



MODESTO CITY SCHOOLS

Purchasing Department

426 Locust Street

Modesto, CA 95351

(209) 574-1613

REQUEST FOR PROPOSALS

RFP NO. 20-4731

Third Party Workers' Compensation (W/C)

Administrative Services

DUE DATE:

No later than 3:00 p.m. PT on

Thursday, April 2, 2020

TABLE OF CONTENTS

IMPORTANT NOTICE TO PROPOSERS.....3

SUBMITTAL OF PROPOSALS.....4

INTRODUCTION, REQUIREMENTS, PROPOSAL CONTENT.....5-7

NON-COLLUSION AFFIDAVIT.....8

SIGNATURE PAGE.....9

PROPOSED TIMELINE

RFP Release Date	March 4, 2020
Questions/Requests for Information/ Clarification	March 18, 2020 no later than 5:00 p.m. PT Submit to mcsbids@mcs4kids.com
RFP Due Date	April 2, 2020 no later than 3:00 p.m. PT
Oral Interviews with Firms Selected from Initial Screening (if needed)	Week of April 13, 2020
Recommendation of Final Selection to Governing Board	May 4, 2020

CHECKLIST OF DOCUMENTS TO BE RETURNED WITH RFP

- Proposal: One (1) Unbound Original and Three (3) Copies
- Proposal Signature Page
- Non-Collusion Affidavit

IMPORTANT NOTICE TO ALL PROPOSERS!

It is the responsibility of each Proposer to ensure Modesto City Schools (MCS) has their correct business name and contact information on file including an email address. Any prospective Proposer who obtained RFP documents from the MCS website or from anyone other than MCS is responsible for advising MCS that they have a set of contract documents and wish to receive subsequent Addenda, if any are issued.

Please send your contact information to the Purchasing Department at mcsbids@mcs4kids.com with the subject line “**Proposer Contact Info**” and include the following information:

- RFP Number
- Firm Name
- Contact Person’s Name
- Address
- Phone Number
- Fax Number
- Email Address

The District may, during the RFP period, advise the Proposer by bulletin or addenda of additions, omissions or alterations in the specifications. All such changes shall be included in the RFP and become a part of the specifications as if originally submitted.

It is the Proposer’s sole responsibility to insure they have received any and all subsequent addenda. Addenda will be posted on the District’s website at <http://www.mcs4kids.com/district/purchasing/open-bids>.

It is the sole responsibility of each proposer to periodically check the site for any addenda. Proposers are to acknowledge receipt of any and all addenda. This shall be done by signing and returning a copy of the addendum page(s) with your proposal or acknowledging the addendum number(s) on the Proposal Signature Page.

Failure to acknowledge in writing the receipt of any addenda may result in RFP rejection. It is the Proposers’ sole responsibility to see that addenda acknowledgement requirements are met.

SUBMITTAL OF PROPOSALS

Sealed proposals must be received in the Office of the Director of Purchasing no later than 3:00 pm PT on Thursday, April 2, 2020.

Please submit one (1) unbound original plus three (3) copies of its proposal by date and time at the location specified below.

All mailed proposals shall be addressed as follows:

**RFP NO. 20-4731 THIRD PARTY W/C ADMINISTRATIVE SERVICES
DIRECTOR OF PURCHASING
MODESTO CITY SCHOOLS
426 LOCUST STREET
MODESTO CA 95351**

All envelopes shall also have stated thereon the name and address of the submitting firm.

Hand delivered courier or package delivery service shall be delivered directly to:

**MODESTO CITY SCHOOLS PURCHASING DEPARTMENT
RFP NO. 20-4731 THIRD PARTY W/C ADMINISTRATIVE SERVICES
MODESTO CITY SCHOOLS
426 LOCUST STREET
MODESTO CA 95351**

All proposals received after said time and date will be time-stamped and returned unopened to the submitter.

Modesto City Schools will not accept proposals submitted by fax or email!

Modesto City Schools will not be responsible for late or misdirected proposal submittals.

All questions and requests for information/clarification regarding this RFP must be submitted no later than 5:00 p.m. on Wednesday, March 18, 2020. Questions submitted after this deadline will not be answered.

Please direct questions and requests for information/clarification regarding this RFP to the Purchasing Department at mcsbids@mcs4kids.com.

Modesto City Schools
REQUEST FOR PROPOSALS
No. 20-4731
Third Party W/C Administrative Services

INTRODUCTION

Modesto City Schools is seeking proposals for Third Party Administrative Services of a Self-Funded Workers' Compensation Program which includes three public school entities—Modesto City Schools' Elementary and High School Districts, Stanislaus Union School District (run-off only), and Sylvan Union School District—organized as Modesto Schools' Insurance Pool (Pool), located within the City of Modesto, California.

Collectively, these entities employ approximately 4,100 employees and generate an average of 300 Workers' Compensation claims (200 medical-only cases and 100 compensable cases) per year.

This RFP is not a formal request for bids, or an offer by MCS to contract with firm(s) responding to this RFP. MCS reserves the right to reject any and all Proposals. MCS also reserves the right to amend this RFP as necessary. All materials submitted to MCS in response to this RFP shall remain the property of MCS. MCS shall not be responsible for the costs of preparing any proposal in response to the RFP.

Following receipt and review of your response to this Request for Proposal, you may be invited for an interview.

Scope of Work

In addition to adjusting all Pool's Workers' Compensation claims, the contractor shall provide all appropriate, computer-generated Workers' Compensation loss runs and reports, both on an as needed basis and on a monthly, quarterly and yearly basis. Finally, the contractor shall complete the loss information requested in the yearly, State-mandated report entitled "Public Self-Insurer's Annual Report for Joint Powers Authority and Members."

Contract Terms

The contract term is expected to begin on July 1, 2020 through June 30, 2023, with options to extend for two additional one-year periods. The contract period shall not exceed five years if the two one-year options to extend are exercised.

Requirements

The contractor must be located in the United States of America and all work must be performed in the United States of America.

Insurance

Workers’ Compensation and Employers’ Liability Insurance. Workers’ Compensation Insurance and Employers’ Liability Insurance for all of its employees performing any portion of the Services. In accordance with provisions of section 3700 of the California Labor Code, the Consultant shall be required to secure workers’ compensation coverage for its employees. If any class of employee or employees engaged in performing any portion of the services under this Agreement are not protected under the Workers’ Compensation Statute, adequate insurance coverage for the protection of any employee(s) not otherwise protected must be obtained before any of those employee(s) commence performing any portion of the Services.

Type of Coverage	Minimum Requirement
General Liability Insurance - including Bodily Injury, Personal Injury, Property Damage, Advertising Injury, and Medical Payments Each Occurrence General Aggregate	\$ 1,000,000 \$ 2,000,000
Workers Compensation	Statutory Limits
Employer’s Liability	\$ 1,000,000

NOTICE TO CALIFORNIA NONRESIDENT VENDORS

California nonresident vendors may be subject to a 7% withholding on payments over \$1,500.00 annually for performing services in California. California nonresident firms will be required to fully complete and provide the appropriate tax forms as required by the State of California Franchise Tax Board.

PROPOSAL CONTENT AND FORMAT

Firm shall submit one (1) unbound original plus three (3) copies of its proposal by date and time at the location specified above.

All questions, clarifications, and requests for information regarding this RFP must be submitted to mcsbids@mcs4kids.com no later than 5:00 pm on Wednesday, March 18, 2020. Questions submitted after this deadline will not be answered.

Your proposal must include responses to each of the following:

1. Please state what fees and costs you would charge the Pool for adjusting its Workers’ Compensation claims under your proposal. Please Note: Subrogation, when appropriate must be included without any additional charge.
2. Please state what fees and costs you would charge the Pool for providing it with the computer-generated loss runs and reports referenced above if not included in fees and costs in #1 above.

3. Please describe your experience in administering Workers' Compensation claims that arise within a public entity environment.
4. Please state why you believe you are qualified to be the Pool's Third Party Workers' Compensation Administrator.
5. Please state whether you provide loss prevention services in addition to claims management.
6. Please answer the following questions about your firm:
 - a. How long has your firm been in business?
 - b. What is the experience level of senior management, supervisors, and examiners within your entity?
 - c. Is your entity a subsidiary of another company?
 - d. Is Workers' Compensation claims management services a significant part of your entity's business, or are they secondary to other services?
 - e. How much experience does a "hands-on" examiner have in handling a typical account?
 - f. What training programs are used by your entity to increase the skill levels of examiners?
 - g. What is the average experience level of your entity's supervisory personnel?
 - h. How often are your examiners' claim files reviewed by their supervisors?
7. Please state the number of Workers' Compensation claim files that your adjusters typically carry.
8. Please describe your entity's information management system(s) resources. Also, please include specific information about your hardware, software, and personnel.
9. What steps have you undertaken to prevent any loss of data following a hardware failure?
10. What specific back-ups do you use to prevent loss of data?
11. Please describe the steps you have taken to preserve the privacy of medical information provided to you in the course of adjusting a Workers' Compensation claim.
12. Please provide copies of your company's audited, reviewed or compiled financial statements for the last three years. (PLEASE NOTE: Confidentiality of this information shall be maintained.)
13. Please provide the names, addresses, and telephone numbers of five client references. Please include specific contact person for each client. Example:

Client Reference	Address	Phone	Contact Person	Title
1.				
2.				
3.				
4.				
5.				

In accordance with Public Contract Code §7106, the following Affidavit must be executed by Proposer and submitted with proposal

“Non-Collusion Affidavit”

State of California
County of Stanislaus

_____ being first duly sworn, deposes and says that he or she is (Owner) of _____ the party making the foregoing proposal; that the proposal is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the proposal is genuine and not collusive or sham; that the proposer has not directly or indirectly induced or solicited any other proposer to put in a false or sham proposal, and has not directly or indirectly colluded, conspired, connived, or agreed with any proposer or anyone else to put in a sham proposal, or that anyone shall refrain from bidding; that the proposer has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the proposal price of the proposer or any other proposer, or to fix any overhead, profit, or cost element of the proposal price, or of that of any other proposer, or to secure any advantage against the public body awarding the contract of anyone interested in the proposed contract; that all statements contained in the proposal are true; and further, that the proposer has not, directly or indirectly, submitted his or her proposal price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, proposal depository, or to any member or agent thereof to effectuate a collusive or sham proposal."

I certify and declare under penalty of perjury under the laws of the State of California that all the foregoing information in this Non-Collusion Affidavit is true and correct.

Date: _____

Proposer's Company Name: _____

Signature: _____

Print Name: _____

Title: _____

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH YOUR PROPOSAL

**Modesto City Schools
REQUEST FOR PROPOSALS
No. 20-4731
Third Party W/C Administrative Services**

SIGNATURE PAGE

OFFER TO ENTER INTO CONTRACT

The undersigned hereby proposes to enter into a contract with Modesto City Schools and furnish the services as described in this Request for Proposals.

Signature

Typed or Printed Name

Title

Firm Name

Address

Telephone

City, State, Zip

Fax

Email

Date

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH YOUR PROPOSAL