



SEDGWICK COUNTY, KANSAS
FINANCE DEPARTMENT
DIVISION OF PURCHASING
525 N. Main, Suite 823 ~ Wichita, KS 67203
Phone: 316 660-7255 Fax: 316-383-7055
<http://www.sedgwickcounty.org/finance/purchasing.asp>

REQUEST FOR PROPOSAL
#17-0019
COBRA/RETIREE COVERAGE CONTINUATION ADMINISTRATION

March 24, 2017

Sedgwick County, Kansas (hereinafter referred to as “county”) is seeking a firm or firms to provide COBRA/Retiree Coverage Continuation Administration. If your firm is interested in submitting a response, please do so in accordance with the instructions contained within the attached Request for Proposal. Responses are due no later than 1:45pm CDT, April 25, 2017.

All contact concerning this solicitation shall be made through the Division of Purchasing. Proposers shall not contact county employees, department heads, using agencies, evaluation committee members or elected officials with questions or any other concerns about the solicitation. Questions, clarifications and concerns shall be submitted to the Division of Purchasing in writing. Failure to comply with these guidelines may disqualify the Proposer’s response.

Sincerely,

Kara Kingsley
Buyer

Table of Contents

- I. [About this Document](#)
- II. [Background](#)
- III. [Project Objectives](#)
- IV. [Submittals](#)
- V. [Scope of Work](#)
- VI. [Sedgwick County's Responsibilities](#)
- VII. [Proposal Terms](#)
 - A. [Questions and Contact Information](#)
 - B. [Minimum Firm Qualifications](#)
 - C. [Evaluation Criteria](#)
 - D. [Request for Proposal Timeline](#)
 - E. [Contract Period and Payment Terms](#)
 - F. [Insurance Requirements](#)
 - G. [Indemnification](#)
 - H. [Confidential Matters and Data Ownership](#)
 - I. [Proposal Conditions](#)
- VIII. [Required Response Content](#)
- IX. [Questionnaire](#)
- X. [Response Form](#)

I. About this Document

This document is a Request for Proposal. It differs from a Request for Bid or Quotation in that the county is seeking a solution, as described on the cover page and in the following Background Information section, not a bid or quotation meeting firm specifications for the lowest price. As such, the lowest price proposed will not guarantee an award recommendation. As defined in Charter Resolution No. 65, Competitive Sealed Proposals will be evaluated based upon criteria formulated around the most important features of the product(s) and/or service(s), of which quality, testing, references, service, availability or capability, may be overriding factors, and price may not be determinative in the issuance of a contract or award. The proposal evaluation criteria should be viewed as standards that measure how well a vendor's approach meets the desired requirements and needs of the County. Criteria that will be used and considered in evaluation for award are set forth in this document. The county will thoroughly review all proposals received. The county will also utilize its best judgment when determining whether to schedule a pre-proposal conference, before proposals are accepted, or meetings with vendors, after receipt of all proposals. A Purchase Order/Contract will be awarded to a qualified vendor submitting the best proposal. **Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service(s) and/or product(s) which best meets its required needs, quality levels and budget constraints.**

The nature of this work is for a public entity and will require the expenditure of public funds and/or use of public facilities, therefore the successful proposer will understand that portions (potentially all) of their proposal may become public record at any time after receipt of proposals. Proposal responses, purchase orders and final contracts are subject to public disclosure after award. All confidential or proprietary information should be clearly denoted in proposal responses and responders should understand this information will be considered prior to release, however no guarantee is made that information will be withheld from public view.

II. Background

Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas' 105 counties with a population estimated at more than 508,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas' counties. Organizationally, the county is a Commission/Manager entity, employs nearly 2,800 persons, and hosts or provides a full range of municipal services, e.g. – public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

Sedgwick County, through the Department of Human Resources, administers employee enrollment in the County's benefits program consisting of Medical/Pharmacy, Flexible Spending, Dental, Vision and Life. Sedgwick County also offers additional benefits such as COBRA/Retiree continued health benefits.

Upon separation of employment, retirement, or other circumstances resulting in the loss of benefit coverage, employees and/or their dependents may be extended the right for continuation of benefit coverage under the Federal Laws known as COBRA and under Kansas State Laws known as KPERS/KP&F Retired Employee Benefits. In 2016 Sedgwick County had an average of 10 COBRA participants and 110 Retiree participants each month. Benefits under administration as outlined in this solicitation document will include Medical, Prescription, Vision, Dental and Flexible Spending Accounts. Sedgwick County is currently under contract with UnitedHealthcare until December 2017 (with two-one year renewal options) for Medical and Prescription, Delta Dental until December 2017 for Dental, Vision Service Plan until December 2017 for Vision and ASI Flex until December 2017.

III. Project Objectives

Sedgwick County, Kansas (hereinafter referred to as "county") is seeking a firm or firms to provide COBRA and Retiree Administration Benefits. The following objectives have been identified for this contract:

- A. Acquire COBRA/Retiree coverage continuation administration meeting the parameters, conditions and mandatory requirements presented in the document.
- B. Establish contract pricing, starting January 1, 2018, with the vendor that has the best proven "track-record" in performance, service and customer satisfaction.
- C. Acquire COBRA/Retiree coverage continuation administration with the most advantageous overall cost to the County.

IV. Submittals

Carefully review this Request for Proposal. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) original **AND** one (1) electronic copy (.PDF/Word supplied on a flash drive) of the entire document with any supplementary materials to:

Kara Kingsley
Sedgwick County Division of Purchasing
525 N. Main, Suite 823
Wichita, KS 67203

SUBMITTALS are due **NO LATER THAN 1:45 p.m. CDT, TUESDAY, April 25, 2017**. Responses must be sealed and marked on the lower left-hand corner with the firm name and address, proposal number, and proposal due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Proposal responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m. CDT, on the due date. No information other than the respondent's name will be disclosed at bid opening.

V. Scope of Work

This section lists the criteria to be considered in evaluating the ability of vendors interested in providing the service specified in this solicitation document. All requirements along with the questionnaire found below must be addressed in the vendor's proposal response. The organization selected will provide the following:

- A. Assist the county in developing, designing, and installing the procedures and systems for processing requests for coverage and changes in coverage including the preparation of forms and materials necessary to implement the outsourced administration.
- B. Assist the county with communication of rates and benefits to plan participants, including assistance with rate adjustments.
- C. Have ability to electronically receive enrollment census information in a HIPAA approved interface layout.
- D. Audit monthly and reconcile carrier files and records from Sedgwick County to create an accurate "book of record." Discrepancies will be brought to the county's attention.
- E. Verify the plan participant's eligibility, identify qualified dependents, coverage's and elections and enter enrollment information into the carrier eligibility file.
- F. Publish a business hours toll free telephone number (800#) on all benefits communication for the use of plan participants, dependents, and providers.
- G. Assist the county in creation of an "FAQ" form about the eligibility rules, premium payment procedures, eligibility, and coverage rules.
- H. Review status change requests, amend eligibility records, and notify carriers.
- I. Issue electronic billing report subsequent to monthly audit and reconciliation. Report to include:
 - 1. Number of eligible plan participants, by coverage and identify if COBRA/Retiree participant
 - 2. Total premium received, by coverage
 - 3. Total premium returned to the County less total vendor administration fees
 - 4. Invoice period dates
 - 5. Description of services
- J. Secure and maintain a fidelity bond to the extent required by Section 412 of the Employee Retirement Income Security Act of 1974.
- K. Provide Certificate of Creditable Coverage to the last known address of all terminated employees and to any participant upon terminated COBRA/Retiree coverage.
- L. Provide at no cost and in a timely manner all data and written or recorded material pertaining to this contract.
- M. Prepare packets to be issued during open enrollment to each active COBRA/Retiree participant and qualified beneficiary. The packet will contain plan descriptions, summaries of changes in the plan, new enrollment materials, monthly plan rates, and election forms and instructions to enroll in the upcoming plan year.
- N. Provide complete plan administration, accounting, data processing, and cost control and quality assurance.
- O. Provide unbiased review of appeals made by employee/dependents.
- P. Provide forms, procedures and training to administrative staff of the county to submit the required forms/files to

#17-0019

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the vendor to perform the duties outlined in this document.

- Q. Upon receipt of notice of eligibility the vendor shall send written notice to all qualified beneficiaries of the availability of COBRA Continuation Coverage and/or Sedgwick County Retiree health benefits. The COBRA letter must be sent to all beneficiaries, including those living in separate households, and must contain an explanation of coverage's available and rate.
- R. The rate of coverage must be inclusive of all costs of the vendor, i.e. advertised as 100% of monthly premium plus 2% administration fee.
- S. Send written notice of termination no later than 45 days after the date of election for the initial premium or no later than 30 days after the premium date for subsequent premiums.
- T. Provide an approved initial notice to all newly eligible participants according to federal government regulations.
- U. Provide to all participants any health reform mandates or rules from the Patient Protection and Affordable Care Act.
- V. Provide post employee audit reports for Government Accounting and Standards Board (GASB 45) as requested by the county.
- W. As deemed necessary by vendor and the County, send notices to participants of changes in laws.
- X. Send all government filings to active COBRA/Retiree participants, including but not limited to: forms related to Health Care Reform and proof of coverage and Medicare Part D notice.

VI. Sedgwick County's Responsibility

- Provide information, as legally allowed, in possession of the county, which relates to the County's requirements or which is relevant to this project.
- Notify vendor weekly, if applicable, through electronically encrypted files, the full name, address, and other identifying information when a covered employee or dependent loses coverage which may require the issuance of a COBRA Qualifying Event Notice or Retiree notice.
- Notify vendor of any plan changes including premium rates and benefit coverage's.
- Designate a person to act as the County Contract Manager with respect to the work to be performed under this contract.
- Remit monthly payment in ACH format.

VII. Proposal Terms

A. Questions and Contact Information

Any questions regarding this document must be submitted in writing to Kara Kingsley at kara.kingsley@sedgwick.gov by 5:00 p.m. CDT Tuesday, April 5, 2017. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at www.sedgwickcounty.org/finance/purchasing.asp, under view current RFQs and RFPs; to the right of the RFP number by 5:00 p.m. CDT Friday, April 7, 2017. Firms are responsible for checking the website and acknowledging any addenda on their proposal response form.

B. Minimum Qualifications

This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) and/or product(s) specified in this Request for Proposal. Firms must meet or exceed these qualifications to be considered for award. Any exceptions to the requirements listed should be clearly detailed in proposer's response. Proposers shall:

1. Have an expertise understanding of industry standards and best practices.
2. Have experience in managing projects of comparable size and complexity to that being proposed.
3. Have knowledge of and comply with all currently applicable, and as they become enacted during the contract term, federal, state and local laws, statutes, ordinances, rules and regulations. All laws of the State of Kansas, whether substantive or procedural, shall apply to the contract, and all statutory, charter, and ordinance provisions that are applicable to public contracts in the county shall be followed with respect to the contract.

C. [Evaluation Criteria](#)

The selection process will be based on the responses to this RFP and live demonstrations or interviews, if required. All costs incurred in the preparation of this proposal shall be the responsibility of the firm making the proposals. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service which best meets its required needs, quality levels and budget constraints. County staff will judge each response as determined by the scoring criteria below:

Component	Points
1. Meeting or exceeding all solicitation conditions and instructions as outlined herein to include clarity, completeness, and comprehensiveness of the response	25
2. Proven ability to provide high quality service	25
3. Qualifications and expertise	25
4. The most advantageous proposal as determined by the County	25
Total Points	100

Any final negotiations for services, terms and conditions will be based, in part, on the firm’s method of providing the service and the fee schedule achieved through discussions and agreement with the county’s review committee. The county is under no obligation to accept the lowest priced proposal and reserves the right to further negotiate services and costs that are proposed. The county also reserves the sole right to recommend for award the proposal and plan that it deems to be in its best interest.

The county reserves the right to reject all proposals. All proposals, including supporting documentation shall become the property of Sedgwick County. All costs incurred in the preparation of this proposal shall be the responsibility of the firm making the proposals. Sedgwick County reserves the right to select, and subsequently recommend for award, the proposed service which best meets its required needs, quality levels and budget constraints.

D. [Request for Proposal Timeline](#)

The following dates are provided for information purposes and are subject to change without notice. Contact the Division of Purchasing at (316) 660-7255 to confirm any and all dates.

Distribution of Request for Proposal to interested parties	March 24, 2017
Questions and clarifications submitted in writing by 5:00 p.m. CDT	April 5, 2017
Addendum Issued	April 7, 2017
Sealed Proposal due before 1:45pm CDT	April 25, 2017
Evaluation Period	April 25 – May 31, 2017
Board of Bids and Contracts Recommendation	June 8, 2017
Board of County Commission Award	June 14, 2017

E. [Contract Period and Payment Terms](#)

A contractual period will begin January 1, 2018, following Board of County Commissioners (BoCC) approval of the successful firm(s) and continue for a period of two (2) years with three (3) one (1) year options to renew.

It is the intent of Sedgwick County to lock the terms, conditions, and costs for the initial two (2) year period. Each vendor should clearly delineate exception if an escalation/de-escalation approach is being proposed.

Either party may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions

http://www.sedgwickcounty.org/purchasing/payment_and_invoice_provisions.pdf

F. Insurance Requirements

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. Contractor shall furnish a certificate evidencing such coverage, with County listed as an additional insured, except for professional liability, workers’ compensation and employer’s liability. **Certificate shall be provided prior to award of contract.** Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after County receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas (**must be acknowledged on the bid/proposal response form**).

NOTE: If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of Contractor to require that any and all approved subcontractors meet the minimum insurance requirements. Contractor shall obtain the above referenced certificate(s) of insurance, and in accordance with this Agreement, provide copies of such certificates to County.

Workers’ Compensation:

Applicable coverage per State Statutes

Employer’s Liability Insurance: \$100,000.00

Commercial General Liability Insurance:

Each Occurrence \$500,000.00

Aggregate \$500,000.00

Personal Injury:

Each Occurrence \$500,000.00

General Aggregate \$500,000.00

Automobile Liability:

Combined single limit \$500,000.00

Professional Liability

If required

Special Risks or Circumstances:

Entity reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

G. Indemnification

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider’s performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney’s fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

H. Confidential Matters and Data Ownership

The successful proposer agrees all data, records and information, which the proposer, its agents and employees, which is the subject of this proposal, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful proposer agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data. Successful proposer agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Proposal is the property of Sedgwick County.

I. Proposal Conditions

http://www.sedgwickcounty.org/purchasing/pdf_files/Proposal%20Terms%20%20Conditions.pdf

General Contract Provisions

http://www.sedgwickcounty.org/purchasing/pdf_files/General%20Contractual%20Provisions.pdf

Mandatory Contract Provisions

http://www.sedgwickcounty.org/purchasing/pdf_files/Mandatory%20Contractual%20Provisions.pdf

Sample Contract

http://www.sedgwickcounty.org/purchasing/pdf_files/Sample%20Contract.pdf

VIII. Required Response Content

Proposals received should reflect in detail their inclusion and the degree provided. The Proposal should be organized in the following format and information sequence:

- A. Firm profile: the name of the firm, address, telephone number(s), contact person, year the firm was established, and the names of the principals of the firm.
- B. Provide a description of contractor's firm, its organization, size and nature of services available.
- C. Provide information on the contractor's background, expertise and qualifications to provide the services outlined in this RFP.
- D. Provide applicable certificates/licenses as deemed necessary by local, state and federal laws. Provide references of three current clients of similar size for whom you provide administration for voluntary benefits. Include date plan was effective, benefit plans administered, number of covered employees, name of entity/contact person and phone number.
- E. Provide references of three former clients who have terminated your services in the past two years. Provide the same information as noted above.
- F. Provide resumes of key staff working on this project. Resumes shall include background qualifications, past work experience on large projects and similar work, and a summary of the anticipated role of each on this project.
- G. Acknowledge and address in sequential order and in detail the plan/verification of ability to meet the scope of services, qualifications, conditions and stipulations as outlined in this proposal document.
- H. Provide a project plan and timeline for implementation.
- I. Provide the hours, location and staffing of customer service.
- J. Provide a bank reference statement and/or copy of the most recent, audited, annual financial statement.

#17-0019

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- K. Submit a statement disclosing any actual or potential conflicts of interest with Sedgwick County, its officers, agents and employees.
- L. Discuss any current local, state or federal (i.e. HCFA / HIPAA) violations and any ongoing litigation that may cause conflicts or affect the ability of the vendor to provide service(s) and/or product(s).
- M. List any active or pending fines, penalties or sanctions against the insurance agent, insurance agency, and/or the insurance company from any State Insurance Department during the previous three (3) years.
- N. Provide a statement discussing any current ongoing litigation, which may cause conflicts or affect the ability of the proposer to provide services.
- O. Identify any other expectations of the county not addressed in the request for proposal document.
- P. Provide any additional information relevant to expertise of the requested services that may assist the County in evaluating the proposal response.
- Q. Complete and return Questionnaire.
- R. Provide a completed Proposal Response Form.

IX. Questionnaire

In your response document, respond to all questions and requests listed below. Please precede your answer with a copy of the question. A copy of the questionnaire will be provided in WORD format for ease of completion. Please note that in the case of a discrepancy this document will prevail.

- A. Explain your process and timeline upon receipt of information identifying eligible employees.
- B. Explain your process and timeline upon receipt of information indicating a status or other change.
- C. Explain your process for communicating rate adjustments.
- D. Explain your process for monthly audit and reconciliation.
- E. Explain your process to verify eligibility.
- F. Do you currently have an “FAQ” form relaying information about the eligibility rules, premium payment procedures, etc.? If yes, please include.
- G. Do participants have on-line access to their own information?
- H. Explain your process for issuing payment to carriers; if not applicable explain your premium return process to the County.
- I. Is there a toll free number for customer service?
- J. Does an automated attendant answer the line or does an actual person handle it? What are the average hold times and rates of abandonment?
- K. Who will the County’s account dedicated customer service staff be? What is the experience level of customer service staff? What training is provided?
- L. What has been the incidence of account management turnover for the unit which will service Sedgwick County over the last two years?
- M. Where is customer service located? Indicate the City, State and Country.
- N. During what hours can participants contact customer service?
- O. Describe in detail any Performance Standards and Guarantees you will offer the County.
- P. How much authority and flexibility do customer service representatives have to resolve a question or complaint?
- Q. Do you have participant customer satisfaction surveys? Provide an example. How often are surveys done?
- R. Explain your process for appeals?
- S. Describe your approach to account management. Is there a single contact that serves as the focus for all communications, or is there a variety of contacts, each covering a specific functional responsibility?
- T. Describe how legislative and regulatory updates are provided.
- U. Describe how you will provide technical support and assist County to implement appropriate aspects of the HIPAA, GINA, and all privacy regulations.
- V. What is the likelihood of a sale of your company within the next 24 months?
- W. Have you ever been fined or otherwise punished by any State Insurance Department?
- X. What is your strategy for maintaining compliance with the changing legal environment?
- Y. If your company anticipates or plans to be acquired or to be merged with another company within the next 12 months, provide a full explanation as to when this might occur and be finalized. How will this affect your proposal for the county?

#17-0019

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Z. Explain process for informing participants of health reform mandates or rules from the Patient Protection and Affordable Care Act.

Complete the following cost table, to include all costs associated with providing administration services to the level of requirement indicated in this solicitation document. Service costs will be paid using a mixed model, to include payment from Sedgwick County in certain circumstances, as well as absorption of costs into participant’s monthly premium. Determination will be made at the sole discretion of Sedgwick County prior to commencement of service.

Service	Frequency	Cost*
Initial Setup	One time	\$
Open Enrollment Dissemination	Per packet mailed	\$
Comprehensive Initial Mailing	Per form mailed	\$
COBRA/Retiree Services	PEPM per employee per month	\$
Billing and Collection	% of premium billed	\$
HIPAA Certificate of Creditable Coverage	Each	\$
Special Programming	Per hour	\$
Mailings due to changes in law	As necessary per form/letter mailed	\$
Other -	Frequency -	\$
Other -	Frequency -	\$

*Indicate if price will escalate/de-escalate during initial two year contract period or subsequent three (3) 1-year options to renew.

X. Response Form

REQUEST FOR PROPOSAL

#17-0019

COBRA/RETIREE COVERAGE CONTINUATION ADMINISTRATION

The undersigned, on behalf of the proposer, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a proposal on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the proposer is entered; (4) they have read the complete Request for Proposal and understands all provisions; (5) if accepted by the county, this proposal is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted proposal will be their responsibility.

NAME _____

DBA/SAME _____

CONTACT _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PHONE _____ FAX _____ HOURS _____

STATE OF INCORPORATION or ORGANIZATION _____ COMPANY WEBSITE _____

ADDRESS _____ EMAIL _____

NUMBER OF LOCATIONS _____ NUMBER OF PERSONS EMPLOYED _____

TYPE OF ORGANIZATION: Public Corporation _____ Private Corporation _____ Sole Proprietorship _____

Partnership _____ Other (Describe): _____

BUSINESS MODEL: Small Business _____ Manufacturer _____ Distributor _____ Retail _____

Dealer _____ Other (Describe): _____

Not a Minority-Owned Business: _____ Minority-Owned Business: _____ (Specify Below)

___ African American (05) ___ Asian Pacific (10) ___ Subcontinent Asian (15) ___ Hispanic (20)

___ Native American (25) ___ Other (30) - Please specify _____

Not a Woman-Owned Business: _____ Woman-Owned Business: _____ (Specify Below)

___ Not Minority -Woman Owned (50) ___ African American-Woman Owned (55)

___ Asian Pacific-Woman Owned (60) ___ Subcontinent Asian-Woman Owned (65) ___ Hispanic Woman Owned (70)

___ Native American-Woman Owned (75) ___ Other – Woman Owned (80) – Please specify _____

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: _____ Yes _____ No

INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII: _____ Yes _____ No

ACKNOWLEDGE RECEIPT OF ADDENDA: All addendum(s) are posted to our RFQ/RFP web page and it is the vendor’s responsibility to check and confirm all addendum(s) related to this document by going to www.sedgwickcounty.org/finance/purchasing.asp .

NO. _____, DATED _____; NO. _____, DATED _____; NO. _____, DATED _____

In submitting a proposal, vendor acknowledges all requirements, terms, conditions, and sections of this document. Proposal submission format should be by order in which sections are listed throughout the document. All minimum and general requirements should be specifically addressed and detailed in proposer’s response. **Exceptions to any part of this document should be clearly delineated and detailed.**

Signature _____ Title _____

Print Name _____ Dated _____

#17-0019

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