

REQUEST FOR PROPOSAL
Proposal #01072011 Employee's Insurance Package

REQUEST FOR PROPOSAL



RFP RELEASE DATE: Friday, January 07, 2011

DUE DATE: Tuesday February 8, 2011 at 5:00 P.M., CST.

Middle Rio Grande Development Council

**307 West Nopal
Carrizo Springs, TX 78834
830-876-3533**

Leodoro Martinez, Executive Director

REQUEST FOR PROPOSALS

RETURN BIDS TO: RAMON S. JOHNSTON, DEPUTY EXECUTIVE DIRECTOR
ATTN: FISCAL DEPARTMENT
MIDDLE RIO GRANDE DEVELOPMENT COUNCIL
P.O. BOX 1199 - 307 W. NOPAL ST.
CARRIZO SPRINGS, TEXAS 78834

The enclosed Request for Proposals (RFP) packet and attached SPECIFICATIONS are for your convenience in submitting an offer for the enclosed referenced products, services and/or materials for the MIDDLE RIO GRANDE DEVELOPMENT COUNCIL.

COMPETITIVE BIDS SHALL BE RECEIVED NO LATER THAN:

Tuesday February 8, 2011 at 5:00 P.M., CST.

The Middle Rio Grande Development Council (MRGDC) appreciates your time and effort in preparing this proposal. Please note that all proposals **must be received at the designated location by the deadline shown**. Proposals received after the deadline **will not be considered** for the award of the contract, and shall be considered void and unacceptable. Please submit your bid to the attention of:

**Ramon S. Johnston, Deputy Executive Director
Attention Fiscal Department
Middle Rio Grande Development Council Central Office
307 W. Nopal St. - P.O. Box 1199
Carrizo Springs, Texas**

PLEASE MARK ENVELOPE RFP#01072011 Employee's Insurance Package -DO NOT OPEN

If you do not wish to submit a proposal at this time, but wish to remain on the agency's bidders list, please submit a **"No Offer"** by the same time and at the same location as stated above. If a response is not received in the form of a **"BID" or "No Offer"** for three consecutive RFP's, your firm shall be removed from the bidder's list. If you wish to be removed from the bidder's list, or changed to the bidder's list for another commodity, please let us know.

MRGDC is very conscious and extremely appreciative of the time and effort you have expended to submit an offer. We would appreciate if you would indicate on any "No Offer" response any requirement of this RFP, which may have influenced your decision to respond with a "No Offer".

Contact for questions on bid specifications or information should be addressed to: Ramon Johnston, MRGDC, 307 West Nopal Street, Carrizo Springs, TX 78834, (830) 876-3533, Ext. 21228 or Bonnie Brown, MRGDC, 307 West Nopal Street, Carrizo Springs, TX 78834, (830) 876-3533, Ext. 21227.

RFP SCOPE OF SERVICES

ATTACHMENT "A"

Attach a detailed Schedule of Services with respect to the Health and Disability Coverage being proposed to our agency. All interested bidders must address the items listed below and include this attachment with their proposal.

COMPREHENSIVE MEDICAL

INDEMNITY

Lifetime Maximum	\$ _____
Annual Deductible	\$ _____
Max out of pocket (Including deductible)	\$ _____
Additional Accident	% _____

PHYSICIAN CARE

Office Visit	% _____
PCS (prescriptions) Preferred Pharmacy	
Name Brand	\$ _____
Generic	\$ _____
Preferred/Non-preferred	% _____
Mail Order Drug	\$ _____

HOSPITAL CARE (Deductible Applies)

Inpatient Hospital Services	% _____
Outpatient Surgery Diagnostic	% _____
Physician Services	% _____

OUTPATIENT PSYCHIATRIC & SUBSTANCE ABUSE

% max _____

NEWBORN NURSERY CARE

% _____

FAMILY PLANNING

% _____

SPINAL ADJUSTMENT TREATMENT

% _____

PREVENTATIVE CARE

Immunizations	% _____
Gynecologist Care	% _____

EMERGENCY ROOM

% _____

RFP SCOPE OF SERVICES
ATTACHMENT "A" contd.

LIFE INSURANCE \$ _____

SHORT TERM DISABILITY

All employees % _____
Elimination period
 Accident days _____
 Sickness days _____
Benefit Period wks _____
Maximum Benefit \$ _____

DENTAL CARE BENEFITS

Covered Expenses \$ _____
Calendar year Deductible (Family \$ _____
 (For all benefits except preventative)
Preventative Treatment % _____
Basic Treatment % _____
Major Treatment % _____
 (Including Periodontic & Endodontic treatment)
Orthodontia % _____
Calendar year Maximum \$ _____
 Preventative/Basic/Major
Lifetime Maximum Orthodontia \$ _____

VISION CARE BENEFITS

Covered Expenses
Exam \$ _____

Frames \$ _____

Lenses: Single \$ _____
 Bi-focal \$ _____
 Tri-focal \$ _____
 Progressive \$ _____
 Lenticular \$ _____
 Contacts \$ _____

Additional data will be made available upon request by vendors wishing to response to this RFP including the agency's current claim experience, loss rate data, renewal rates for current plan etc...

PART I

PROPOSAL FORMAT REQUIRED

All bidders or potential service providers must adhere to the following format when submitting responses to this RFP. In the event that some part of the format does not pertain to your entity please submit a non-applicable response with an explanation to that particular item. The narrative section of the format allows you the opportunity to explain in detail the specifications of your proposal in response to the "RFP". Your narrative should include sufficient information that you feel is pertinent to your response. In addition, it is an opportunity to demonstrate that your organization has the experience and capacity to successfully fulfill the requirements of the "RFP". All information contained in the narrative must be factual and supported by your proposal.

The Proposal Narrative section should address the four categories reflected in **Part III Proposal Evaluation Criteria** of this RFP packet.

Each and every potential bidder responding to this RFP must return a proposal packet that contains all sections of the proposed format. In the event that some of the certifications included within this RFP packet are not applicable to your entity, please indicate by writing in "not applicable" on the form.

PROPOSAL FORMAT

Proposal Summary Sheet

Proposal Narrative

Signature Authorization Certification

Suspension/Debarment Certification

Middle Rio Grande Development Council Code of Conduct

Drug Free Workplace Certification

Disclosure of Lobbying Activities

BID INFORMATION SHEET

I. IDENTIFICATION OF BIDDER

- a. Name of Organization
- b. Address
- c. Telephone Number
- d. Contact Person and Telephone Number
- e. Tax Identification Number (14 digits)

II. DESCRIPTION OF BIDDER (indicate all applicable)

- a. Corporation
- b. Sole Ownership
- c. Other

III. HISTORY OF BIDDER

- Briefly, describe the history, experience of the firm, and the number of years in business. (100 words or less)

IV. COSTS ASSOCIATED WITH SERVICES

- Provide an Itemized budget identifying all costs associated with the performance of the project; provision of products/service to include cost rates for unanticipated services that may arise.

V. REQUIRED CERTIFICATIONS

- Signature Authorization Form
- Certification Regarding Debarment, Suspension, Ineligibility, And Voluntary Exclusion -- Lower Tier Covered Transaction
- Code of Conduct
- Drug Free Workplace Certification
- Disclosure of Lobbying

VI. REFERENCES

Please provide references on businesses currently covered by the vendor responding to this RFP for the last two (2) years.

PROPOSAL NARRATIVE

The narrative should address each of the following categories outlined below:

I. PROPOSED SERVICES

- a. Provide a description of the vendor's understanding of insurance services to be provided as per the Specifications section in this RFP. State the type of product, Insurance plan(s) and/or service being proposed.
- b. Provide a list of all associates (and their qualifications i.e. resumes, certifications) hired by your firm that will perform the service, installation/upgrades.

II. QUALITY OF REFERENCES

Provide a list of references of governmental units, agencies or businesses for which your firm has provided a similar type of sale as requested by this RFP within the last two (2) years. The list should include names, addresses, and telephone numbers of the entities.

III. COST PROPOSED

Address the price reasonableness and competitiveness of your firm to provide the proposed services and capability to stay within the budget.

IV. SERVICE SCHEDULE

Provide a detailed and realistic schedule with completion dates for services or enrollment connected with the insurance proposal to be provided.

SIGNATURE AUTHORIZATION CERTIFICATE

I hereby certify that the information contained in this Bid and any attachments are true and correct, and may be viewed as an accurate representation of proposed services to be provided as well as the administrative, management, and financial capabilities of the organization. I also hereby certify that the Bid has been duly authorized by the appropriate person, persons, or governing body of the applicant and that the applicant will comply with applicable State assurances if the Bid is funded or accepted.

The person signing this certificate hereby warrants that such person has been fully authorized by the applicant to execute this certificate on behalf of the applicant and to validly and legally bind the applicant to all the terms, performances and provisions set forth in the Bid.

Signature of Authorized Agent:

Typed Name:

Title:

Date:

**MIDDLE RIO GRANDE DEVELOPMENT COUNCIL
CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY, AND
VOLUNTARY EXCLUSION -- LOWER TIER COVERED TRANSACTION**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510, Participants, responsibilities.

- (1). The prospective recipient of Federal assistance funds certifies, by submission of this Bid, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

- (2). Where the prospective recipient of Federal assistance funds is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this Bid.

Name of Bidder/Organization

Print or Type Name and Title of Authorized Representative

Signature

Date

INSTRUCTIONS FOR CERTIFICATION REGARDING DEBARMENT

1. By signing and submitting this Bid, the prospective participant is providing the certification as set out on the form itself.
2. The certification is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the U.S. Department of Labor may pursue available remedies, including suspension and/or debarment.
3. The prospective participant must provide immediate written notice to the Middle Rio Grande Development Council if at any time the prospective participant learns that its certification was erroneous when submitted or has become erroneous because of changed circumstances.
4. The terms "covered transaction", "debarred", "suspended", "ineligible", "lower tier covered transaction", "participant", "person", "primary covered transaction", "principal", "Bid", and "voluntarily excluded" as used in the certification have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the Middle Rio Grande Development Council for assistance in obtaining a copy of these regulations.
5. The prospective participant agrees by submitting this Bid that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the U.S. Department of Labor.
6. The prospective participant further agrees by submitting this Bid that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion--Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower-tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Federal Nonprocurement List.
8. Nothing contained in the foregoing may be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the U.S. Department of Labor may pursue available remedies, including suspension and/or debarment.
10. Write in the name of the bidder (individual or organization) and the name and title of the authorized representative of the bidder. The authorized representative signs where noted and dates the signature.

**MIDDLE RIO GRANDE DEVELOPMENT COUNCIL
CODE OF CONDUCT**

No officer, employee or agent of the Middle Rio Grande Development Council shall participate in selection, or in the award or administration of a contract supported by federal funds if a conflict of interest, real or apparent, would be involved.

- . The employee, officer or agent;
- . any member of his immediate family;
- . his or her partner; or
- . an organization which employs, or is about to employ, any of the above, has a financial or other interest in the firm selected for award.

Middle Rio Grande Development Council officers, employees, or agents shall neither solicit nor accept gratuities, favors or anything of monetary value from contractors, potential contractors, or parties to sub-agreements. To the extent permitted by state or local law or regulations, the Middle Rio Grande Development Council shall enforce penalties, sanctions, or other disciplinary actions for violations of Attachment O Circular A-102, paragraph 7, by the agency's officers, employees, or agents, or by contractors or their agents.

I have read the above Code of Conduct and will not knowingly breach it.

Signature

Date

(Type or Print Name and Title)

DRUG FREE WORKPLACE CERTIFICATION

The Drug Free Workplace Act of 1988 covers employers with contracts of more than \$25,000 with any federal agency and certain recipients of federal financial assistance. Such employers are required to certify they will take certain steps to maintain a drug-free workplace.

Texas law requires an employer who maintains worker's compensation insurance coverage and employs fifteen or more employees to adopt a policy "designed to eliminate drug abuse and its effects in the workplace." The employer must distribute a written copy of its policy to each employee.

I do hereby certify that, as the law pertains to the applicant submitting this RFP, the applicant has complied with the proper regulations.

Signature of Authorized Agent: _____

Typed Name: _____

Title: _____

Entity: _____

Date: _____

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (Item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Invitation for Bids (IFB) number; Invitation for Bid (IFB) number, grant announcement number; the contract, grant, or loan award number the application/Bid control number assigned by the Federal agency). include prefixes, e.g., "IFB-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered, include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing Instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget Paperwork Reduction, Project (0348-00-46), Washington, D.C. 20503.

DISCLOSURE OF LOBBYING ACTIVITIES

<p>1. Type of Federal Action</p> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<p>2. Status of Federal Action:</p> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post award	<p>3. Report Type:</p> <input type="checkbox"/> a. Initial filing <input type="checkbox"/> b. material change For Material Change Only: Year ____ Quarter ____ Date of last report ____
<p>4. Name and Address of Reporting Entity: __Prime __Subawardee Tier _____, it known:</p> <p>Congressional District, if known: _____</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter a Name and Address of Prime:</p> <p>Congressional District, if known: _____</p>	
<p>6. Federal Department/Agency:</p>	<p>7. Federal Program Name/Description:</p> <p>CFDA Number, if applicable: _____</p>	
<p>8. Federal Action Number, if known:</p>	<p>9. Award Amount, if known: \$ _____</p>	
<p>10. a. Name and Address of Lobbying Entity (if individual, last name, first name, MI):</p>	<p>b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):</p> <p>(attach continuation Sheet(s) SF-LLL-A if necessary)</p>	
<p>11. Amount of Payment (check all that apply):</p> <p>\$ _____ __ actual __ planned</p>	<p>13. Type of Payment (check all that apply):</p> <input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other; specify: _____	
<p>12. Form of Payment (check all that apply):</p> <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____		
<p>14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including Officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11:</p> <p>(attach continuation sheet(s) SF-LLL-A if necessary)</p>		
<p>15. Continuation Sheet(s) SF-LLL-A attached: __ Yes __ No</p>		
<p>16. Information requested through this form is authorized by Act 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000.00 and not more than \$100,000.00 for each such failure.</p>	<p>Signature: _____</p> <p>Print Name: _____</p> <p>Title: _____</p> <p>Telephone No.: _____ Date: _____</p>	
<p>Federal Use Only:</p>	<p>Authorized for Local Reproduction Standard Form - LLL</p>	

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: _____ **Page** _____ **of**

**Authorized for Local Reproduction
Standard Form - LLL-A**

**PART II
SPECIAL CONDITIONS AND REQUIREMENTS**

This section presents special conditions and requirements pertaining to proposal submission. Bidders should be aware of the conditions contained herein and, submitted proposals must be in compliance with the requirements.

A. Procedural Conditions and Requirements

1. The period of performance of the services shall be from **March 11, 2011 to February 28, 2014**. The Middle Rio Grande Development Council reserves the right to renegotiate and extend the contract award on a year-to-year basis with the selected firm for two (2) additional years, if additional appropriate funding is available
2. Deadline for Submission. The deadline for submission of proposal is **Tuesday, February 8, 2011 at 5:00 p.m. CST**. Proposals received after that date will not be considered. **Proposals may be NOT be faxed in.** Submit proposal to the attention of:

**Ramon S. Johnston, Deputy Executive Director
Attention Fiscal Department
Middle Rio Grande Development Council Central Office
307 W. Nopal St. - P.O. Box 1199
Carrizo Springs, Texas**

**PLEASE MARK ENVELOPE RFP#01072011 Employee's Insurance
Package -DO NOT OPEN**

Please note all proposals must be postmarked, at a minimum, no later than February 7, to be responsive.

B. Bidder Conditions and Requirements

1. **Eligibility of Bidder**
Open to potential bidders that have provided the same type service, products or materials as proposed in the request for proposals.
2. Pre-Award Survey. Bidders selected as a result of this request for proposals may be subject to a pre-award survey prior to contract award.

C. Program Conditions

1. M.R.G.D.C. reserves the right to accept or reject any and all proposals submitted; select only one to the exclusion of all others; or consolidate or breakout out this procurement among several bidders to obtain a more

economical purchase. MRGDC also reserves the right to reject any and all proposals submitted and enter into into state and local intergovernmental agreements for which MRGDC is eligible. Such agreement include but not limited; the Texas Department of Information Resources(GoDIR), Texas Procurement and Support Services Cooperative Purchasing Program (State of Texas CO-OP), Houst Galveston Area Council Purchasing Co-op (HGACBuy) .

2. M.R.G.D.C. reserves the right to negotiate minor details pertaining to this proposal solicitation. Therefore, some cost breakdown must be itemized in the Request for Proposal on a per site basis.
3. This RFP does not commit M.R.G.D.C. to pay for any costs incurred prior to the execution of any contract or purchase order, and/or prior to availability of funds.
4. M.R.G.D.C. will not provide any technical assistance in the preparation of proposals.
5. It is the Council's policy to assure that small, women-owned, minority businesses and Historically Underutilized Business (HUBs) will be utilized whenever possible as sources of suppliers, equipment, construction and services when State or Federal programs and/or funds are involved and are encouraged to submit bids for the participation in the services described above.
6. The intent of this RFP is to identify the various prospective contractor alternatives and estimates of costs of services, products or materials being solicited, and M.R.G.D.C. is under no legal requirement to execute a contract or issue a purchase order based on any proposal.
7. M.R.G.D.C. specifically reserves the right to vary the provisions set forth herein anytime prior to the execution of a contract where such variance is deemed necessary and in the best interest of the M.R.G.D.C.
8. M.R.G.D.C. reserves the right to negotiate an extension of any executed contract or purchase order issued through this proposal solicitation process for a period not to exceed two additional years beyond the period of performance, provided that additional appropriate funding is available.
9. If selected for contractual negotiations, bidder may be required to prepare and submit additional information prior to final contract or execution of a purchase order, to delineate terms agreeable to both parties for the provision of the services or materials.
10. All proposals and their accompanying attachments become the property of M.R.G.D.C. upon submission. Materials submitted will not be returned.

11. All bidders selected must meet performance goals as well as shipping dates as specified in the final negotiated contract or purchase order.
12. All bidders or service providers approved under this RFP may be required to procure audits for services as provided and explained in detail in the executed contract for services.
13. Contract negotiations may be undertaken with all bidders responding to this RFP whose performance, as determined by M.R.G.D.C., shows them to be the most qualified, responsible, and capable of delivering the services, materials or products. Price and schedules may be negotiated with the selected bidders deemed responsive to this RFP and the final award may differ from the bid submitted when it is in the best interest of the MRGDC.
14. Respondents shall comply with all State, Federal and Local laws, as well as rules of the funding agency, the Office for Domestic Preparedness (ODP) Homeland Security Grant Program (HSGP).
15. MRGDC enters into this procurement process in good faith having identified funding sources and long term income capable of supporting this procurement. However, the procurement of the goods and/or services requested in this RFP, and/or the installation of equipment, is nevertheless dependent upon availability of funding.
16. The successful Responder shall provide MRGDC a copy of a policy, or certification by an insurance carrier, demonstrating that the Responder has in effect during the term of any contract a General Liability Insurance Policy. Such policy shall be the primary coverage for all of Responder's activities under performance of activities required by contract and all equipment, software and systems including training of any type which are part of this bid.

The insurance coverage required by the above paragraph will be in a minimum amount of \$100,000 and shall be provided by an insurance company authorized to transact business in the State of Texas.

Responder must provide certification of insurance compliance within (10) working days (15) Calendar days after notification of award. Certification must include the following:

Name and Address of Insurance Company
Policy Number
Liability Coverage Amounts
Reference to this RFP Response & Contract

17. Provide a full overview of personnel to be utilized in implementing the proposed project. Details regarding any subcontractors to be utilized must be clearly outlined.
18. In the event that a potential bidder wishes to protest the solicitation or selection process; the process of protest or inquiry shall be the following:

The bidder may choose to request an informal conference. The purpose of the informal conference is to give the parties an opportunity to resolve a complaint.

The request of an informal hearing must be submitted in writing within ten (10) days of the notification of the award to the:

Executive Director
MIDDLE RIO GRANDE DEVELOPMENT COUNCIL
P. O. Box 1199
Carrizo Springs, Texas 78834

All responses to a request for an Informal Conference shall be mailed within ten (10) days by the Executive Director of the MIDDLE RIO GRANDE DEVELOPMENT COUNCIL. The Informal Conference shall be scheduled by the Equal Opportunity Officer (EO Officer) within seven (7) days of receipt of a properly completed Grievance Information form. The EO Officer shall serve as Chairperson and moderator of the Informal Conference. Only those issues presented at the Informal Conference may be addressed in subsequent hearings. All parties shall make a good faith effort to reach a mutually acceptable resolution of the complaint at the Informal Conference. The Chairperson shall adjourn the Informal Conference when a satisfactory resolution of the complaint has been reached or when it appears to the Chairperson that no such resolution is possible. A written determination of the Informal Conference shall be prepared by the Chairperson and shall be final and void of any appeal.

The complainant may request a Hearing if dissatisfied with the outcome of the Informal Conference. When an informal resolution has not been successful, notification of the opportunity for a hearing along with a copy of the State agency's Request for Hearing form and all procedures to be followed must be sent to the complainant.

PART III

PROPOSAL EVALUATION CRITERIA

Proposals judged to be in response to this RFP will be evaluated by M.R.G.D.C. staff in terms of the criteria as listed in this section. All proposals will be reviewed and assessed for detail, clarity, and comprehensiveness. The evaluation will be based upon the following criteria:

	CRITERIA	VALUE
I.	Completeness of Proposal	10
II.	Proposed Services	40
III.	Demonstrated Effectiveness	10
IV.	Administrative Elements	10
V.	Cost of proposed services	30

NOTE: **ALL PROPOSALS MUST SCORE ABOVE 70 POINTS IN ORDER TO BE CONSIDERED RESPONSIVE.**

I. Completeness of Proposal

Proposal should contain all pertinent information such as, but not limited to, service outlines, etc.

II. Proposed Services

Criteria under this category will be evaluated as to the extent to which the proposed services are adequate to meet M.R.G.D.C. current needs. Points will be awarded based upon the quality of services to be covered by the bidder. Exclusion of services will also be taken into consideration.

III. Demonstrated Effectiveness

The demonstrated effectiveness of the bidder will be based upon the prior experience of the bidder. The experience factor in this case will be related to the past record of the bidder in operating similar programs or services as requested by this RFP

IV. Administrative Elements

Criteria under this category require that your proposal address the effectiveness and capability of your organization to administer the services.

V. Cost of Proposed Services

Criteria under this category require that the proposal address the price reasonableness and competitiveness of the vendor to provide services in response to the RFP.