FORT BEND CENTRAL APPRAISAL DISTRICT

REQUEST FOR PROPOSAL
BENEFIT CONSULTANT AND INSURANCE BROKER

Sealed responses are being accepted for the following:

Request for Proposal (RFP) for Fort Bend Central Appraisal District Benefit Consultant and Insurance Broker. The RFP information is available on the District website at www.fbcad.org.

The deadline to submit the RFP is Tuesday, May 31, 2022, before 2:00 p.m. RFPs will be reviewed and a recommendation will be made to the District's Board of Directors for their consideration and possible action.

Please submit RFPs in a sealed envelope marked "DO NOT OPEN – RFP for Benefit Consultant and Insurance Broker" to Fort Bend Central Appraisal District, Attention: Human Resources, 2801 B.F. Terry Blvd., Rosenberg, Texas 77471.

The District reserves the right to accept or reject any or all proposals and to waive any informalities in bidding.

Individuals requesting additional information may contact:
Krisha Langton, Chief Human Resources Officer, at 281.344.8623 x 110 or by email at krishalangton@fbcad.org.

REQUEST FOR PROPOSALS

BENEFITS CONSULTING AND BROKERAGE SERVICES

FORT BEND CENTRAL APPRAISAL DISTRICT
2801 B F Terry Blvd,
Rosenberg, TX 77471
(281) 344-8623
www.fbcad.org

Due Date: Tuesday, May 31, 2022 by 2:00 p.m.

NOTICE

REQUEST FOR PROPOSALS

Benefits Consulting and Brokerage Services

The Fort Bend Central Appraisal District, hereinafter referred to as the "Appraisal District", is soliciting proposals for Benefits Consulting and Brokerage Services. **THIS IS NOT A REQUEST FOR INSURANCE COVERAGE.**

Respondents are required to submit one (1) original and three (3) copies of the proposed package no later than 2:00pm, Tuesday, May 31, 2022.

Submittals are to be sealed, marked with the submitting firm's name and address and labeled: "Benefits Consulting and Brokerage Services" and delivered to:

Fort Bend Central Appraisal District
Attn: Krisha Langton, Chief Human Resources Officer
2801 B F Terry Blvd.
Rosenberg, Texas 77471

Respondent shall sign and date the Proposal. Proposals which are not signed and dated will be rejected.

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.

Specifications and related documents may be obtained from the Human Resources Department at 2801 B F Terry Blvd., Rosenberg, Texas 77471, between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday or from the Appraisal District's website: www.fbcad.org. Should you have any questions or require additional information or clarification on information contained in the Request for Proposal, please contact Krisha Langton, Chief Human Resources Officer through email: krishalangton@fbcad.org.

REQUEST FOR PROPOSAL
BENEFITS CONSULTING AND BROKERAGE SERVICES

I. INTRODUCTION

The purpose of this Request for Proposal (RFP) is to seek qualified brokers to assist the Appraisal District with strategically planning, designing, negotiating and implementing the best coverage and cost for selective employee benefit programs to include Health, Dental, Vision, Life and Ancillary/Voluntary Benefits. **THIS IS NOT A REQUEST FOR INSURANCE COVERAGE.**

This RFP is not an authorization to approach insurance companies or other underwriting sources on behalf of the Appraisal District. The Appraisal District specifically requests that no insurance market contact or solicitation be made at this time.

The Appraisal District pays 100% of employee coverage and currently has approximately 136 employees eligible for the following benefit plans:

- Major Medical - Blue Cross Blue Shield of Texas, Blue Choice PPO, HSA, and Blue Premier Access
- Dental – MetLife, PDP Plus and DHMO
- Vision – MetLife
- Long-term Disability – The Hartford
- Life Insurance – The Hartford

Employees are responsible for 100% of dependent coverage.

Additional optional ancillary benefits offered include:

- Voluntary Life Insurance – The Hartford
- Short Term Disability – The Hartford
- Accident Insurance – Guardian
- Cancer Insurance – Guardian
- Critical Illness – Guardian
- Flexible Spending Account – Discovery Benefits

The Appraisal District's COBRA is administered by Web Benefits Design.

All plans run for a period of November 1 through October 31. Attached is information regarding the Appraisal District's current benefit plans. The purpose of this Request for Proposal process is to secure the services of an independent Consultant to assist the Appraisal District in the overall benefit and cost containment strategies of its benefit plan(s).

II. SCOPE OF SERVICES

The intent of the RFP is to obtain professional services from a consulting/brokerage firm that can provide expert benefits guidance and services. This includes, but is not limited to:

a) Developing short and long-range employee benefits goals and strategies;

b) Reviewing and analyzing past claims experience, service and claim administration to ensure maximization of the benefit experience for the Appraisal District's employees, their dependents, and the Appraisal District.
c) Determining and recommending the most cost-efficient funding methods for benefit programs given past experience and project future experience.
d) Preparing bid specifications and soliciting proposals, as needed, from insurance carriers and third-party administrators that deliver benefits in the above plan coverage categories based on the Appraisal District's size, demographics, and geographic location.
e) Evaluating bids from insurance carriers and third-party administrators that deliver benefits in the above plan coverage categories based on the Appraisal District's size, demographics, and geographic location; including:
    i. Providing the Appraisal District with in-depth analysis of the bids and assisting the Appraisal District with selecting the most favorable replacement policies or arrangements and/or renewal options;
    ii. Providing actuarial based budget analysis, budget forecasting/reforecasting and employee contribution scenario modeling, including COBRA rates;
    iii. Apprising the Appraisal District of local, industry specific and national benefit trends and providing benchmarking studies of what other employers similar to the Appraisal District are offering their employees in the form of benefits, including comparing the Appraisal District's employee and employer costs to the similar organizations;
    iv. Meeting with and providing reports and presentations to various Appraisal District representatives in a format that is financially accurate and readily understandable;
    v. Assisting the Appraisal District with the implementation and communication of new programs or changes to existing programs, which may include attending and presenting information at Open Enrollment meetings when requested;
    vi. Partnering with the Appraisal District to effectively performance manage the vendors that provide insurance, third part administrative services or other related services to the Appraisal District and its plans;
    vii. Acting as an advisor on issues such as COBRA, HIPAA, Medicare, FMLA, etc. Providing overall guidance to the Company with health and welfare regulatory compliance;
    viii. Researching and reporting new developments in the employee benefits arena on an ongoing basis, including ways to communicate and solicit interest of Group Health Plan benefits;
    ix. Recommending innovative ideas and new products, programs and services to ensure a competitive, valued and cost-effective benefits program;
    x. Introducing proven programs and ideas to manage health care costs, increase the overall health and well-being of plan participants and improve the overall efficiency;
    xi. Acting as an advocate of the Appraisal District and the plan when there are discrepancies with vendors;
    xii. Introducing proven programs and ideas to enhance the Appraisal District's culture and improving employee productivity and morale, and
    xiii. Educating and advising on Health Care Reform, specifically ACA, and other health care legislation, and provide guidance on the key strategic decisions that the Appraisal District must and should consider.

III. PROFESSIONAL QUALIFICATIONS

Consultant must have a demonstrated experience with similar sized clients preferably in the public sector, and be licensed in Texas.

IV. PROJECT TIMEFRAME

The Appraisal District requires the 2022 health and benefit premiums to be negotiated and finalized no later than September 1, 2022.

V. PROPOSAL REQUIREMENTS

Any Consultant wishing to submit a proposal for this RFP must submit a cover letter together with the required information to the Appraisal District by the submittal deadline listed on this RFP. All information listed below must be included in the proposal and be arranged in the order shown below:

a. Executive Summary
   A brief (1-2 pages) narrative of the Consultant's firm, including location of home office and the location of the office that will handle the Appraisal District's account.
b. Consultant's Background
   i. Length of time in business
   ii. A brief description of the Consultant's firm, including location of home office and the location of the office that will handle the Appraisal District's account.
   iii. Consultant's firm size and organization. Include an organizational chart showing staffing and lines of authority for the key personnel working on behalf of the Appraisal District.
c. The qualifications of your firms and its ability to provide consultation services.
   i. Qualifications and relevant experience of the Consultant or Consultants who will directly participate in the consulting services and a detailed explanation of their role in this project.
d. Relevant experience with similar consulting projects with local governmental entities similar in size.
   i. Include information from past work that displays the Consultant's experience in providing this type of service, savings achieved, and innovative programs developed to achieve cost containment.
   ii. Indicate if you have experience in negotiating costs with local providers, and if so, provide a description of successful negotiations with annual savings achieved.
   iii. Must furnish evidence of having successfully provided consulting services to similar entities within the past two (2) calendar years. The following information regarding each contract must be provided.
      1. Name of Entity
      2. Address
      3. Contact Person's Name
      4. Telephone Number
      5. Dates of the Contract
e. Include a list of deliverables, including various reports for health insurance, and the timeframe of when these reports would be delivered.

f. Other information that you deem appropriate.
g. Consultants should provide costs for all services broken down by the components outlined in the Scope of Work section of this RFP. These costs should include all expenses including time, supplies, travel (mileage, lodging, meals, etc.), photography, printing, clerical, etc . In addition, include the hourly rates to be used if additional work would be required. A consultant must not accept commissions, overrides or any form of remuneration from the Appraisal District's insurers and/or service providers in connection with services/products purchased by the Appraisal District.
h. The Consultant must carry Errors & Omissions liability coverage indemnifying the Appraisal District from negligence on the part of the Consultant or an intentional act when performing contracted services. Please present a copy of the policy showing per occurrence and aggregate limits. Coverage must be specific to consulting/fee services not agent/commission services and noted as such in the certificate presented to the Appraisal District in the RFP response.
i. Required documents that must also be submitted include:
   i. Conflict of Interest Questionnaire
   ii. Disclosure Statement
j. Copy of license in accordance with Texas Insurance Code – Chapter 4052 Life and Health Insurance Counselors; or Chapter 4054 Life, Accident, and Health Agents; or statement for exemption purposes.
k. Provide any past or current actions filed against your firm or charged by the Texas Department of Insurance, and the resolution.

VI. SUBMITTAL REQUIREMENTS

a. Proposals must be clearly marked "BENEFITS CONSULTING AND BROKERAGE SERVICES". Respondent's name and address must appear on the outside of the envelope.
b. Respondent's are required to submit one (1) original, and three (3) copies of the proposed package no later than 2:00pm, Tuesday, May 31, 2022.
c. Proposals should be directed to the attention of Krisha Langton, Chief Human Resources Officer, and clearly labeled in a sealed package.
d. Respondent shall sign and date the Proposal. Proposals which are not signed and dated will be rejected. 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 voice and unacceptable.
e. Specifications and related documents may be obtained from the Human Resources Department at 2801 B. F. Terry Blvd., Rosenberg, Texas 77471, Monday through Friday or from the Appraisal District's website at www.fbcad.org.
f. Pursuant to Texas Government Code 2252.908, the successful bidder must be able to provide the Appraisal District with a printed, executed, and notarized original of a completed Certificate of Interested Parties form (Form 1295) with the signed contract. Failure to do so will result in the Appraisal District's inability to execute the contract. To complete the disclosure of interested parties form, or for further information, please visit the Texas Ethics Commission's website at https://www.ethics.state.tx.us.

VII. EVALUATION AND SELECTION OF PROPOSALS

FBCAD intends to select a Proposal that best meets the needs of the Appraisal District and that provides the best overall value. FBCAD reserves the right to check references on any projects performed by Respondents, whether provided by Respondents or known by FBCAD. Upon review of all information provided by Respondents, the FBCAD Benefits Committee will make a recommendation for selection to FBCAD officials. Upon approval of the selected Respondent, a contract shall be executed by the appropriate FBCAD officials after review and negotiation by legal counsel.

Submitted responses to this RFP will be evaluated using four (4) sets of criteria.

a. The total possible points a proposal may receive is 100 points:
   i. Experience and Qualifications (40 points)
   ii. Proposed Services (30 points)
   iii. Price or costs (20 points)
   iv. Completion Time Schedule and other Project commitments (10 points)

b. Price for consulting services.

   The Appraisal District prefers a flat rate fee for proposed base brokerage services and separate rates or costs for other consulting services requested, but not included in your base proposal. In addition, please include the hourly rates for all work to be required. **The consultant shall not accept commissions, overrides or any form of remuneration from the Appraisal District's insurers and/or service providers in connection with services/products purchased by the Appraisal District.**

VIII. CONTRACT PERIOD

The Request for Proposal is for Benefits Consulting and Brokerage Services for a two (2) year period that begins July 1, 2022 and ends June 30, 2024. The Appraisal District will have an option to renew the contract by mutual agreement for two (2) additional one-year terms for a total of four (4) years. Award or renewal of the contract shall be authorized by the Board of Directors. Appropriations for such contract or renewal expenditures shall be authorized by the Board of Directors during the budget process. If the Appraisal District's Board of Directors does not appropriate funds to make any payment for a fiscal year after the Appraisal District's fiscal year in which the Contract becomes effective and there are no proceeds available for payment, then the Contract automatically terminates at the beginning of the first day of the successive fiscal year. (Section 5, Article XI, Texas Constitution)

IX. TERMINATION

Either party may terminate this Agreement at any time by giving 60 days written notice to the other party of its intention to terminate as of the date specified in the notice.

X. REVISIONS TO THE RFP

The Appraisal District reserves the right to cancel, in part or in its entirety, the RFP including but not limited to: submittal date and submittal requirements. If the Appraisal District cancels or revises the

RFP, all known proposers will be notified in writing by the Appraisal District and any addendum to the RFP will also be posted on the Appraisal District's website.

XI. RESERVATIONS

The Appraisal District reserves the right to reject any or all proposals. Those submitting a proposal for this project are responsible for any and all costs associated with the preparation and submissions of a proposal in response to this RFP.

All proposals submitted will be deemed confidential during the evaluation process. During the evaluation process, proposals will not be available for review by anyone other than the Appraisal District personnel and/or authorized agents unless otherwise directed by law, including the Public Information Act. All materials submitted to the Appraisal District become public property and are subject to the Texas Public Information Act. If a proposer does not desire proprietary information in the proposal to be disclosed, each page must be identified and marked proprietary at the time of the submittal. The Appraisal District will, to the extent allowed by law, endeavor to protect such information from disclosure. The final decision is to what information may be disclosed, however, lies with the Texas Attorney General.

XII. ASSIGNMENT

The potential agreement with the proposer resulting from this RFP is a contract for the service of the firm and firm's interest in such agreement; duties thereunder and/or fees due thereunder may not be assigned or delegated to a third party. The benefits and burdens of this agreement are, however, assignable by the Appraisal District.

XIII. GOVERNING LAW AND VENUE

The RFP and any subsequent RFP, and resulting agreement or purchase order, shall be construed and governed by the laws of the State of Texas, except conflict of laws provisions, and no lawsuit shall be prosecuted on contract except in a court to competent jurisdiction located in Fort Bend County, Texas.

XIV. PROPOSER'S CERTIFCATION

Submissions must include the following:
I (We) certify that I (we) are authorized by the Company or Companies proposed to offer this (these) proposal(s):

____
Company Submitting Proposal

____
Authorized Signature and Title

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. *See* Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 **Name of vendor who has a business relationship with local governmental entity.**

2 ☐ **Check this box if you are filing an update to a previously filed questionnaire.** (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 **Name of local government officer about whom the information is being disclosed.**

Name of Officer

4 **Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.**

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes ☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

☐ Yes ☐ No

5 **Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.**

6 ☐ Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7

Signature of vendor doing business with the governmental entity

Date

CONFLICT OF INTEREST QUESTIONNAIRE
For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

(A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
(B) a transaction conducted at a price and subject to terms available to the public; or
(C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

(a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

***

(2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds $2,500 during the 12-month period preceding the date that the officer becomes aware that

(i) a contract between the local governmental entity and vendor has been executed; or
(ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than $100 in the 12-month period preceding the date the officer becomes aware that:

(i) a contract between the local governmental entity and vendor has been executed; or
(ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

(a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

(1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);
(2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or
(3) has a family relationship with a local government officer of that local governmental entity.

(a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

(1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or
(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

(2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);
(B) that the vendor has given one or more gifts described by Subsection (a); or
(C) of a family relationship with a local government officer.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY

1 **Name of business entity filing form, and the city, state and country of the business entity's place of business.**

2 **Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**

3 **Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**

4

Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary

5 **Check only if there is NO Interested Party.** ☐

6 **UNSWORN DECLARATION**

My name is ____, and my date of birth is ___________________________.

My address is ____, __________________, _______, _________, ____________.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in __________________ County, State of ____________ , on the ______ day of ____________, 20_____.
(month) (year)

____
Signature of authorized agent of contracting business entity
(Declarant)

ADD ADDITIONAL PAGES AS NECESSARY