



## LEGAL NOTICE

### REQUEST FOR PROPOSAL SEALED PROPOSAL 11-187

For

**Section 125 Third Party Administration for Medical and Dependent Care  
Reimbursement**

For

**ST. CHARLES COUNTY GOVERNMENT  
ST. CHARLES, MISSOURI**

St. Charles County is seeking bids for **Section 125 Third Party Administration for Medical and Dependent Care Reimbursement**. The County, with the consent of the vendor, shall have the option for two (2) one year extensions under the same terms and conditions. The county reserves the right to terminate the contract for any violation, by the successful bidder, of any term or condition of the contract by giving thirty (30) days written notice stating the reasons therefore and giving the party time to remedy any deficiencies.

## PROPOSAL INSTRUCTIONS

One original and two (2) signed copies of the proposal must be received in a sealed envelope plainly marked "**Sealed Proposal 11-187 for Section 125 Third Party Administration for Medical and Dependent Care Reimbursement**" with the date and time the proposal is due in the lower left corner of the envelope.

An authorized representative of the company/person submitting the proposal must sign in blue ink.

Proposals must be submitted to the St. Charles County Finance Department, 201 North Second Street Room 541 St. Charles MO 63301 prior to **10/12/2011 at 10:00 AM**.

St. Charles County reserves the right to accept and/or reject any and all proposals.

## PROPOSAL INQUIRIES

All questions or clarifications concerning this Request for Proposal must be submitted in writing via E-mail (preferred), mail or fax to:

Rick Hooker, Purchasing Manager  
St. Charles County Government  
Finance Department  
201 North Second Street  
St. Charles, Missouri 63301  
Fax: (636)949-7589  
[purchasing@sccmo.org](mailto:purchasing@sccmo.org)

- The RFP number and title shall be referenced on all correspondence.
- All questions must be received no later than **5:00 PM** on **10/05/2011**. Any question received after this deadline may not be answered.

**Responses to questions/clarifications will be placed on the County's website <http://finance.sccmo.org/finance>. Check this website frequently for updates and any addendum that are issued.**

## **Prohibited Communication**

***Unauthorized contact with any representative, other than through the procedure outlined in the section titled "Bid Inquiries", concerning this request is prohibited. Representative shall include, but not be limited to, all elected and appointed officials, and employees of St. Charles County and the Agencies within St. Charles County. Any Offeror engaging in such prohibited communications may be disqualified at the sole discretion of St. Charles County.***

## **TERMS AND CONDITIONS**

- St. Charles County reserves the right to reject any and all proposals or parts of a proposal and waive technicalities, and to adjust quantities.
- All proposals will be considered final. No additions, deletions, corrections, or adjustments will be accepted after the time of proposal opening.
- All delivery costs or charges must be included in the F.O.B. destination proposal price.
- City, County and State of Missouri Sales Tax and Federal Taxes are not applicable to sales made to St. Charles County and must be excluded.
- The contract shall be effective for the approximate twelve (12) month period from the date of the notice of award.
- The electronic version of this proposal/RFP is available upon request. The document was entered into WORD for Microsoft Windows. The Purchasing Office does not guarantee the completeness and accuracy of any information provided on the electronic version. Therefore, respondents are cautioned that the hard copy of this proposal/RFP on file in the Purchasing Office governs in the event of a discrepancy between the information contained in or on the electronic version and that which is on the hard copy.
- Vendors are required to clearly identify any deviations from the specifications in this document.
- An authorized officer of the company submitting the proposal must sign all proposals, in blue ink.
- Vendors must submit two [2] signed copies of their proposal; one is to be an original and so marked.
- All prices and notations must be in blue ink or typewritten on the attached form. Mistakes must be crossed out, corrections typed adjacent and must be initialed in blue ink by the person signing the proposal.
- St. Charles County will not award any proposal to an individual or business having any outstanding amounts due from a prior Contract or business relationship with the County or who owes any amount(s) for delinquent taxes, fees or licenses.
- Sealed proposals received after the designated time of the receipt of the sealed proposals will be considered as "Void" and will not be opened.
- The successful proposer is specifically denied the right of using in any form or medium the names of St. Charles County or any other public entity within the St. Charles County for public advertising unless express written permission is granted.

- All proposers must possess the necessary and appropriate business and/or professional licenses in their field.
- Award will be made to the low responsive, responsible proposer, or to the offeror whose proposal is most advantageous to the County, price and other factors considered. When payments are to be made to the County, award will be made to the most advantageous offer.
- County reserves the right to accept any item or group of items offered, unless the proposer qualifies his proposal by specific limitations. The proposal can be on an "all or none" basis if wording in the proposal so states and if all items solicited are included in the proposal.
- When applicable, provide unit prices and extension prices. Where there is disagreement in the unit and extension prices, the unit price shall govern.

**Employment of Unauthorized Aliens Prohibited (*Missouri Revised Statutes Section 285.530*)**

As a condition for the award of any contract or grant in excess of five thousand dollars by St. Charles County to a business entity, the business entity shall, by sworn affidavit and provision of documentation\*\*, affirm its enrollment and participation in a federal work authorization program (**E-Verify**) with respect to the employees working in connection with the contracted services. Every such business entity shall sign an affidavit affirming that it does not knowingly employ any person who is an unauthorized alien in connection with the contracted services. [RSMO 285.530 (2)]

An employer may enroll and participate in a federal work authorization program (**E-Verify**) and shall verify the employment eligibility of every employee in the employer's hire whose employment commences after the employer enrolls in a federal work authorization program. The employer shall retain a copy of the dated verification report received from the federal government. Any business entity that participates in such program shall have an affirmative defense that such business entity has not violated subsection 1 of this section. [RSMO 285.530 (4)]

Any entity contracting with St. Charles County shall only be required to provide the referenced affidavit on an annual basis. A copy of the affidavit is included in this bid request. Vendors may choose to send the required documentation using one of the following options:

- Send the notarized affidavit and E-Verify MOU signature page to: St. Charles County, Attn: Purchasing Manager, 201 N Second Street, Room 541, St. Charles, MO 63301 prior to responding to any solicitations; **OR**
- Send the notarized affidavit and E-Verify MOU signature page along with a bid solicitation response.

These documents will be kept on file. The notarized affidavit and E-Verify MOU signature page will remain current for **one year** from the date of the notarized affidavit.

**\*\* PLEASE NOTE:**

***Acceptable enrollment and participation documentation consists of a valid copy of the E-Verify***

**Memorandum of Understanding, completed online and electronically signed by the Contractor, and the Department of Homeland Security - Verification Division**  
**The online address to enroll in the E-verify program is:**

<https://e-verify.uscis.gov/enroll/StartPage.aspx?JS=YES>

**OPEN RECORDS**

Any and all information contained in or submitted with the proposal becomes a public record subject to the Missouri Sunshine Law when a contract is executed or all proposals are rejected. If Proposer believes that any information contained in or submitted with the proposal is protected by the Missouri Sunshine Law, Proposer must clearly identify what information Proposer believes is so protected and must also clearly identify the legal basis therefor.

## REQUEST FOR PROPOSALS

### Current Arrangement

The County has an existing Section 125 Plan that includes Pre-Tax Premiums, Medical Reimbursement and Dependent Care. The plan year is on a calendar year basis from January 1 to December 31. The County administers the Premiums portion of the Section 125 Plan which has full participation. Medical Reimbursement and Dependent Care programs, which were added to the Plan later, have been administered by a TPA.

The County has approximately 1,000 eligible employees and 218 participants. Participation has slowly increased as employees become comfortable with the concept, as out of pocket expenses increase, and with employees understanding the benefit of participating. Full time and percentage time employees and Elected Officials are eligible for coverage.

The current third party administrator is ASI. An employee who participates in the flexible spending arrangement for either, *or both*, Medical Reimbursement and Dependent Care provisions of the Plan is counted as one participant under the third party administration.

Claims are processed daily, a claim register is submitted to the County and funds wired for payment. Employees can mail or fax claims and have claims reimbursed by check or direct deposit. Employees also have the option of using a "flexible spending debit card" that allows providers to "debit" eligible co-pays and expenses directly from the employees' Section 125 account, which eliminates the need to submit most co-payment receipts in order to receive reimbursement for claims. Additionally, ASI has online access for interested employees to file claims, track the status of their account contributions, balances and claims processing status. We have declined online employee enrollments, ASI provides open enrollment packets and we email an enrollment spreadsheet for all participants.

### Services to Be Provided

The County intends to offer Section 125 benefits that are at least comparable to those currently being utilized. Ease of submitting claims and quick turnaround times are important considerations for employee satisfaction, therefore, the County also desires to receive quotes for the "debit card" reimbursement process in addition to the traditional reimbursement procedures.

Coverage under the selected plan would commence January 1, 2012. County contracts are for one year; however, the County would prefer to execute an agreement which can be renewed under specified terms or conditions mutually acceptable to both parties, for up to two additional one year periods. Pricing for years 2013 and 2014 is therefore encouraged.

1. Process all claims under the medical reimbursement and dependent care plan. Claims processing to include receipt of claim, determination of eligible expenses and maximums, participant explanations, and preparing a register of eligible claims/ amounts per participant.
2. Schedule claims processing at least every 2 or 3 days, preferably daily to provide the greatest convenience in turnaround reimbursement. Optional benefit level would include proposal of instant reimbursement through the use of Section 125 "debit cards".

3. Administer all details of operating a Section 125 plan, such as ensuring that the program is in compliance with federal regulation, ensuring that enrollees are eligible to participate, ensuring that payroll deductions balance with election affidavits, providing detailed records of all transactions, provide forms for enrollment, termination, and claims, and notifying the County and/or participants of inconsistencies, nonpayment of submitted claims, account balances, etc.
4. Participate in the annual "Benefits Fair" which will be held early November each year and provide a communication program during open enrollment. Provide appropriate materials for orientation and open enrollment packets to ensure employees understand the benefits and services provided. The Benefit Fair for 2012 is scheduled for November 9<sup>th</sup> and 10<sup>th</sup>, 2011.
5. The successful proposer will be required to monitor changes in regulations and the operation of the County's Section 125 program.
6. Provide assistance, advice, and direction requested by the County regarding the administration and smooth operation of the plan such as; increasing participation levels, eligibility determination, eligible expenses, and compliance with regulations and/or guidelines governing or affecting Section 125 programs, and required reporting.
7. As needed, provide a technical review of the existing plan documents and summary plan documents and recommend changes or improvements. Provide assistance and advice to the County, as necessary, in the preparation of revisions to plan documents and summary plan documents.

**Proposals to Include:**

1. A description and cost for all services, plans and options presented. If more than one level of service or optional service components is offered, the cost of each must be clearly stated. Rates shall be quoted as monthly cost per participant and any one-time fees if applicable indicated.
2. A description or samples of reports provided to the County and participant following the payroll deduction and claim payment cycle.
3. A description of the communication program to be provided during open enrollment.
4. A description or samples of printed materials and flyers provided for orientation and open enrollment packets.
5. A description of services provided to assist in revision, as necessary of the plan documents and summary plan documents.
6. Documentation detailing experience handling third party administration for Section 125 plans, documentation supporting the provider's compliance with applicable state insurance regulations and the size and viability of the provider.
7. Provide a list of at least three (3) current clients for which you provide similar services, preferably public entities, indicating a contact person and phone number.
8. A description of any additional services or modifications from the stated request for proposal specifications.

The County asks that proposals be provided in such a fashion that the County can choose the best possible combination of cost, benefit, service and value.



## **Selection Criteria**

The following selection criteria will be utilized in evaluating proposals:

- Kind and level of services provided
- Cost of services to be provided
- Proposed communication program and related printed materials for orientation and Benefit Fair
- Successful history of Section 125 third party administration and client references

Following evaluation of proposals and tentative selection of the provider, the County may enter into negotiations with the chosen provider to resolve any issues of concern to either party.

The County will consider proposals submitted directly by third party administrators or those submitted through brokers. Any product(s) being offered through a Broker must, at a minimum, contain the following information: Name, address and phone number of your organization. If a subsidiary, the name, address, etc. of the parent organization. Information regarding the services to be provided to the County by the broker; a narrative history of successful service relating to third party administration to public entities; and references of the broker in serving other public entity clients is highly desired. While the County will consider proposals from brokers or agents all premiums/costs must be submitted on a zero commission basis.

Should identical proposals be submitted by more than one firm and should these identical proposals be considered the best available, the County will give consideration to the firm who, in its judgment, best meets the County's needs in accordance with the following selection criteria.

- The proposed services to be provided by the Broker to our employees.
- The references of the Broker in servicing other public entity clients.
- A history of successfully providing similar types of coverage(s) to employer groups.
- Those Brokers whose business is located in St. Charles County.

### **Exception Sheet**

If the item(s) and/or services proposed in the response to this proposal is in any way different from that contained in this proposal or proposal, the proposer is responsible to clearly identify all such differences in the space provided below. Otherwise, it will be assumed that the proposer's offer is in total compliance with all aspects of the proposal or proposal.

Below are the exceptions or differences to the stated specifications (attach additional sheets as needed):

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

**Proposal Form**

**11-187**

**Section 125 TPA for Medical and Dependent Care Reimbursement**

\_\_\_\_\_  
Company Name

**Submits the following:**

Monthly Fee per Participant \_\_\_\_\_

Fee for Other Services if not included in Monthly Fee, list separately:

Proposed Service \_\_\_\_\_ Fee: \_\_\_\_\_ / Per \_\_\_\_\_

Proposed Service \_\_\_\_\_ Fee: \_\_\_\_\_ / Per \_\_\_\_\_

Proposed Service \_\_\_\_\_ Fee: \_\_\_\_\_ / Per \_\_\_\_\_

Proposed Service \_\_\_\_\_ Fee: \_\_\_\_\_ / Per \_\_\_\_\_

County contracts are for one year; however, the County would prefer to execute an agreement which can be renewed, under specified terms or conditions mutually acceptable to both parties, for up to two additional one year periods.

Basis for price quoted: (Check all that apply)

\_\_\_\_ 1 year rate (required)

\_\_\_\_ 2 year rate (If quoted rate is different than for 1 year, please clearly distinguish.)

\_\_\_\_ 3 year rate (If quoted rate is different than for 1 or 2 years, please clearly distinguish.)

Any other information regarding your quotes:

**Authorized signature**

**Date**

**Proposal Response submitted by:**

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**Name of Company or individual**

**THIS FORM MUST BE COMPLETED AND ENCLOSED WITH THE PROPOSAL**

**Audit Clause for Contracts**

Examination of Records

The Contractor's records must include, but not be limited to, accounting records (hard copy, as well as computer readable data), written policies and procedures, subcontractor files, indirect cost records, overhead allocation records, correspondence, instructions, drawings, receipts, vouchers, memoranda, and any other data relating to this contract shall be open to inspection and subject to audit and/or reproduction by the County Auditor, or a duly authorized representative from the County, at the County's expense. The contractor must preserve all such records for a period of three years, unless permission to destroy them is granted by the County, or for such longer period as may be required by law, after the final payment. Since the Contractor is not subject to the Missouri Sunshine Law (Chapter 610, RSMo), information regarding the Contractor's operations, obtained during audits, will be kept confidential.

The Contractor will require all subcontractors under this contract to comply with the provisions of this article by including the requirements listed above in written contracts with the subcontractors.

Vendor Information

Company Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

Business Hours: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

(Indicates acceptance of all proposal terms and conditions)

Date: \_\_\_\_\_



**AFFIDAVIT OF WORK AUTHORIZATION**

The bidder/contractor who meets the section 285.525, RSMo definition of a business entity must complete and return the following Affidavit of Work Authorization.

Comes now \_\_\_\_\_ (Name of Business Entity Authorized Representative) as \_\_\_\_\_ (Position/Title) first being duly sworn on my oath, affirm \_\_\_\_\_ (Business Entity Name) is enrolled and will continue to participate in the E-Verify federal work authorization program with respect to employees hired after enrollment in the program who are proposed to work in connection with the services related to contract(s) with the County for the duration of the contract(s), if awarded in accordance with subsection 2 of section 285.530, RSMo. I also affirm that \_\_\_\_\_ (Business Entity Name) does not and will not knowingly employ a person who is an unauthorized alien in connection with the contracted services provided to the contract(s) for the duration of the contract(s), if awarded.

In Affirmation thereof, the facts stated above are true and correct. (The undersigned understands that false statements made in this filing are subject to the penalties provided under section 575.040, RSMo.)

\_\_\_\_\_  
**Authorized Representative's Signature**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**E-Mail Address**

Subscribed and sworn to before me this \_\_\_\_\_ of \_\_\_\_\_. I am  
(DAY) (MONTH, YEAR)

commissioned as a notary public within the County of \_\_\_\_\_, State of  
(NAME OF COUNTY)

\_\_\_\_\_, and my commission expires on \_\_\_\_\_.  
(NAME OF STATE) (DATE)

\_\_\_\_\_  
**Signature of Notary**

\_\_\_\_\_  
**Date**