whose proposal(s) is(are), in the Board's judgment, in its best interest. Among the criteria which the Board will consider in its evaluation of which proposers, if any, to enter into negotiations are as follows:

- A. Demonstration of competency and experience. This will include the analysis of the competence of the proposing firm, including technical education and training, experience in insurance funding concepts, managed care concepts, and overall employee benefit concepts including the taxation of such, the availability of adequate personnel, and the ability to have in-house personnel and resources and will all be used in the evaluation process.

For the purpose of evaluating competency and experience, the degree of relevant experience of the proposer with Florida School Boards and/or political subdivisions will be a primary factor. The ability to provide consistent medical, legal, actuarial, and auditing consulting (negotiating written contracts/RFP) directed by the lead consultant will be a plus.

The Board is especially interested in the competency and experience of the specific office and personnel that would be providing the services to the Board.

- B. Demonstrated ability to work with both labor and management. Fringe benefit programs are developed through a joint committee of labor and management called the Fringe Benefits Council. Consultant recommendations must be balanced, taking into account consumer needs and fiscal constraints.
- C. Geographic proximity. Consideration will generally include the location of the local servicing office, who will be assigned to the local office and the anticipated travel time and expense costs.

- D. Extent to which minority and women business enterprise or individuals will participate in providing of services. Proposers are strongly encouraged to seek out minorities and women business enterprise including the formation of joint ventures and subcontracting.
- E. Extent to which minorities and women are utilized in the proposer's workforce
See Exhibit A
- F. Projected Cost. Monthly payment of billables is anticipated. Special projects may be requested by the Board on a flat fee basis, to be negotiated. The Board will also consider the specific hourly rates and any other basis for remuneration and any maximum feature available. Any services provided by the consultant and/or its sub-contractors will be billed through the consultant at rates stipulated in the proposal. The Board will pay all consultant fees to the Board's consultant with the consultant responsible for paying sub-contractors.

AFFIRMATIVE ACTION REQUIREMENTS AND M/WBE PARTICIPATION

- A. Equal Employment Opportunity:

It is the policy of the Board that no person will be denied access, employment, training, or promotion on the basis of gender, race, color, religion, ethnic or national origin, political beliefs, marital status, age, sexual orientation, social and family background, linguistic preference, or disability, and that merit principles will be followed.

Each firm shall be required to indicate its equal employment policy and provide a detailed breakdown by ethnicity, gender and occupational categories of its work force. See Exhibit A Affirmative Action Employment Breakdown.

- B. Minority/Women Business Enterprise (M/WBE) Participation:

The Board has an active Minority/Women Business Enterprise (M/WBE) Program, to increase contracting opportunities for M/WBEs. In keeping with this policy, if a minority firm, which is Woman or African American-owned and operated, is to perform a scope of work, provide documentation to substantiate the M/WBE's and it's staff's experience in providing this type of service. All M/WBE's must be certified by the Division of Business Development and Assistance, prior to contract award. See Exhibit B – M/WBE Certification Application.

- C. Quarterly reports documenting efforts undertaken by the proposer to maintain the stipulated M/WBE participation will be submitted quarterly and shall include each M/WBE's name, contact person, and payments thereto for the quarter. The reports shall be submitted to the Director, Division of Business Development and Assistance, 1450 N.E. Second Avenue, Room 456, Miami, Florida 33132.

OBJECTIONS TO REQUEST FOR PROPOSALS

Objections to this RFP must be filed in writing, sent by certified mail, and must be received by the Office of Risk and Benefits Management of the School Board, no later than 2:00 p.m. on March 22, 2002.

MINIMUM QUALIFICATIONS

The following are the minimum qualifications for consideration by the Board. Proposers (hereinafter called "Consultant") not meeting the following qualifications as of the due date for proposals will not be considered:

- A. Florida Licenses: The Consultant's firm and personnel who will be performing services on behalf of the Consultant for the Board are to be properly licensed in the State of Florida.
- B. No Sale of Insurance: The Consultant shall not be engaged in any way in the sale or placement of insurance coverages as an agent or broker. The consultant shall not participate in commissions or other fees from any insurance company, HMO, PPO, agent or broker, nor accept any remuneration other than directly from its clients.
- C. No Third Party Administration Service: The Consultant shall not be engaged in any way in providing third party administrative services, including but not limited to, claims administration, medical management, etc.
- D. Experience with Florida Public School Programs: The lead consultant to be assigned to the Board's account, must have had substantial first-hand experience in providing consulting services to one or more Florida School Boards and/or political subdivisions with respect to the design, implementation and operation of minimum premium, self-funded and/or fully insured group employee benefit programs. It is anticipated that the lead consultant will identify a specific project team for this contract, with members of the project team under the direction of the lead consultant, and the team to be comprised of consultants from no more than two company locations.
- E. Experience with Florida Governmental Programs: The degree of past experience of the consultant with Florida governmental entities for benefits programs, will be a primary criteria. Consultants are to include with their proposal a listing of Florida government clients for whom the Consultant has provided insurance or risk management consulting services since 1997.

- F. Fee Structure: The proposal should include a description of the fee structure proposed by the Consultant. Each area of advice, i.e., Medical, Legal, Actuarial, etc. should have an appropriate and distinct fee schedule. It would seem appropriate for different levels of fees to apply to various levels of assigned employees; i.e., technicians at lower fees, and clerical staff at even lower fees. The Board will require that billing include a complete breakdown of costs by project, staff person, and level of fees for each billable item.

- G. Continuity of consulting arrangements is critical to the Board's programs; therefore, it is understood that if one of the lead consultants leaves the employ of the selected firm, this agreement may be canceled by the Board with 30 days notice.

SECTION II

TERMS AND CONDITIONS

DEVIATIONS FROM MODEL PROGRAM

The contract terms and conditions stipulated in the Request for Proposal are those desired by the Board and preference will be given to those proposals in full or substantial compliance therewith. However, all proposals will be considered initially. Proposers are required to submit proposals which comply with the requested programs. Proposers are cautioned that any restrictive deviations from the desired program must be clearly stated in the proposal.

CONTRACT CHANGE NOTIFICATION ENDORSEMENT

Notices from the Proposer with respect to change in terms and conditions, participation, payments and cancellation of contracts shall be sent to:

Scott B. Clark, Administrative Director
Office of Risk and Benefits Management
Miami-Dade County Public Schools
1500 Biscayne Blvd., Suite 127
Miami, Florida 33132
Telephone # (305) 995-7155
FAX # (305) 995-7170

TERMINATION ENDORSEMENT

Notwithstanding any provision in the contract to the contrary, the Proposer shall give written notice to the School District at least one-hundred eighty (180) days prior to cancellation, non-renewal, increase in fees, restriction of coverage, or modification of the contractual obligations. The Proposer may not cancel any contract in mid-contract year. Any cancellation pursuant to notice shall not be effective until the end of the current year. All amendments require mutual agreement.

The written notice of any cancellation, non-renewal, restriction of coverage or modifications of the contractual obligations of the Proposer shall be delivered by certified mail to:

Scott B. Clark, Administrative Director
Office of Risk and Benefits Management
Miami-Dade County Public Schools
1500 Biscayne Blvd., Suite 127
Miami, Florida 33132

USE OF PROPOSAL FORMS

Proposers should use the Proposal Forms provided. All appropriate blanks on the Proposal forms should be completed. Supplemental information may be attached to the Proposal Forms. Failure to properly complete the Proposal Forms may result in disallowance of consideration of the proposal.

WAIVER AND/OR REJECTION OF PROPOSALS

The Board reserves the right to waive informalities in any proposals, to reject any and all proposals in whole or in part, with or without cause, and to accept that proposal, if any, which in its judgment will be in its best interest.

SPECIMEN FORMS OR CONTRACTS

Unless specifically noted to the contrary on the proposals forms, the attachment of specimen writing(s) shall be deemed to be an offer in at least full compliance with the Request For Proposals and the Proposer expressly agrees to amend said writing(s) so that it is consistent with the Request for Proposals. That is, submission of a specimen contract shall be deemed solely an offer of supplemental terms and conditions not otherwise addressed in the RFP or a broadening of terms and conditions to the benefit of the Board beyond that required by the RFP.

NON-WARRANTY OF RFP

Due care and diligence has been exercised in the preparation of this RFP, and all information contained herein is believed to be substantially correct. However, the responsibility for determining the full extent of the exposures to risk and verification of all information herein shall rest solely with those making proposals. Neither the Board nor its representatives shall be responsible for any error or omission in the RFP, nor for the failure on the part of the proposers to determine the full extent of the exposures.

COMPLIANCE WITH LAWS, RULES AND REGULATIONS

Each proposer is responsible for full and complete compliance with all laws, rules and regulations which may be applicable to it. Failure or inability on the part of a Proposer to comply with such laws, rules and regulations shall not relieve any Proposer from its obligation to honor its proposal and to perform completely in accordance with its proposal. Should there be any conflict between the RFP and the Proposal submitted and accepted, the RFP will prevail.

PUBLIC ENTITY CRIME STATEMENT

Proposers are hereby notified about Section 287.133(2)(a), Florida Statutes, which requires that:

“a person or affiliate who has been placed on the convicted vendor list following a conviction for a public crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in s. 287,017, Florida Statutes, for CATEGORY TWO for a period of 36 months from the date of being placed on the convicted vendor list.”

IRREVOCABILITY OF PROPOSAL

In consideration of the Board's allowing the proposer to make a proposal (offer), each proposer agrees by offering a proposal (offer) that such proposal (offer) shall remain open and not subject to revocation and shall be subject to the Board's acceptance until 90 days after the date indicated in the RFP as the date the coverage would incept, if accepted by the School Board.

ACCOUNTING REQUIREMENTS

1. All accounting and invoicing correspondence must be directed to the Office of Risk and Benefits Management and must reference a Board project assigned to the firm.
2. Invoicing for copying, postage, courier, telephone and fax charges are viewed as "overhead", and should be included in the hourly rate or maximum fee. Expenses for travel, including hotel and meals, will be limited to Florida Statutes governing travel for employees/ consultants. Frequency of travel on behalf of the Board must be pre-approved by the Office of Risk and Benefits Management.
3. Invoices and Requests for Payment must be accompanied by detailed cost sheets for each project denoting professional services provided which will be developed jointly by the successful proposer and the Board.

ERASURES OR CORRECTIONS

A proposal having any erasures or corrections MUST be initialed by the proposer in INK. Proposals shall be signed in INK: all forms shall be typewritten or printed with pen and ink, or the proposal may be considered non-responsive.

PROPOSER CERTIFICATION AND IDENTIFICATION

Proposal must contain an original manual signature from an authorized representative; i.e., officer of the company. An unsigned proposal, photocopied or faxed proposal signature is considered non-responsive.

METHOD OF ACCEPTANCE

In consideration of the Board's allowing the proposer to make a proposal (offer), the proposer agrees that a contract shall be developed upon acceptance by the Board of the proposal (offer) and that no communication of such acceptance shall be required. Notwithstanding the above, the Board agrees to make a reasonable effort to communicate acceptance of the offer prior to either the effective date of the contract accepted, or the time of performance by the proposer.

INSURANCE - LIABILITY

MINIMUM INSURANCE COVERAGE

Without limiting their liability under the contract agreement, the successful Proposer shall procure and maintain at their sole expense during the life of the contract, insurance of the types and in the minimum amounts stated below:

SCHEDULE

LIMITS

Workers' Compensation

Statutory / \$500,000

Florida Statutory Coverage and Employer's Liability (including Appropriate Federal Acts)

Comprehensive General Liability

\$1 million/\$3 million

Premises - Operations

Automobile Liability

\$1 million/\$3 million

All autos - Owned, hired or Used

Professional Liability

\$1 million

Consultant must agree to maintain appropriate Professional Liability insurance with limits of coverage of no less than \$1,000,000 above a reasonable Self Insured Retention. For all applicable coverages, "The School Board of Miami-Dade County, Florida" must be named as an

additional insured for liability arising out of operations performed for the Board. Such insurance shall be written by a company or companies licensed to do business in the State of Florida with an A. M. Best rating of no less than A-. Prior to commencing any work under the contract, certification evidencing the maintenance of said insurance shall be furnished to the Board and be subject to the approval of the School Board's Office of Risk and Benefits Management. If such coverage is on a claims-made basis, Consultant must agree to maintain either through a claims-made policy or the use of an extended discovery provision, coverage for three (3) years after conclusion of all services performed under the Consultant's Agreement.

HOLD HARMLESS/INDEMNIFICATION PROVISION

The successful proposer and any subcontractors hired under this contract by the successful proposer shall hold harmless, indemnify and defend the School Board of Miami-Dade County, Florida, its members, directors, representatives, officers, employees and agents, against any claim, action, loss, damage, injury, liability, cost and expense of whatsoever kind or nature (including, but not by way of limitation, attorneys' fees and court costs) arising out of or incidental to the performance of the contract or work performed thereunder, whether or not due to or caused by the negligence of the School Board of Miami-Dade County, Florida, its members, officials, officers and employees.

TERM OF CONTRACT

The contract shall be for a period beginning July 1, 2002 for a three-year term and may, by mutual agreement between the Board and awardee, be renewable for two additional one-year terms. Renewals shall be based upon satisfactory service as may be determined in the sole discretion of the Board.

The Board may cancel the contract at any time with 30 days notice. The proposer may not cancel or amend the contract in mid-contract year without the concurrence of the Board. The proposer must give the Board 180 days notice of cancellation with the effective date of cancellation occurring at the end of the current year of the term.

SECTION III

EXHIBITS

3. **CERTIFICATIONS:** Indicate if this business shares common officers, owners, directors or management personnel with another business that has received, been denied, or had its certification revoked as an MBE/DBE/WBE or SBA 8(a) Certified Contractor. Indicate the name of the certifying authority, as well as the date and type of determination (certification/denial/revocation).

<u>Agency Name</u>	<u>Determination</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. **OWNERSHIP:**

a. Identify the proprietor, each partner, or stockholder by name, as well as his/her citizenship (c) or (r) residency status, gender, ethnic group, and percentage of ownership.

<u>Name</u>	<u>Owner/ shareholder</u>	<u>Resident or *U.S. Citizen</u>	<u>Gender</u>	<u>Ethnicity</u>	<u>% Owned</u>	<u>Years Owned</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

b. If the business is a corporation, please indicate the following:

1. The number of shares authorized: _____
2. The number shares issued: _____
3. Are there any stock option agreements? Yes _____ No _____
If yes, please provide a copy of each agreement.

5. **OPERATIONAL CONTROL:** Provide the name, title, race/ethnicity, and gender of each individual (including owners and non-owners) with the primary responsibility for the following:

	<u>Name and title</u>	<u>Race/ethnicity/ gender</u>
a. Check signing	_____	_____
	_____	_____

	Name and title	Race/ethnicity/ gender
b. Payroll signing	_____	_____
	_____	_____
c. Signing, or guaranteeing loans	_____	_____
	_____	_____
d. Acquiring lines of credit	_____	_____
	_____	_____
e. Acquiring surety bonding and insurance	_____	_____
	_____	_____
f. Purchasing major equipment/services	_____	_____
	_____	_____
g. Signing contracts/change orders/payment requisitions	_____	_____
	_____	_____
h. Estimating	_____	_____
	_____	_____
i. Qualifying the company for professional/trade license(s)	_____	_____
	_____	_____
j. Marketing/sales	_____	_____
	_____	_____
k. Hiring and firing managerial employees	_____	_____
	_____	_____
l. Hiring and firing non-management employees	_____	_____
	_____	_____
m. Supervising field/ operations	_____	_____
	_____	_____
n. Supervising office personnel	_____	_____
	_____	_____

6. **PERSONNEL:** Identify the number of individuals, including owners, that are currently employed by the business in the following areas:

Please use the following to classify women/minority persons: AM-African American male, AF-African American female, HM-Hispanic male, HF-Hispanic female, WM-Non Hispanic White male, WF-Non Hispanic White female.

	<u>Total Number of Employees</u>						
a. Management	_____	AM	AF	HM	HF	WM	WF
b. Administrative/clerical	_____						
c. Professional/technical	_____						
d. Craftsperson/laborers	_____						
e. Provide a copy of the business affirmative action statement, if one is available.							

7. **BUSINESS RELATIONSHIPS:** Provide the requested information for each of the following:

a. Bonding Company: _____
 Address: _____
 Agent name: _____ Phone number: _____
 Single Contract Limit: _____ Aggregate Limit: _____

b. Bank(s) Name(s): _____
 Branch: _____
 Contact person: _____ Phone number: _____
 Credit limit: _____

c. Identify the company's/creditors including banks and the amount of money owed to:

<u>Creditor</u>	<u>Loan Guarantor(s)</u>	<u>Address & telephone</u>	<u>Loan Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

d. Insurance company: _____
 Type of insurance: _____ Insurance limits: _____

e. List the business' three largest contracts or jobs.

<u>Contract/job type</u>	<u>Contact person</u>	<u>Telephone number</u>	<u>Contract amount</u>	<u>Bonded (Yes/No)</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

8. EQUIPMENT: List the type and value of major equipment that is owned (O) or leased (L) by the business.

<u>Equipment</u>	<u>O/L</u>	<u>Value (\$ amount)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. **M/WBE JOINT VENTURE** - Joint ventures must provide a copy of the joint venture agreement.

M/WBE CERTIFICATION APPLICATION

AFFIDAVIT

STATE OF _____:

COUNTY OF _____: SS

I hereby declare and affirm that I am the _____ (Title)
of: _____ (Firm)

That I am duly authorized to execute the foregoing M/WBE Certification Application, and that the contents of said documents are complete, true and correct to the best of my knowledge and belief. I hereby certify that the documents include all material information necessary to identify the true and lawful owners of the subject business enterprise. Further, the undersigned is notified of their responsibility to submit an updated Minority/Woman Business Enterprise Certification Application whenever a change occurs in ownership, management or control of the company. Any M/WBE applicant, certified M/WBE principal(s) and all related parties, who misrepresents the status of any concern as an M/WBE, or is a party to such misrepresentation to obtain business or contracts with the School Board under the Business Development and Assistance Program, will be suspended from doing business with the School Board for fourteen (14) months.

(Corporate Seal), if appropriate

Minority/Woman Owner's Signature

On this _____ day of _____, 20 ____, personally appeared before me, the undersigned officer authorized to administer oaths: _____ known to be the person described in the foregoing affidavit, who acknowledged that he/she executed the same in the capacity stated and for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Notary Public

My Commission Expires: _____ SEAL

M/WBE
Certification Check List

Please attach copies, not originals, of all applicable items. Incomplete applications cannot be processed, and failure to submit the documents will delay or result in termination of the application process.

Please check if documents are attached:

1. M/WBE certifications from other public agencies.
2. M/WBE Certification Application Affidavit (Page 6 of Application).
3. Miami-Dade County Public Schools Vendor Application.
4. Lease/purchase agreement for the business' facilities.
5. Current professional/business license(s).
6. Proof of citizenship or permanent resident status.
7. Resumes for owners and key personnel.
8. Lease/purchase agreements for major business equipment.
9. Most current application for bonding, if applicable.
10. Management agreement(s).
11. Loan agreement(s) or promissory note(s).
12. Birth certificate, drivers license, passport or any other document which substantiates the ethnicity/race/gender of owners, officers and directors.

***If any of the aforementioned documents are not available, please provide a written notarized statement that information is not available.**

13. Sole Proprietor - Submit all of the above items, as applicable and the following:
 - U.S. IRS 1040-C Schedule.
 - Fictitious name affidavit, if applicable.

14. Partnerships - Submit all of the above items, and the following:

- Partnership agreement(s).
- U.S. IRS 1065, with schedules.
- Profit sharing agreements.

15. Corporations - Submit all of the above items, and the following:

- Articles of Incorporation, with amendments.
- By-Laws, with amendments.
- The most current U.S. IRS Corporate Tax Return 1120 or 1120s, with all schedules.
- All issued and cancelled stock certificates (front & back).
- Minutes of the first shareholders' meeting.
- Minutes of the first board of directors' meeting.
- Minutes of meetings at which the current board of directors and officers were elected or appointed.
- Stock transfer ledger.
- Most current annual report filed with the Secretary of State.
- Profit sharing agreement(s).
- Agreements affecting management, control or rights of any stockholder(s).

16. Joint venture agreement(s).

17. Certificate(s) of insurance.

18. Sub-contractual agreement(s).

NOTE: If after filing this application, there is any significant change in the information submitted herein, you must inform the Division of Business Development and Assistance of the change, or the company may be denied certification.

Certified companies must inform the Division of Business Development and Assistance of any changes in the information contained herein, which formed the basis of certification. Failure to do so may result in denial, revocation or suspension of certification.

COMPLETE APPLICATION, INCLUDING VENDOR APPLICATION AND CATEGORY OF GOODS AND SERVICES LIST, SHOULD BE RETURNED TO:

MIAMI-DADE COUNTY PUBLIC SCHOOLS
DIVISION OF BUSINESS DEVELOPMENT AND ASSISTANCE
1450 N.E. 2ND AVENUE, ROOM 456
MIAMI, FL 33132

SECTION IV

PROPOSAL FORMAT

BACKGROUND INFORMATION

1. A. LEGAL NAME AND ADDRESS:
B. ADDRESS OF PROPOSED OFFICE IN CHARGE, IF DIFFERENT:
C. CONTACT PERSON AND POSITION FOR PROPOSAL CLARIFICATION:
PERSON: _____
POSITION: _____
TELEPHONE: _____
2. STATE WHICH: CORPORATION, PARTNERSHIP, INDIVIDUAL, JOINT VENTURE, OTHER _____
3. IF CORPORATION: DATE OF INCORPORATION:
STATE OF INCORPORATION:
IF OUT OF STATE CORPORATION CURRENTLY AUTHORIZED TO DO BUSINESS IN FLORIDA, GIVE DATE OF SUCH AUTHORIZATION: _____
4. Name and address and amount of ownership of all stockholders owning more than 10% of the company:
5. IF PARTNERSHIP: DATE OF ORGANIZATION:
NATURE OF PARTNERSHIP (GENERAL, LIMITED OR ASSOCIATION):
6. IF INDIVIDUAL: NAME AND ADDRESS OF OWNER:
7. Under what other or former names has your organization operated?
8. Provide a list of clients for which your firm has served as consultant as follows:
 - a. Separately list those clients by School Districts, Political Subdivisions, and Private Companies. Emphasis should be placed on Florida-based clients, specifying the name of the lead consultant on each.
 - b. Period during which services were provided. Limit list to clients for when services were completed after July 1, 1997.
 - c. General description of consulting services provided.

9. Identify five Florida clients listed above that the Board may contact as references with respect to the firm's work performance. For each reference include contact person's name, title, address, and phone number. Provide the period during which services were rendered and a general description of the consulting services provided.
10. State whether your firm has offices in the State of Florida and/or in Miami-Dade County. Give the location of these offices, including address and telephone numbers.
11. Identify the individual who will have overall responsibility for the proposed services. In what office location is this person based? How long has he/she been a member of your firm? How long has this person functioned in this capacity. What prior experience, if applicable, does the person have in public entity consulting?
12. Indicate whether your firm and the personnel who will be performing services on behalf of the consultant are properly licensed in the State of Florida.
13. Indicate whether your firm is engaged in any way in the sale or placement of insurance coverage.
14. Indicate whether your firm is engaged in any way in providing third administrative services.
15. Describe any litigation or regulatory action filed against your firm in the last three years, and the resolution thereof.
16. Discuss your firm's ability to ensure that all work will be done in compliance with applicable Federal, State and regulatory provisions.
17. Discuss your firm's ability to dedicate resources necessary to respond to the Board's projects.
18. Identify any officer, director, or agent who is also an employee of the Board. Disclose the name of any Board employee who owns, directly or indirectly, an interest of 5% or more in your firm or any of its branches/subsidiaries.
19. Attach sample work products. Limit to four samples.
 - Analysis of Medical Plan Proposals
 - Employee Benefits Communications
20. Attach specimen contract.
21. Attach sample monthly Billing Statement.

QUALIFICATIONS: FIRM AND PERSONNEL EXPERIENCE /EXPERTISE

1. Describe briefly your organization's structure and provide a copy of an organizational chart, showing lines of communications, responsibility, etc.
2. Provide a workforce profile of all permanent employees (listing each only once) which is accurate at the date of the submitted proposal for the office in which the lead consultant and proposal team members are located.

<u>Category</u>	<u>Number</u>	<u>Category</u>	<u>Number</u>
Senior Consultants	_____	Tax Advisors	_____
Consultants	_____	CPA's	_____
Attorneys	_____	Info. Technology	_____
Actuaries	_____	Claims Advisors	_____
Clerical	_____		

3. Provide a workforce profile of all personnel (listing each only once) who are available to provide services to the Board, regardless of location. Include personnel in 2 above.

<u>Category</u>	<u>Number</u>	<u>Category</u>	<u>Number</u>
Senior Consultants	_____	Tax Advisors	_____
Consultants	_____	CPA's	_____
Attorneys	_____	Info. Technology	_____
Actuaries	_____	Claims Advisors	_____

4. Submit resume of all key personnel that will be assigned to this contract. Only submit information on those employees that will be assigned on a regular basis to the Board's projects. Resumes should include Education, Employment History, Professional Designations, Licenses, Representative Clients.
5. Has your organization, or any officer or partner thereof, ever been party to any criminal litigation as a result of consulting services, recommendations, costs, etc?

List any citations, warnings, liquidated damages and/or penalties.

6. List major projects your organization has in progress. It is not necessary to give clients names; however identify type of industry /business.

PROPOSAL FORM

STAFF QUALIFICATIONS

The following individual will be the lead consultant for professional matters:

NAME OF INDIVIDUAL

OFFICE ADDRESS

In addition to the above lead consultant, indicate in the following space, the names of those associates likely to be actively involved in the providing of professional services to the Board and the city in which they are located:

MINIMUM INSURANCE COVERAGE

Will the firm maintain a minimum of \$1,000,000 of Professional Liability insurance at all times during which your firm will be providing services to the Board under the following conditions: Consultant must agree to maintain appropriate Professional Liability insurance with limits of coverage of no less than \$1,000,000 above a reasonable Self Insured Retention. For all applicable coverages, "The School Board of Miami-Dade County, Florida, its employees and agents" must be named as an additional insured for liability arising out of operations performed for the Board. Such insurance shall be written by a company or companies licensed to do business in the State of Florida with an A. M. Best rating of no less than A-. Prior to commencing any work under the contract, certification evidencing the maintenance of said insurance shall be furnished to the Board and be subject to the approval of the School Board's Office of Risk and Benefits Management. If such coverage is on a claims-made basis, Consultant must agree to maintain either through a claims-made policy or the use of an extended discovery provision, coverage for three (3) years after conclusion of all services performed under the Consultant's Agreement?

_____ YES

_____ NO

PROPOSAL FORM

FEE STRUCTURE

Provide in the following space, the proposed fee structure offered by your firm. Include the hourly rates which will apply to the personnel listed in STAFF QUALIFICATIONS. Address any maximum feature available. Fees for all services must be addressed.

A. Provide fees with expenses in addition to hourly rates, subject to Florida Statutes.

Lead Consultant	\$ _____
Senior Consultant	\$ _____
Consultant	\$ _____
Fellow Actuary	\$ _____
Associate Actuary	\$ _____
Medical Consultant (Florida licensed physician)	\$ _____
Legal Consultant (Florida licenses attorney)	\$ _____
Clerical	\$ _____

B. Will your firm offer a not-to-exceed cost including expenses on a defined project basis?
_____ YES _____ NO

C. Are you willing to provide rate guarantees?
_____ YES _____ NO

EMPLOYMENT BREAKDOWN

Each proposer should either attach a breakdown of applicable employment categories complete the page listed as "Exhibit A."

The School Board of Miami-Dade County, Florida, adheres to a policy of nondiscrimination in employment and educational programs/activities and strives affirmatively to provide equal opportunity for all as required by:

Title VI of the Civil Rights Act of 1964 - prohibits discrimination on the basis of race, color, religion, or national origin.

Title VII of the Civil Rights Act of 1964, as amended - prohibits discrimination in employment on the basis of race, color, religion, gender, or national origin.

Title IX of the Education Amendments of 1972 - prohibits discrimination on the basis of gender.

Age Discrimination in Employment Act of 1967 (ADEA), as amended - prohibits discrimination on the basis of age with respect to individuals who are at least 40.

The Equal Pay Act of 1963, as amended - prohibits sex discrimination in payment of wages to women and men performing substantially equal work in the same establishment.

Section 504 of the Rehabilitation Act of 1973 - prohibits discrimination against the disabled.

Americans with Disabilities Act of 1990 (ADA) - prohibits discrimination against individuals with disabilities in employment, public service, public accommodations, and telecommunications.

The Family and Medical Leave Act of 1993 (FMLA) - requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to "eligible" employees for certain family and medical reasons.

The Pregnancy Discrimination Act of 1978 - prohibits discrimination in employment on the basis of pregnancy, childbirth, or related medical conditions.

Florida Educational Equity Act (FEEA) - prohibits discrimination on the basis of race, gender, national origin, marital status, or handicap against a student or employee.

Florida Civil Rights Act of 1992 - secures for all individuals within the state freedom from discrimination because of race, color, religion, sex, national origin, age, handicap, or marital status.

School Board Rules 6Gx13- 4A-1.01, 6Gx13- 4A-1.32, and 6Gx13- 5D-1.10 - prohibit harassment and/or discrimination against a student or employee on the basis of gender, race, color, religion, ethnic or national origin, political beliefs, marital status, age, sexual orientation, social and family background, linguistic preference, pregnancy, or disability.

Veterans are provided re-employment rights in accordance with P.L. 93-508 (Federal Law) and Section 295.07 (Florida Statutes), which stipulate categorical preferences for employment.

REVISED 8/1/01