STATE PURCHASING DIVISION OF THE GENERAL SERVICES DEPARTMENT AND OFFICE OF SUPERINTENDENT OF INSURANCE (OSI)

REQUEST FOR PROPOSALS (RFP)

HEALTH INSURANCE ESSENTIAL HEALTH BENEFITS PLAN EVALUATION ACTUARIAL SERVICES



RFP#20-440-4000-00005

RELEASE DATE: May 4, 2019

DUE DATE: June 3, 2019

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I. INTRODUCTION

A. PURPOSE OF THIS REQUEST FOR PROPOSAL

The purpose of the Request for Proposal (RFP) is to solicit sealed proposals to establish a prequalified pool of Vendors to provide actuarial services in analysis and potential selection of an essential health benefits benchmark plan. The Affordable Care Act requires non-grandfathered health plans in the individual and small group markets to cover essential health benefits, which include items and services in the following ten benefit categories: (1) ambulatory patient services; (2) emergency services; (3) hospitalization; (4) maternity and newborn care; (5) mental health and substance use disorder services including behavioral health treatment; (6) prescription drugs; (7) rehabilitative and habilitative services and devices; (8) laboratory services; (9) preventive and wellness services and chronic disease management; and (10) pediatric services, including oral and vision care. The essential health benefits benchmark plan sets the standards for benefits coverage in each of these ten categories.

For plan year 2020 and after, federal regulation and guidance in the Final 2019 HHS Notice of Benefits and Payment Parameters provides states with greater flexibility in establishing standards for updates to their EHB benchmark plans, if they choose. With this flexibility, CMS now allows states to select one of the three following options:

- Option 1: Selecting the EHB-benchmark plan that another State used for the 2017 plan year.
- Option 2: Replacing one or more categories of EHBs under its EHB-benchmark plan used for the 2017 plan year with the same category or categories of EHB from the EHB-benchmark plan that another State used for the 2017 plan year.
- Option 3: Otherwise selecting a set of benefits that would become the State's EHB-benchmark plan,

New Mexico's Office of the Superintendent of Insurance (OSI) seeks to evaluate and potentially update its current EHB-benchmark plan. OSI's current plan selection is a small group plan offered in plan year 2012. During the years this plan has been in effect, OSI and stakeholders have identified issues with benefit coverages that it seeks to address. Specifically, OSI has identified coverage concerns with benefits in the mental health and substance use category benefit and benefits for habilitative and rehabilitative services. The Vendor will provide OSI actuarial, organizational, and analysis services to support this EHB-benchmark plan analysis and selection process.

B. BACKGROUND INFORMATION

OSI staff actively monitor and regulate the private individual and small group health insurance industry. OSI staff evaluate how well New Mexico health insurance providers are meeting the needs of New Mexico consumers. OSI staff performs an annual review of health insurance carriers

offering major medical plans in the commercial marketplace. Through this review and public feedback, OSI staff have identified areas of concern with the state's EHB-benchmark plan.

OSI will be using federal grant funding to fund the analysis of its EHB-benchmark plan options. The Contractor will work with actuarial staff and assistants, legal staff, and plan review and oversight staff in the process of evaluating and potentially selecting a new EHB-benchmark plan.

C. SCOPE OF PROCUREMENT

The contract is anticipated to commence on or about **July 1, 2019**, and continue through **October 30, 2020**. OSI, with approval of the State Purchasing Division, reserves the option to extend the resulting contract for up to three optional renewals of one year each, from the original contract start date.

D. PROCUREMENT MANAGER

1. OSI has assigned a Procurement Manager who is responsible for the conduct of this procurement whose name, address, telephone number and e-mail address are listed below:

Name: **Dorothy Mendonca, Procurement Manager**

Address: 1120 Paseo de Peralta, Room 217

Santa Fe, NM 87501

Telephone: (505) 827-8453 Fax: (505) 827-4734

Email: <u>Dorothy.Mendonca@state.nm.us</u>

2. All deliveries of responses via express carrier must be addressed as follows:

Name: Dorothy Mendonca

Reference RFP Name: Essential Health Benefits Benchmark Plan Actuarial

Services

RFP # 20-440-4000-00003

Address: 1120 Paseo de Peralta, Room 217

Santa Fe, NM 87502

3. **Any inquiries or requests** regarding this procurement should be submitted, in writing, to the Procurement Manager. Offerors may contact ONLY the Procurement Manager regarding this procurement. Other state employees or Evaluation Committee members do not have the authority to respond on behalf of the Agency. **Protests of the solicitation or award must be delivered by mail to the Protest Manager.** As a Protest Manager has been named in Section II. B, 11 of this Request for Proposals, pursuant to NMSA 1978, § 13-1-172, ONLY protests delivered directly to the Protest Manager in writing and in a timely fashion will be considered to have been submitted properly and in accordance with statute, rule and this Request for Proposals. Emailed protests will not be considered as properly submitted nor will protests delivered to the Procurement Manager be considered properly submitted.

E. DEFINITION OF TERMINOLOGY

This section contains definitions of terms used throughout this procurement document, including appropriate abbreviations:

- "Actuarial Services" means services that measure and manage risk and uncertainty.
- "Agency" means the State Purchasing Division of the General Services Department or the State Agency sponsoring the Procurement action.
- "Authorized Purchaser" means an individual authorized by a Participating Entity to place orders against this contract.
- "Award" means the final execution of the contract document.
- "Behavioral Health Services" means assessment, diagnosis, treatment or counseling in the context of a professional relationship to assist an individual or group alleviate behavioral symptoms, conditions or disorders, including mental health diagnoses and substance use disorders, as well as other services to address developmental disability or developmental delay.
- "Benchmark Plan" means the plan each state uses to define essential health benefits within that state for individual and small group.
- "Business Hours" means 8:00 AM thru 5:00 PM Mountain Standard or Mountain Daylight Time, whichever is in effect on the date given.
- "Center for Consumer Information & Insurance Oversight (CCIIO)" means a division within the Centers for Medicare & Medicaid Services (CMS), charged with helping implement many reforms of the Affordable Care Act, working closely with state regulators, consumers, and other stakeholders to maintain health insurance marketplaces for the implementation of the provisions of the ACA as it relates to private health insurance.
- "Claim" means a request from a provider for payment for health care services rendered.
- "Close of Business" means 5:00 PM Mountain Standard or Daylight Time, whichever is in use at that time.
- "Confidential" means confidential financial information concerning offeror's organization and data that qualifies as a trade secret in accordance with the Uniform Trade Secrets Act NMSA 1978 57-3-A-1 to 57-3A-7. See NMAC 1.4.1.45. As one example, no information that could be obtained from a source outside this request for proposals can be considered confidential information.
- "Contract" means any agreement for the procurement of items of tangible personal property, services or construction.

- "Contractor" means any business having a contract with a state agency or local public body.
- "Co-insurance" is a cost-sharing method that requires a covered person to pay a stated percentage of medical expenses after the deductible amount, if any, is paid; co-insurance rates may differ for different types of services under the same health benefits plan.
- "Comparison plan test" is the test that requires the state to compare the value of the new benchmark to the most generous of a set of comparison health plans, which include the 2017 essential health benefits-benchmark plans and the three largest small group products from the base benchmark options for the 2017 plan year.
- "Copayment" is a cost-sharing method that requires an insured person to pay a fixed dollar amount when a medical service is received or when purchasing medicine after the deductible amount, with the health insurance carrier paying the balance; there may be different copayment amounts for different types of services under the same health benefits plan
- "Cost-sharing" means a copayment, co-insurance, deductible, or any other form of financial obligation of a covered person other than premium or share of premium, or any combination of any of these financial obligations as defined by the terms of the health benefits plan.
- "Covered Benefits" means those health care services to which a covered person is entitled under the terms of a health benefits plan.
- "Covered Person" or "Enrollee" means a policyholder, subscriber, policyholder or subscriber's enrolled dependent or dependents, or other individual participating in a health benefits plan
- "Deductible" means a fixed dollar amount that a covered person may be required to pay during a benefit period before the health insurance carrier begins payment for covered benefits; health benefits plans may have both individual and family deductibles and separate deductibles for specific services.
- "**Determination**" means the written documentation of a decision of a procurement officer including findings of fact required to support a decision. A determination becomes part of the procurement file to which it pertains.
- "Desirable" the terms "may", "can", "should", "preferably", or "prefers" identify a desirable or discretionary item or factor.
- "Electronic Version/Copy" means a digital form consisting of text, images or both readable on computers or other electronic devices that includes all content that the Original and Hard Copy proposals contain. The digital form may be submitted using a compact disc (cd) or USB flash drive. The electronic version/copy can NOT be emailed.
- "Enrollee" or "Covered Person" means a policyholder, subscriber, policyholder or subscriber's enrolled dependent or dependents, or other individual participating in a health benefits plan.

- "Essential Health Benefits" means a set of 10 categories of services health insurance plans must cover under the Affordable Care Act. These include doctors' services, inpatient and outpatient hospital care, prescription drug coverage, pregnancy and childbirth, mental health services, and more. Some plans cover more services. Plans must offer dental coverage for children. Dental benefits for adults are optional.
- "Evaluation Committee" means a body appointed to perform the evaluation of Offerors' proposals.
- "Evaluation Committee Report" means a report prepared by the Procurement Manager and the Evaluation Committee for contract award. It will contain written determinations resulting from the procurement.
- "Finalist" means an Offeror who meets all the mandatory specifications of this Request for Proposals and whose score on evaluation factors is sufficiently high to merit further consideration by the Evaluation Committee.
- "Habilitative/Habilitation Services" means health care services that help you keep, learn, or improve skills and functioning for daily living. Examples include therapy for a child who isn't walking or talking at the expected age.
- "Health Care Professional" means a physician or other health care practitioner, including a pharmacist or practitioner of the healing arts, who is licensed, certified or otherwise authorized by the state to provide health care services consistent with state law
- "Hourly Rate" means the proposed fully loaded maximum hourly rates that include travel, per diem, fringe benefits and any overhead costs for contractor personnel, as well as subcontractor personnel if appropriate.
- "IT" means Information Technology.
- "Mandatory" the terms "must", "shall", "will", "is required", or "are required", identify a mandatory item or factor. Failure to meet a mandatory item or factor will result in the rejection of the Offeror's proposal.
- "Mental Health Parity" means the equal treatment of medical services and mental health conditions and substance use disorders in insurance plans.
- "Mental Health Parity and Addiction Equity Act (MHPAEA)" refers to the federal law that generally prevents group health plans and health insurance issuers that provide mental health or substance use disorder (MH/SUD) benefits from imposing less favorable benefit limitations on those benefits than on medical/surgical benefits.
- "Minor Technical Irregularities" means anything in the proposal that does not affect the price quality and quantity or any other mandatory requirement.

- "Multiple Source Award" means an award of an indefinite quantity contract for one or more similar services, items of tangible personal property or construction to more than one Offeror.
- "New Mexico Health Insurance Exchange (NMHIX)" means the marketplace source organization, a quasi-government agency, for individual and small group Qualified Health Plans (QHP) offered in New Mexico.
- "Offeror" is any person, corporation, or partnership who chooses to submit a proposal.
- "Preventive Care" means health care services provided for prevention and early detection of disease, illness, injury or other health condition.
- "Price Agreement" means a definite quantity contract or indefinite quantity contract which requires the contractor to furnish items of tangible personal property, services or construction to a state agency or a local public body which issues a purchase order, if the purchase order is within the quantity limitations of the contract, if any.
- "**Procurement Manager**" means any person or designee authorized by a state agency or local public body to enter into or administer contracts and make written determinations with respect thereto.
- "**Procuring Agency**" means all State of New Mexico agencies, commissions, institutions, political subdivisions and local public bodies allowed by law to entertain procurements.
- "**Project**" means a temporary process undertaken to solve a well-defined goal or objective with clearly defined start and end times, a set of clearly defined tasks, and a budget. The project terminates once the project scope is achieved and project acceptance is given by the project executive sponsor.
- "Qualified Health Plan (QHP)" means a health plan certified by the marketplace to meet new benefit and cost sharing standards under the Affordable Care Act.
- "**Redacted**" means a version/copy of the proposal with the information considered confidential as defined by NMAC 1.4.1.45 and defined herein and outlined in Section II.C.8 of this RFP blacked out BUT NOT omitted or removed.
- "Rehabilitative/Rehabilitation Services" means health care services that help you keep, get back, or improve skills and functioning for daily living that have been lost or impaired because you were sick, hurt, or disabled. These services may include physical and occupational therapy, speechlanguage pathology, and psychiatric rehabilitation services in a variety of inpatient and/or outpatient settings.
- "Request for Proposals (RFP)" means all documents, including those attached or incorporated by reference, used for soliciting proposals.
- "Responsible Offeror" means an Offeror who submits a responsive proposal and who has furnished, when required, information and data to prove that his financial resources, production or service

facilities, personnel, service reputation and experience are adequate to make satisfactory delivery of the services, or items of tangible personal property described in the proposal.

"Responsive Offer" or means an offer which conforms in all material respects to the requirements set forth in the request for proposals. Material respects of a request for proposals include, but are not limited to price, quality, quantity or delivery requirements.

"Sealed" means, in terms of a non-electronic submission, that the proposal is enclosed in a package which is completely fastened in such a way that nothing can be added or removed. Open packages submitted will not be accepted except for packages that may have been damaged by the delivery service itself. The State reserves the right, however, to accept or reject packages where there may have been damage done by the delivery service itself. Whether a package has been damaged by the delivery service or left unfastened and should or should not be accepted is a determination to be made by the Procurement Manager. By submitting a proposal, the Offeror agrees to and concurs with this process and accepts the determination of the Procurement Manager in such cases.

"Superintendent" means the superintendent of insurance, the office of superintendent of insurance (OSI), or employees of OSI acting with the superintendent's authorization.

"**Staff**" means any individual who is a full-time, part-time, or an independently contracted employee with the Offerors' company.

"State (the State)" means the State of New Mexico.

"State Agency" means any department, commission, council, board, committee, institution, legislative body, agency, government corporation, educational institution or official of the executive, legislative or judicial branch of the government of this state. "State agency" includes the purchasing division of the general services department and the state purchasing agent but does not include local public bodies.

"State Purchasing Agent" means the director of the purchasing division of the general services department.

"Statement of Concurrence" means an affirmative statement from the Offeror to the required specification agreeing to comply and concur with the stated requirement(s). This statement shall be included in Offerors proposal. (E.g. "We concur", "Understands and Complies", "Comply", "Will Comply if Applicable" etc.)

"Typical employer plan" for purposes of essential health benefits actuarial methodology documentation and reporting, means one of the state's ten base benchmark plan options from the 2017 plan year, or the plan with the largest enrollment in one of the five largest group major medical health insurance products, by enrollment.

"Unredacted" means a version/copy of the proposal containing all complete information including any that the Offeror would otherwise consider confidential, such copy for use only for the purposes of evaluation.

"Vendor" means any business having a contract with a state agency or local public body.

"Written" means typewritten on standard 8 ½ x 11-inch paper. Larger paper is permissible for charts, spreadsheets, etc.

F. PROCUREMENT LIBRARY

A procurement library has been established. Offerors are encouraged to review the material contained in the Procurement Library by selecting the link provided in the electronic version of this document through your own internet connection or by contacting the Procurement Manager and scheduling an appointment. The library contains information listed below:

Procurement library can be accessed at: www.osi.state.mm.us

The library contains information listed below:

Request for Proposals # 20-440-4000-00003

II. CONDITIONS GOVERNING THE PROCUREMENT

This section of the RFP contains the schedule, description and conditions governing the procurement.

A. SEQUENCE OF EVENTS

The Procurement Manager will make every effort to adhere to the following schedule:

Action	Responsible Party	Due Dates Sample Time
		Frames
1. Issue RFP	Procurement Manager	May 4, 2019
2. Distribution List	Agency	May 4, 2019
2. Acknowledgement of	Potential	May 13, 2019
Receipt	Offerors/Agency	
3. Deadline to submit	Potential Offerors	May 20, 2019
Questions		
4. Response to Written	Procurement Manager	May 23, 2019
Questions		
5. Deadline to submit	Potential Offerors	May 24, 2019
Organizational References		
5. Submission of Proposal	Potential Offerors	June 3, 2019
THE FOLLOWING DATES	ARE TARGET	AND SUBJECT TO
	DATES ONLY	CHANGE

6. Proposal Evaluation	Evaluation Committee	June 3 thru June 10, 2019
7. Selection of Finalists	Evaluation Committee	June 17, 2019
8. Recommendation to OSI	Procurement Manager	June 19, 2019
Management		
9. Finalize Contractual	Agency/Finalist	June 25, 2019
Agreements	Offerors	
10. Contract Awards	Agency/ Finalist	June 28, 2019
	Offerors	
13. Protest Deadline	Agency	+ 15 days

B. EXPLANATION OF EVENTS

The following paragraphs describe the activities listed in the sequence of events shown in Section II. A., above.

1. Issuance of RFP

This RFP is being issued on behalf of the New Mexico Office of Superintendent of Insurance on the date indicated on **Section A., Sequence of Events**.

2. Acknowledgement of Receipt

Potential Offerors should hand deliver, return by facsimile or registered or certified mail the "Acknowledgement of Receipt of Request for Proposals Form" that accompanies this document, APPENDIX A, to have their organization placed on the procurement distribution list. The form should be signed by an authorized representative of the organization, dated and returned to the Procurement Manager by 3:00 pm MST or MDT per **Section A., Sequence of Events.**

The procurement distribution list will be used for the distribution of written responses to questions. Failure to return the Acknowledgement of Receipt form shall constitute a presumption of receipt and rejection of the RFP, and the potential Offeror's organization name shall not appear on the distribution list.

3. Deadline to Submit Written Questions

Potential Offerors may submit written questions to the Procurement Manager as to the intent or clarity of this RFP until 3:00 PM Mountain Standard Time/Daylight Time per **Section A., Sequence of Events.** All written questions must be addressed to the Procurement Manager as declared in Section I, Paragraph D. Questions shall be clearly labeled and shall cite the Section(s) in the RFP or other document which form the basis of the question.

4. Response to Written Questions

Written responses to written questions will be distributed as indicated in the sequence of events to all potential Offerors whose organization name appears on the procurement distribution list. An e-mail copy will be sent to all Offeror's that provide Acknowledgement of Receipt Forms described in II.B.2 before the deadline. Additional copies will be posted to:

www.osi.state.nm.us

5. Submission of Proposal

ALL OFFEROR PROPOSALS MUST BE RECEIVED FOR REVIEW AND EVALUATION BY THE PROCUREMENT MANAGER OR DESIGNEE NO LATER THAN 3:00 PM MOUNTAIN STANDARD TIME/DAYLIGHT TIME per **Section A., Sequence of Events.** Proposals received after this deadline will not be accepted. The date and time of receipt will be recorded on each proposal.

Proposals must be addressed and delivered to the Procurement Manager at the address listed in Section I, Paragraph D2. Proposals must be sealed and labeled on the outside of the package to clearly indicate that they are in response to the "Essential Health Benefits Actuarial Services" and RFP#20-440-4000-00003. Proposals submitted by facsimile, or other electronic means, will not be accepted.

A public log will be kept of the names of all Offeror organizations that submitted proposals. Pursuant to NMSA 1978, § 13-1-116, the contents of proposals shall not be disclosed to competing potential Offerors during the negotiation process. The negotiation process is deemed to be in effect until the contract is awarded pursuant to this Request for Proposals. Awarded in this context means the final required state agency signature on the contract(s) resulting from the procurement has been obtained.

6. Proposal Evaluation

An Evaluation Committee will perform the evaluation of proposals. This process will take place as indicated in the sequence of events, depending upon the number of proposals received. During this time, the Procurement Manager may initiate discussions with Offerors who submit responsive or potentially responsive proposals for the purpose of clarifying aspects of the proposals. However, proposals may be accepted and evaluated without such discussion. Discussions SHALL NOT be initiated by the Offerors.

7. Selection of Finalists

The Evaluation Committee will select and the Procurement Manager will notify the finalist Offerors as per schedule Section II. A., Sequence of Events or as soon as possible. A schedule for the oral presentation and demonstration will be determined at this time.

8. Finalize Contractual Agreements

Any Contractual agreement(s) resulting from this RFP will be finalized with the most advantageous Offeror(s) as per schedule **Section II. A., Sequence of Events** or as soon thereafter as possible. This date is subject to change at the discretion of the State Purchasing Division or relevant Agency Procurement office. In the event mutually agreeable terms cannot be reached with the apparent most advantageous Offeror in the time specified, the State reserves the right to finalize a contractual agreement with the next most advantageous Offeror(s) without undertaking a new procurement process.

9. Contract Awards

After review of the Evaluation Committee Report and the signed contractual agreement, the Agency Procurement office will award as per the schedule in **Section II. A., Sequence of Events** or as soon as possible thereafter. This date is subject to change at the discretion of the State Purchasing Division or relevant Agency Procurement office.

The contract shall be awarded to the Offeror (or Offerors) whose proposals are most advantageous to the State of New Mexico and the Office of Superintendent of Insurance, taking into consideration the evaluation factors set forth in this RFP. The most advantageous proposal may or may not have received the most points. The award is subject to appropriate Department and State approval.

10. Protest Deadline

Any protest by an Offeror must be timely and in conformance with NMSA 1978, § 13-1-172 and applicable procurement regulations. As a Protest Manager has been named in this Request for Proposals, pursuant to NMSA 1978, § 13-1-172, ONLY protests delivered directly to the Protest Manager in writing and in a timely fashion will be considered to have been submitted properly and in accordance with statute, rule and this Request for Proposals. The 15 calendar day protest period shall begin on the day following the award of contracts and will end at 5:00 pm Mountain Standard Time/Daylight Time on the 15th day. Protests must be written and must include the name and address of the protestor and the request for proposal number. It must also contain a statement of the grounds for protest including appropriate supporting exhibits and it must specify the ruling requested from the party listed below. The protest must be delivered to:

Robert Doucette, Deputy Superintendent Office of Superintendent of Insurance 1120 Paseo De Peralta, Room 217 Santa Fe, New Mexico 87502

Protests received after the deadline will not be accepted.

C. GENERAL REQUIREMENTS

1. Acceptance of Conditions Governing the Procurement

Potential Offerors must indicate their acceptance of the Conditions Governing the Procurement section in the letter of transmittal. Submission of a proposal constitutes acceptance of the Evaluation Factors contained in Section V of this RFP.

2. Incurring Cost

Any cost incurred by the potential Offeror in preparation, transmittal, and/or presentation of any proposal or material submitted in response to this RFP shall be borne solely by the Offeror. Any cost incurred by the Offeror for set up and demonstration of the proposed equipment and/or system shall be borne solely by the Offeror.

3. Prime Contractor Responsibility

Any contractual agreement that may result from this RFP shall specify that the prime contractor is solely responsible for fulfillment of all requirements of the contractual agreement with a state agency which may derive from this RFP. The state agency entering into a contractual agreement with a vendor will make payments to only the prime contractor.

4. Subcontractors/Consent

The use of subcontractors is allowed. The prime contractor shall be wholly responsible for the entire performance of the contractual agreement whether or not subcontractors are used. Additionally, the prime contractor must receive approval, in writing, from the agency awarding any resultant contract, before any subcontractor is used during the term of this agreement.

5. Amended Proposals

An Offeror may submit an amended proposal before the deadline for receipt of proposals. Such amended proposals must be complete replacements for a previously submitted proposal and must be clearly identified as such in the transmittal letter. The Agency personnel will not merge, collate, or assemble proposal materials.

6. Offeror's Rights to Withdraw Proposal

Offerors will be allowed to withdraw their proposals at any time prior to the deadline for receipt of proposals. The Offeror must submit a written withdrawal request addressed to the Procurement Manager and signed by the Offeror's duly authorized representative.

The approval or denial of withdrawal requests received after the deadline for receipt of the proposals is governed by the applicable procurement regulations.

7. Proposal Offer Firm

Responses to this RFP, including proposal prices for services, will be considered firm for one hundred twenty (120) days after the due date for receipt of proposals or ninety (90) days after the due date for the receipt of a best and final offer, if the Offeror is invited or required to submit one.

8. Disclosure of Proposal Contents

- A. Proposals will be kept confidential until negotiations and the award are completed by the Agency. At that time, all proposals and documents pertaining to the proposals will be open to the public, except for material that is clearly marked proprietary or confidential. The Procurement Manager will not disclose or make public any pages of a proposal on which the potential Offeror has stamped or imprinted "proprietary" or "confidential" subject to the following requirements:
- B. Proprietary or confidential data shall be readily separable from the proposal in order to facilitate eventual public inspection of the non-confidential portion of the proposal.
- C. Confidential data is restricted to:
 - 1. confidential financial information concerning the Offeror's organization;
 - 2. and data that qualifies as a trade secret in accordance with the Uniform Trade Secrets Act, NMSA 1978 § 57-3A-1 to 57-3A-7.
 - 3. PLEASE NOTE: The price of products offered or the cost of services proposed shall not be designated as proprietary or confidential information.

If a request is received for disclosure of data for which an Offeror has made a written request for confidentiality, the Agency shall examine the Offeror's request and make a written determination that specifies which portions of the proposal should be disclosed. Unless the Offeror takes legal action to prevent the disclosure, the proposal will be so disclosed. The proposal shall be open to public inspection subject to any continuing prohibition on the disclosure of confidential data.

9. No Obligation

This RFP in no manner obligates the State of New Mexico or any of its Agencies to the use of any Offeror's services until a valid written contract is awarded and approved by appropriate authorities.

10. Termination

This RFP may be canceled at any time and any and all proposals may be rejected in whole or in part when the agency determines such action to be in the best interest of the State of New Mexico.

11. Sufficient Appropriation

Any contract awarded as a result of this RFP process may be terminated if sufficient appropriations or authorizations do not exist. Such terminations will be effected by sending written notice to the contractor. The Agency's decision as to whether sufficient appropriations and authorizations are available will be accepted by the contractor as final.

12. Legal Review

The Agency requires that all Offerors agree to be bound by the General Requirements contained in this RFP. Any Offeror's concerns must be promptly submitted in writing to the attention of the Procurement Manager.

13. Governing Law

This RFP and any agreement with an Offeror which may result from this procurement shall be governed by the laws of the State of New Mexico.

14. Basis for Proposal

Only information supplied, in writing, by the Agency through the Procurement Manager or in this RFP should be used as the basis for the preparation of Offeror proposals.

15. Contract Terms and Conditions

The contract between an agency and a contractor will follow the format specified by the Agency and contain the terms and conditions set forth in the Sample Contract Appendix C. However, the contracting agency reserves the right to negotiate provisions in addition to those contained in this RFP (Sample Contract) with any Offeror. The contents of this RFP, as revised and/or supplemented, and the successful Offeror's proposal will be incorporated into and become part of any resultant contract.

The Agency discourages exceptions from the contract terms and conditions as set forth in the RFP Sample Contract. Such exceptions may cause a proposal to be rejected as nonresponsive when, in the sole judgment of the Agency (and its evaluation team), the proposal appears to be conditioned on the exception, or correction of what is deemed to be a deficiency, or an unacceptable exception is proposed which would require a substantial proposal rewrite to correct.

Should an Offeror object to any of the terms and conditions as set forth in the RFP Sample Contract (APPENDIX C) strongly enough to propose alternate terms and conditions in spite of the above, the Offeror must propose **specific** alternative language. The Agency may or may not accept the alternative language. General references to the Offeror's terms and conditions or attempts at complete substitutions of the Sample Contract are not acceptable to the Agency and will result in disqualification of the Offeror's proposal.

Offerors must provide a brief discussion of the purpose and impact, if any, of each proposed change followed by the specific proposed alternate wording.

If an Offeror fails to propose any alternate terms and conditions during the procurement process (the RFP process prior to selection as successful Offeror), no proposed alternate terms and conditions will be considered later during the negotiation process. Failure to propose alternate terms and conditions during the procurement process (the RFP process prior to selection as successful Offeror) is an **explicit agreement** by the Offeror that the contractual terms and conditions contained herein are **accepted** by the Offeror.

16. Offeror's Terms and Conditions

Offerors must submit with the proposal a complete set of any additional terms and conditions they expect to have included in a contract negotiated with the Agency. Please see Section II.C.15 for requirements.

17. Contract Deviations

Any additional terms and conditions, which may be the subject of negotiation (such terms and conditions having been proposed during the procurement process, that is, the RFP process prior to selection as successful Offeror), will be discussed only between the Agency and the Offeror selected and shall not be deemed an opportunity to amend the Offeror's proposal.

18. Offeror Qualifications

The Evaluation Committee may make such investigations as necessary to determine the ability of the potential Offeror to adhere to the requirements specified within this RFP. The Evaluation Committee will reject the proposal of any potential Offeror who is not a Responsible Offeror or fails to submit a responsive offer as defined in NMSA 1978, § 13-1-83 and 13-1-85.

19. Right to Waive Minor Irregularities

The Evaluation Committee reserves the right to waive minor irregularities. The Evaluation Committee also reserves the right to waive mandatory requirements provided that all of the otherwise responsive proposals failed to meet the same mandatory requirements and the failure to do so does not otherwise materially affect the procurement. This right is at the sole discretion of the Evaluation Committee.

20. Change in Contractor Representatives

The Agency reserves the right to require a change in contractor representatives if the assigned representative(s) is (are) not, in the opinion of the Agency, adequately meeting the needs of the Agency.

21. Notice of Penalties

The Procurement Code, NMSA 1978, § 13-1-28 through 13-1-199, imposes civil, misdemeanor and felony criminal penalties for its violation. In addition, the New Mexico criminal statutes impose felony penalties for bribes, gratuities and kickbacks.

22. Agency Rights

The Agency in agreement with the Evaluation Committee reserves the right to accept all or a portion of a potential Offeror's proposal.

23. Right to Publish

Throughout the duration of this procurement process and contract term, Offerors and contractors must secure from the agency written approval prior to the release of any information that pertains to the potential work or activities covered by this procurement and/or agency contracts deriving from this procurement. Failure to adhere to this requirement may result in disqualification of the Offeror's proposal or removal from the contract.

24. Ownership of Proposals

All documents submitted in response to the RFP shall become property of the State of New Mexico.

25. Confidentiality

Any confidential information provided to, or developed by, the contractor in the performance of the contract resulting from this RFP shall be kept confidential and shall not be made available to any individual or organization by the contractor without the prior written approval of the Agency.

The Contractor(s) agrees to protect the confidentiality of all confidential information and not to publish or disclose such information to any third party without the procuring Agency's written permission.

26. Electronic mail address required

A large part of the communication regarding this procurement will be conducted by electronic mail (e-mail). Offeror must have a valid e-mail address to receive this correspondence. (See also Section II.B.5, Response to Written Questions).

27. Use of Electronic Versions of this RFP

This RFP is being made available by electronic means. In the event of conflict between a version of the RFP in the Offeror's possession and the version maintained by the agency, the Offeror acknowledges that the version maintained by the agency shall govern.

28. New Mexico Employees Health Coverage

- A. If the Offeror has, or grows to, six (6) or more employees who work, or who are expected to work, an average of at least 20 hours per week over a six (6) month period during the term of the contract, Offeror must agree to have in place, and agree to maintain for the term of the contract, health insurance for those employees if the expected annual value in the aggregate of any and all contracts between Contractor and the State exceed \$250,000 dollars.
- B. Offeror must agree to maintain a record of the number of employees who have (a) accepted health insurance; (b) decline health insurance due to other health insurance coverage already in place; or (c) decline health insurance for other reasons. These records are subject to review and audit by a representative of the state.
- C. Offeror must agree to advise all employees of the availability of State publicly financed health care coverage programs by providing each employee with, as a minimum, the following web site link to additional information http://www.insurenewmexico.state.nm.us/.
- D. For Indefinite Quantity, Indefinite Delivery contracts (price agreements without specific limitations on quantity and providing for an indeterminate number of orders to be placed against it); these requirements shall apply the first day of the second month after the Offeror reports combined sales (from state and, if applicable, from local public bodies if from a state price agreement) of \$250,000.

29. Campaign Contribution Disclosure Form

Offeror must complete, sign, and return the Campaign Contribution Disclosure Form, APPENDIX B, as a part of their proposal. This requirement applies regardless whether a covered contribution was made or not made for the positions of Governor and Lieutenant Governor or other identified official. Failure to complete and return the signed unaltered form will result in disqualification.

30. Letter of Transmittal

Offeror's proposal must be accompanied by the Letter of Transmittal Form located in APPENDIX E which must be completed and signed by an individual person authorized to obligate the company. The letter of transmittal MUST:

- 1. Identify the submitting business entity.
- 2. Identify the name, title, telephone, and e-mail address of the person authorized by the Offeror organization to contractually obligate the business entity providing the Offer.
- 3. Identify the name, title, telephone, and e-mail address of the person authorized to negotiate the contract on behalf of the organization (if different than (2) above).
- 4. Identify the names, titles, telephone, and e-mail addresses of persons to be contacted for clarification/questions regarding proposal content.
- 5. Identify sub-contractors (if any) anticipated to be utilized in the performance of any resultant contract award.
- 6. Describe the relationship with any other entity which will be used in the performance of this awarded contract.
- 7. Identify the following with a check mark and signature where required:
 - a. <u>Explicitly</u> indicate acceptance of the Conditions Governing the Procurement stated in Section II. C.1;
 - b. Explicitly indicate acceptance of Section V of this RFP; and
 - c. Acknowledge receipt of any and all amendments to this RFP.
- 8. Be signed by the person identified in para 2 above.

31. Pay Equity Reporting Requirements

- A. If the Offeror has ten (10) or more employees OR eight (8) or more employees in the same job classification, Offeror must complete and submit the required reporting form (PE10-249) if they are awarded a contract. Out-of-state Contractors that have no facilities and no employees working in New Mexico are exempt if the contract is directly with the out-of-state contractor and fulfilled directly by the out-of-state contractor, and not passed through a local vendor.
- B. For contracts that extend beyond one (1) calendar year, or are extended beyond one (1) calendar year, Offeror must also agree to complete and submit the required form annually within thirty (30) calendar days of the annual bid or proposal submittal anniversary date and, if more than 180 days has elapsed since submittal of the last report, at the completion of the contract.

- C. Should Offeror not meet the size requirement for reporting at contract award but subsequently grows such that they meet or exceed the size requirement for reporting, Offeror must agree to provide the required report within ninety (90) calendar days of meeting or exceeding the size requirement.
- D. Offeror must also agree to levy these reporting requirements on any subcontractor(s) performing more than 10% of the dollar value of this contract if said subcontractor(s) meets, or grows to meet, the stated employee size thresholds during the term of the contract. Offeror must further agree that, should one or more subcontractor not meet the size requirement for reporting at contract award but subsequently grows such that they meet or exceed the size requirement for reporting, offer will submit the required report, for each such subcontractor, within ninety (90) calendar days of that subcontractor meeting or exceeding the size requirement.

32. Disclosure Regarding Responsibility

- A. Any prospective Contractor and any of its Principals who enter into a contract greater than sixty thousand dollars (\$60,000.00) with any state agency or local public body for professional services, tangible personal property, services or construction agrees to disclose whether the Contractor, or any principal of the Contractor's company:
 - 1. is presently debarred, suspended, proposed for debarment, or declared ineligible for award of contract by any federal entity, state agency or local public body;
 - 2. has within a three-year period preceding this offer, been convicted in a criminal matter or had a civil judgment rendered against them for:
 - a. the commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) contract or subcontract:
 - b. violation of Federal or state antitrust statutes related to the submission of offers;
 - c. the commission in any federal or state jurisdiction of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, tax evasion, violation of Federal criminal tax law, or receiving stolen property;
 - 3. is presently indicted for, or otherwise criminally or civilly charged by any (federal state or local) government entity with the commission of any of the offenses enumerated in paragraph A of this disclosure;
 - 4. has, preceding this offer, been notified of any delinquent Federal or state taxes in an amount that exceeds \$3,000.00 of which the liability remains unsatisfied. Taxes are considered delinquent if the following criteria apply.
 - a. The tax liability is finally determined. The liability is finally determined if it has been assessed. A liability is not finally determined if there is a pending administrative or judicial challenge. In the case of a judicial challenge of the

- liability, the liability is not finally determined until all judicial appeal rights have been exhausted.
- b. The taxpayer is delinquent in making payment. A taxpayer is delinquent if the taxpayer has failed to pay the tax liability when full payment was due and required. A taxpayer is not delinquent in cases where enforced collection action is precluded.
- c. Have within a three-year period preceding this offer, had one or more contracts terminated for default by any federal or state agency or local public body.)
- B. Principal, for the purpose of this disclosure, means an officer, director, owner, partner, or a person having primary management or supervisory responsibilities within a business entity or related entities.
- C. The Contractor shall provide immediate written notice to the other party to this Agreement if, at any time during the term of this Agreement, the Contractor learns that the Contractor's disclosure was at any time erroneous or became erroneous by reason of changed circumstances.
- D. A disclosure that any of the items in this requirement exist will not necessarily result in termination of this Agreement. However, the disclosure will be considered in the determination of the Contractor's responsibility and ability to perform under this Agreement. Failure of the Contractor to furnish a disclosure or provide additional information as requested will render the Offeror nonresponsive.
- E. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render, in good faith, the disclosure required by this document. The knowledge and information of a Contractor is not required to exceed that which is the normally possessed by a prudent person in the ordinary course of business dealings.
- F. The disclosure requirement provided is a material representation of fact upon which reliance was placed when making an award and is a continuing material representation of the facts during the term of this Agreement. If during the performance of the contract, the Contractor is indicted for or otherwise criminally or civilly charged by any government entity (federal, state or local) with commission of any offenses named in this document the Contractor must provide immediate written notice to the other party to this Agreement. If it is later determined that the Contractor knowingly rendered an erroneous disclosure, in addition to other remedies available to the Government, the Central Purchasing Officer may terminate the involved contract for cause. Still further the Central Purchasing Officer may suspend or debar the Contractor from eligibility for future solicitations until such time as the matter is resolved to the satisfaction of the Central Purchasing Officer.

33. New Mexico Preferences

To ensure adequate consideration and application of NMSA 1978, § 13-1-21 (as amended), Offerors must include a copy of their preference certificate with their proposal. Certificates for preferences must be obtained through the New Mexico Department of Taxation & Revenue http://www.tax.newmexico.gov/Businesses/in-state-veteran-preference-certification.aspx.

A. New Mexico Business Preference

B. New Mexico Resident Veterans Business Preference

In addition to a copy of the certification, the Offeror should sign and complete the Resident Veterans Preference Certificate form, as provided in this RFP.

An agency shall not award a business both a resident business preference and a resident veteran business preference.

The New Mexico Preferences shall not apply when the expenditures for this RFP includes federal funds.

III. RESPONSE FORMAT AND ORGANIZATION

A. NUMBER OF RESPONSES

Offerors shall submit only one proposal in response to this RFP.

B. NUMBER OF COPIES

1. Hard Copy Responses

Offeror's proposal must be clearly labeled and numbered and indexed as outlined in **Section III.C. Proposal Format**. Proposals must be submitted as outlined below. The original copy shall be clearly marked as such on the front of the binder. Each portion of the proposal (technical/cost) must be submitted in separate binders and must be prominently displayed on the front cover. Envelopes, packages or boxes containing the original and the copies must be clearly labeled and submitted in a sealed envelope, package, or box bearing the following information:

Offerors should deliver:

- 1. **Technical Proposals** One (1) ORIGINAL, five (5) HARD COPIES, and one (1) electronic copy of the proposal containing ONLY the Technical Proposal; ORIGINAL and COPY shall be in separate labeled binders. **The electronic version/copy can NOT be emailed.**
 - ➤ Proposals containing confidential information <u>must</u> be submitted as two separate binders:
 - **Unredacted** version for evaluation purposes
 - **Redacted** version (information blacked out and not omitted or removed) for the public file
- 2. **Cost Proposals** One (1) ORIGINAL, five (5) HARD COPIES, and one (1) electronic copy of the proposal containing ONLY the Cost Proposal; ORIGINAL and COPY of Cost Proposal shall be in separate labeled binders from the Technical Proposals. **The electronic copy can NOT be emailed.**

The electronic version/copy of the proposal <u>must</u> mirror the physical binders submitted (i.e. One (1) unredacted cd/usb, one (1) redacted cd/usb). The electronic version can NOT be emailed.

3. The original, hard copy and electronic copy information **must** be identical. In the event of a conflict between versions of the submitted proposal, the Original hard copy shall govern.

Any proposal that does not adhere to the requirements of this Section and **Section III.C.1 Response Format and Organization**, may be deemed non-responsive and rejected on that basis.

C. PROPOSAL FORMAT

All proposals must be submitted as follows:

Hard copies must be typewritten on standard 8 ½ x 11-inch paper (larger paper is permissible for charts, spreadsheets, etc.) and placed within binders with tabs delineating each section.

1. Proposal Content and Organization

Direct reference to pre-prepared or promotional material may be used if referenced and clearly marked. Promotional material should be minimal. The proposal must be organized and indexed in the following format and must contain, at a minimum, all listed items in the sequence indicated.

Technical Proposal (Binder 1):

- A. Signed Letter of Transmittal
- B. Table of Contents
- C. Proposal Summary (Optional)
- D. Response to Contract Terms and Conditions
- E. Offeror's Additional Terms and Conditions
- F. Response to Specifications (except cost information which shall be included in Cost Proposal/Binder 2 only)
 - 1. Organizational Experience
 - 2. Organizational References
 - 3. Mandatory Specification
 - 4. Desirable Specification
 - 5. Financial Stability Financial information considered confidential should be placed in the **Confidential Information** binder.
 - 6. Performance Surety Bond
 - 7. Signed Campaign Contribution Form
 - 8. New Mexico Preferences (If applicable)
- G. Other Supporting Material (If applicable)

Cost Proposal (Binder 2):

1. Completed Cost Response Form

Within each section of the proposal, Offerors should address the items in the order indicated above. All forms provided in this RFP must be thoroughly completed and included in the appropriate section of the proposal. All discussion of proposed costs, rates or expenses must occur only in Binder #2 on the cost response form.

The proposal summary may be included by potential Offerors to provide the Evaluation Committee with an overview of the proposal; however, this material will not be used in the evaluation process unless specifically referenced from other portions of the Offeror's proposal.

IV. SPECIFICATIONS

Offerors should respond in the form of a thorough narrative to each specification, unless otherwise instructed. The narratives, including required supporting materials will be evaluated and awarded points accordingly.

A. DETAILED SCOPE OF WORK

The Vendor will assist with analysis and selection of a new EHB benchmark plan for the 2021 or later plan year. This analysis will include a monitoring of plan structure for potentially discriminatory benefit design. The Vendor will be responsible for assisting with the creation and submission of documentation supporting its plan selection to CMS. These documents shall include an actuarial certification and report of the plan selected. The Vendor's duties shall include ensuring that plan selection processes comply with federal benchmark selection regulations. The Vendor shall meet regularly and report to OSI staff on progress in delivering on these stated objectives. The Vendor's duties shall include assistance with organizing research into EHB-benchmark plan options.

1. Deliverable One

Assist with current EHB-benchmark plan analysis.

Vendor will assist OSI with analysis of the current EHB-benchmark plan. This analysis will include:

- 1. Evaluation of previously generated materials related to current EHB-benchmark plan coverages.
- 2. Synthesis of data on EHB-benchmark plan performance collected from stakeholders, including legislators, agents and brokers, covered persons, and health care providers.
- 3. Participate in phone calls, webinars, and meetings to discuss current benchmark plan analysis.

2. Deliverable Two

Assist with analysis of options for new EHB benchmark plan.

Vendor will assist OSI with data gathering and analysis of EHB-benchmark plan options. This data gathering and analysis shall include:

1. Collection and organization of data on updated EHB-benchmark plan options, including identification of a comparison plan and typical employer plan.

- 2. Review for compliance with state and federal coverage mandates and nondiscrimination and mental health parity law.
- 3. Identification of potential deficiencies in EHB-benchmark plan options.
- 4. Identification of EHB benchmark plan selection pathway for compliance with federal regulations in new EHB benchmark plan selection.
- 5. Participate in phone calls, webinars, and meetings to discuss benchmark plan options.
- 6. Synthesis of stakeholder feedback from public stakeholder convenings on plan options.
- 7. Provide advice about benchmark plan final selection.

3. Deliverable Three

Creation and submission of documentation supporting its plan selection.

Vendor will assist OSI with creation and submission of documentation to CMS supporting its plan selection decision. This document creation and submission will include:

- 1. Actuarial certification and report of the plan selected.
- 2. Development of any other documents, as needed, to support OSI's plan selection decision with CMS, including, but not limited to:
 - a. EHB State Confirmation Template
 - b. EHB Benchmark Plan Document
 - c. EHB Benchmark Summary Chart Template

B. 3. Assistance with compliance with federal requirements for EHB-benchmark plan selection processes. TECHNICAL SPECIFICATIONS

1. Organizational Experience

Offerors must:

- a) provide a description of relevant corporate experience with state government and private sector. Proof of the experience of all proposed subcontractors must be provided. The narrative must thoroughly describe how the Offeror has supplied expertise for similar contracts and must include the extent of their experience, expertise and knowledge performing insurance actuarial analysis of EHB-benchmark plan selection processes.
- b) indicate how many states it has assisted in analyzing EHB-benchmark plan options.
- c) describe at least two project successes and failures of providing actuarial analysis for state health insurance regulators, ideally related to the EHB-benchmark plan selection process.
- d) describe staff availability to perform contracted services, as well as staff credentials.

2. Organizational References

Offerors should provide a minimum of three (3) references from similar projects performed for private, state or large local government clients within the last three years. Offerors are required to submit APPENDIX F, Organization Reference Questionnaire, to the business references they list. The business references must submit the Reference Form directly to the designee described in Sec I Paragraph D. It is the Offeror's responsibility to ensure the completed forms are received on or before May 24, 2019 for inclusion in the evaluation process.

Organizational References that are not received or are not complete, may adversely affect the vendor's score in the evaluation process. The Evaluation Committee may contact any or all business references for validation of information submitted. If this step is taken, the Procurement Manager and the Evaluation Committee must all be together on a conference call with the submitted reference so that the Procurement Manager and all members of the Evaluation Committee receive the same information. Additionally, the Agency reserves the right to consider any and all information available to it (outside of the Business Reference information required herein), in its evaluation of Offeror responsibility per Section II, Para C.18.

Offerors shall submit the following Business Reference information as part of Offer:

- a) Client name;
- b) Project description;
- c) Project dates (starting and ending);
- d) Technical environment (i.e., Software applications, Internet capabilities, Data communications, Network, Hardware);
- e) Staff assigned to reference engagement that will be designated for work per this RFP; and
- f) Client project manager name, telephone number, fax number and e-mail address.

3. Mandatory Specification

- a) Offerors must provide a description of relevant corporate experience with state government and private sector performing health insurance actuarial analysis and EHBbenchmark plan analysis. The narrative must thoroughly describe examples of prior successful projects providing actuarial services to state insurance regulators, including any assistance provided in EHB-benchmark plan analysis, as applicable. Description must refer to relevant corporate experience in relation to potential application/development of Deliverables above.
- b) Offerors must be or employ health insurance actuaries credentialed with the Academy or Society of Actuaries. Credentialed health insurance actuaries perform all actuarial services under the Contract.

C. BUSINESS SPECIFICATIONS

1. Financial Stability

Offerors must submit copies of the most recent years independently audited financial statements and the most current 10K, as well as financial statements for the preceding three years, if they exist. The submission must include the audit opinion, the balance sheet, and statements of income, retained earnings, cash flows, and the notes to the financial statements. If independently audited financial statements do not exist, Offeror must state the reason and, instead, submit sufficient information (e.g. D & B report) to enable the Evaluation Committee to assess the financial stability of the Offeror.

2. Performance Surety Bond

RESERVED

3. Letter of Transmittal Form

The Offeror's proposal **must** be accompanied by the Letter of Transmittal Form located in APPENDIX E. The form **must** be completed and must be signed by the person authorized to obligate the company.

4. Campaign Contribution Disclosure Form

The Offeror must complete an unaltered Campaign Contribution Disclosure Form and submit a signed copy with the Offeror's proposal. This must be accomplished whether or not an applicable contribution has been made. (See APPENDIX B)

5. Cost

Offerors must complete the Cost Response Form in APPENDIX D. Cost will be measured by programming charges, annual license fees, and Tool maintenance costs. All charges listed on APPENDIX D must be justified and evidence of need documented in the proposal.

6. Resident Business or Resident Veterans Preference

To ensure adequate consideration and application of NMSA 1978, § 13-1-21 (as amended), Offerors must include a copy of their preference certificate in this section. In addition, for resident Veterans Preference, the attached certification Form (APPENDIX G) must accompany any Offer and any business wishing to receive the preference must complete and sign the form.

V. EVALUATION

A. EVALUATION POINT SUMMARY

The following is a summary of evaluation factors with point values assigned to each. These weighted factors will be used in the evaluation of individual potential Offeror proposals by subcategory.

Factors -	Factors – correspond to section IV B and IV C Points Available		
B. Techn	B. Technical Specifications		
B. 1.	Organizational Experience	250	
B. 2.	Organizational References	100	
B. 3.	Mandatory Specifications	420	
C. Busine	C. Business Specifications		
C.1.	Financial Stability	Pass/Fail	
C.2.	Performance Surety Bond	Reserved	
C.3.	Letter Of Transmittal	Pass/Fail	
C.4.	Signed Campaign Contribution Disclosure Form	Pass/Fail	
C.5.	Cost	230	
TOTAL		1,000 points	
C.6. Ne	w Mexico Preference - Resident Vendor Points per		
Section IV	C. 6		
C.6. Ne	w Mexico Preference - Resident Veterans Points per		
Section IV C.6			

Table 1: Evaluation Point Summary

B. EVALUATION FACTORS

1. B.1 Organizational Experience (250 Points)

Points will be awarded based on the thoroughness and clarity of the response of the engagements cited and the perceived validity of the response for each of the 3 areas requested: 1) Relevant experience narrative; 2) Number of successful insurance Carrier market conduct examinations in last 2 years and; 3) % of business revenue derived from insurance Carrier market conduct examinations.

2. B.2 Organizational References (100 Points)

Points will be awarded based upon an evaluation of the responses to a series of questions as per Appendix F.

100 points available. Points will be awarded for each individual response up to 1/3 of the total points for this category; lack of a response will be awarded zero (0) points.

3. B.4 Mandatory Specifications (420 Points)

Points will be awarded based on the thoroughness and clarity of the response of the engagements cited and the perceived validity of the response for each of the 2 areas required: 1) Prior successful evaluation and report development on essential health benefits benchmark plan selection.

4. C.1 Financial Stability (Pass/Fail)

Pass/Fail only. No points assigned.

5. C.2 Performance Bond (Reserved)

RESERVED.

6. C.3 Letter of Transmittal (Pass/Fail)

Pass/Fail only. No points assigned.

7. C.4 Campaign Contribution Disclosure Form (Pass/Fail)

Pass/Fail only. No points assigned.

8. C.5 Cost (230 Points)

The evaluation of each Offeror's cost proposal will be conducted using the following formula:

Lowest Responsive Offer Bid
------ X 230 Available Award Points
This Offeror's Bid

9. C.6. New Mexico Preferences

Percentages will be determined based upon the point based system outlined in NMSA 1978, § 13-1-21 (as amended).

A. New Mexico Business Preference

If the Offeror has provided their Preference Certificate the Preference Points for a New Mexico Business is 5%.

B. New Mexico Resident Veterans Business Preference

If the Offeror has provided their Preference Certificate **and** the Resident Veterans Certification Form the Preference Point are one of the following:

- 10% for less than \$1M (prior year revenue)
- 8% for more than \$1M but less than \$5M (prior year revenue)
- 7% for more than \$5M (prior year revenue)

C. EVALUATION PROCESS

- 1. All Offeror proposals will be reviewed for compliance with the requirements and specifications stated within the RFP. Proposals deemed non-responsive will be eliminated from further consideration.
- 2. The Procurement Manager may contact the Offeror for clarification of the response as specified in Section II. B.7.
- 3. The Evaluation Committee may use other sources of to perform the evaluation as specified in Section II. C.18.
- 4. Responsive proposals will be evaluated on the factors in Section IV, which have been assigned a point value. The responsible Offerors with the highest scores will be selected as finalist Offerors, based upon the proposals submitted. The responsible Offerors whose proposals are most advantageous to the State taking into consideration the evaluation factors in Section IV will be recommended for award (as specified in Section II. B.8). Please note, however, that a serious deficiency in the response to any one factor may be grounds for rejection regardless of overall score.

APPENDIX A

ACKNOWLEDGEMENT OF RECEIPT FORM

APPENDIX A

REQUEST FOR PROPOSAL

Essential Health Benefits Plan Actuarial Services – RFP# 20-440-4000-00003

ACKNOWLEDGEMENT OF RECEIPT FORM

In acknowledgement of receipt of this Request for Proposal the undersigned agrees that s/he has received a complete copy, beginning with the title page and table of contents, and ending with APPENDIX G.

The acknowledgement of receipt should be signed and returned to the Procurement Manager no later than **May 8, 2019** Only potential Offerors who elect to return this form completed with the indicated intention of submitting a proposal will receive copies of all Offeror written questions and the written responses to those questions as well as RFP amendments, if any are issued.

PHONE NO.:
FAX NO.:
STATE:ZIP CODE:
DATE:
FAX NO.: STATE: ZIP CODE:

This name and address will be used for all correspondence related to the Request for Proposal.

Firm does/does not (circle one) intend to respond to this Request for Proposal.

Name: Dorothy Mendonca, Procurement Manager

Address: Health Insurance Essential Health Benefits Plan Actuarial Services

RFP # 20-440-4000-00003

Office of Superintendent of Insurance 1120 Paseo de Peralta, Room 217

Santa Fe. NM 87502

E-mail: Dorothy.Mendonca@state.nm.us

APPENDIX B

CAMPAIGN CONTRIBUTION DISCLOSURE FORM

Campaign Contribution Disclosure Form

Pursuant to NMSA 1978, § 13-1-191.1 (2006), any person seeking to enter into a contract with any state agency or local public body for professional services, a design and build project delivery system, or the design and installation of measures the primary purpose of which is to conserve natural resources must file this form with that state agency or local public body. This form must be filed even if the contract qualifies as a small purchase or a sole source contract. The prospective contractor must disclose whether they, a family member or a representative of the prospective contractor has made a campaign contribution to an applicable public official of the state or a local public body during the two years prior to the date on which the contractor submits a proposal or, in the case of a sole source or small purchase contract, the two years prior to the date the contractor signs the contract, if the aggregate total of contributions given by the prospective contractor, a family member or a representative of the prospective contractor to the public official exceeds two hundred and fifty dollars (\$250) over the two year period.

Furthermore, the state agency or local public body shall void an executed contract or cancel a solicitation or proposed award for a proposed contract if: 1) a prospective contractor, a family member of the prospective contractor, or a representative of the prospective contractor gives a campaign contribution or other thing of value to an applicable public official or the applicable public official's employees during the pendency of the procurement process or 2) a prospective contractor fails to submit a fully completed disclosure statement pursuant to the law.

THIS FORM MUST BE FILED BY ANY PROSPECTIVE CONTRACTOR WHETHER OR NOT THEY, THEIR FAMILY MEMBER, OR THEIR REPRESENTATIVE HAS MADE ANY CONTRIBUTIONS SUBJECT TO DISCLOSURE.

The following definitions apply:

"Applicable public official" means a person elected to an office or a person appointed to complete a term of an elected office, who has the authority to award or influence the award of the contract for which the prospective contractor is submitting a competitive sealed proposal or who has the authority to negotiate a sole source or small purchase contract that may be awarded without submission of a sealed competitive proposal.

"Campaign Contribution" means a gift, subscription, loan, advance or deposit of money or other thing of value, including the estimated value of an in-kind contribution, that is made to or received by an applicable public official or any person authorized to raise, collect or expend contributions on that official's behalf for the purpose of electing the official to either statewide or local office. "Campaign Contribution" includes the payment of a debt incurred in an election campaign, but does not include the value of services provided without compensation or unreimbursed travel or other personal expenses of individuals who volunteer a portion or all of their time on behalf of a candidate or political committee, nor does it include the administrative or solicitation expenses of a political committee that are paid by an organization that sponsors the committee.

"Family member" means spouse, father, mother, child, father-in-law, mother-in-law, daughter-in-law or son-in-law.

"Pendency of the procurement process" means the time period commencing with the public notice of the request for proposals and ending with the award of the contract or the cancellation of the request for proposals.

"Person" means any corporation, partnership, individual, joint venture, association or any other private legal entity.

"Prospective contractor" means a person who is subject to the competitive sealed proposal process set forth in the Procurement Code or is not required to submit a competitive sealed proposal because that person qualifies for a sole source or a small purchase contract.

"Representative of a prospective contractor" means an officer or director of a corporation, a member or manager of a limited liability corporation, a partner of a partnership or a trustee of a trust of the prospective contractor.

DISCLOSURE OF CONTRIBUTIONS:

Contribution Made By:		
Relation to Prospective Contractor:		
Name of Applicable Public Official:		
Date Contribution(s) Made:		
Amount(s) of Contribution(s)		
Nature of Contribution(s)		
Purpose of Contribution(s)		
(Attach extra pages if necessary)		
Signature	Date	
Title (position)		

—OR—		
	GGREGATE TOTAL OVER TWO HUNDRED FIFT an applicable public official by me, a family member	
Signature	Date	
Title (Position)		

APPENDIX C

SAMPLE CONTRACT

STATE OF NEW MEXICO

NAME OF AGENCY	
PROFESSIONAL SERVICES CONTRACT #	

THIS AGREEMENT is made and entered into by and between the State of New Mexico, **Office of Superintendent of Insurance (OSI)** hereafter referred to as the "Agency," and **NAME OF CONTRACT ACTUARY** hereafter referred to as the "Actuary," and is effective as of the date set forth below upon which it is executed by the parties to this agreement.".

IT IS AGREED BETWEEN THE PARTIES:

1. <u>Scope of Work and Deliverables.</u>

- **A.** The Actuary shall perform the following work –
- 1. Assist with current EHB-benchmark plan analysis. The Actuary will assist Agency with completion of analysis of the current EHB-benchmark plan. This analysis will include:
- a. Evaluation of previously generated materials related to current EHB-benchmark plan coverages.
- b. Synthesis of data on EHB-benchmark plan performance collected from stakeholders, including legislators, agents and brokers, covered persons, and health care providers.
- c. Participate in phone calls, webinars, and meetings to discuss current benchmark plan analysis.
- 2. Assist with analysis of options for new EHB benchmark plan. The Actuary will assist the Agency with data gathering and analysis of EHB-benchmark plan options. This data gathering and analysis shall include:
- a. Collection and organization of data on updated EHB-benchmark plan options, including identification of a comparison plan and typical employer plan.
- b. Review for compliance with state and federal coverage mandates and nondiscrimination and mental health parity law.
 - c. Identification of potential deficiencies in EHB-benchmark plan options.
- d. Identification of EHB benchmark plan selection pathway for compliance with federal regulations in new EHB benchmark plan selection.

- e. Participate in phone calls, webinars, and meetings to discuss benchmark plan options.
- f. Synthesis of stakeholder feedback from public stakeholder convenings on plan options.
 - g. Provide advice about benchmark plan final selection.
- 3. **Creation and submission of documentation supporting its plan selection**. Actuary will assist the Agency with creation and submission of documentation to CMS supporting its plan selection decision. This document creation and submission will include:
 - a. Actuarial certification and report of the plan selected.
- b. Development of any other documents, as needed, to support the Agency's plan selection decision with CMS, including, but not limited to:
 - i. EHB State Confirmation Template
 - ii. EHB Benchmark Plan Document
 - iii. EHB Benchmark Summary Chart Template
- c. Assistance with compliance with federal requirements for EHB-benchmark plan selection processes.

4. **Reporting and administration of contract.**

- a. **Status Reports** The Actuary shall provide Agency a bi-monthly status report no later than 15 days after the end of each period. Exhibit B as attached to this contract is the sample format of the required status report. Note that it is cumulative with the most recent update listed at the front of the status report under the heading "General Comments". The prior General Comments shall remain in each status report with oldest at the end of the status report and the more recent towards the beginning of the status report. The status report shall be submitted with each bimonthly billing as a separate email addressed to the Agency.
- **i. General Comments;** The following must be addressed in General Comments of the Status Report:
- **1. Delays/Additional Expense** Indicate if project is being delayed by Actuary. How it is being delayed. Provide suggestions as to how the delay might be resolved. Indicate if the delay is causing additional costs to the actuary not anticipated in the bid. Any delays should be immediately reported to the Agency.
- **2. Summary of work performed since last status report** List work performed, phone calls made, items received and discussions with Agency.
- b. **Billing** The Actuary shall provide invoices on a monthly basis no more than 15 days after the end of the month. Invoices must contain adequate supporting documentation as requested by the Agency. Professional fees will be billed at the rates specified in Exhibit A. Total compensation shall not exceed the:
 - i. Contract Amount The contract amount shall be SPELL OUT DOLLAR AMOUNT (\$ AS A NUMBER)

- ii. Compensation Above Includes Gross Receipts Tax The amount above includes gross receipts tax.
- **iii.** Compensation Above Includes Reasonable Travel Expenses All travel related to the contract shall be approved in advance by the Agency.
- **iv. Maximum Compensation** This amount is a maximum and not a guarantee that the work assigned to be performed by Actuary under this Agreement shall equal the amount stated herein.
- v. Total Compensation The parties do not intend for the Actuary to continue to provide services without compensation when the total compensation amount is reached. Actuary is responsible for monitoring the hours worked and examination expense incurred and notifying the Agency immediately if the services yet to be provided under this Agreement will exceed the total hours or contract amount listed on Exhibit A. Note that once 80% of the contract amount has been expended all work shall stop until written approval has been obtained from the Actuary.
- vi. No Pay In Excess of Compensation In no event will the Actuary be paid for services provided in excess of the total compensation amount without this Agreement being amended. Amendment shall be executed prior to those services in excess of the total hours or compensation amount being provided.
- vii. Detailed Billing Actuary must submit a detailed statement accounting for all services performed and expenses incurred. Actuary invoices for professional services and reimbursements shall be submitted with spreadsheet shown in Exhibit A completed. Do not delete the prior billings when completing this spreadsheet. It is intended to be cumulative. Note that once 80% of the contract amount has been expended all work shall stop until written approval has been obtained from the Agency. This invoice shall be sent by email or US Mail directly to the Agency's designated contact for approval. Once approved the Agency will pay the Actuary. If the Agency finds that the services are not acceptable, within thirty days after the date of receipt of written notice from the Actuary that payment is requested, it shall provide the Actuary by letter either delivered, mailed or emailed of exception explaining the defect or objection to the services, and outlining steps the Actuary may take to provide remedial action. Upon certification by the Agency that the services have been received and accepted, payment shall be tendered to the Actuary within thirty days after the date of acceptance. If payment is made by mail, the payment shall be deemed tendered on the date it is postmarked. However, the agency shall not incur late charges, interest, or penalties for failure to make payment within the time specified herein.

3. Term.

THIS AGREEMENT SHALL NOT BECOME EFFECTIVE UNTIL APPROVED BY THE AGENCY. This Agreement shall terminate at the discretion of the Superintendent unless terminated pursuant to paragraph 4 (Termination). In accordance with NMSA 1978 §13-1-150, no contract term for a professional services contract, including extensions and renewals, shall exceed four years, except as set forth in NMSA 1978, §13-1-150.

4. Termination.

A. Termination - This Agreement may be terminated by either of the parties hereto upon written notice delivered to the other party at least two (2) weeks prior to the intended date of

termination. Except as otherwise allowed or provided under this Agreement, the Agency's sole liability upon such termination shall be to pay for acceptable work performed prior to the Actuary's receipt of the notice of termination, if the Agency is the terminating party, or the Actuary's sending of the notice of termination, if the Actuary is the terminating party; provided, however, that a notice of termination shall not nullify or otherwise affect either party's liability for pre-termination defaults under or breaches of this Agreement. The Actuary shall submit an invoice for such work within thirty (30) days of receiving or sending the notice of termination. Notwithstanding the foregoing, this Agreement may be terminated immediately upon written notice to the Actuary if the Actuary becomes unable to perform the services contracted for, as determined by the Agency or if, during the term of this Agreement, the Actuary or any of its officers, employees or agents is indicted for fraud, embezzlement or other crime due to misuse of state funds or due to the Appropriations paragraph herein. THIS PROVISION IS NOT EXCLUSIVE AND DOES NOT WAIVE THE STATE'S OTHER LEGAL RIGHTS AND REMEDIES CAUSED BY THE CONTRACTOR'S DEFAULT/BREACH OF THIS AGREEMENT.

- **B.** Termination Management Immediately upon receipt by either the Agency or the Actuary of notice of termination of this Agreement, the Actuary shall:
- 1. Not incur any further obligations for salaries, services or any other expenditure of funds under this Agreement without written approval of the Agency;
- 2. Comply with all directives issued by the Agency in the notice of termination as to the performance of work under this Agreement; and
- 3. Take such action, as the Agency shall direct for the protection, preservation, retention or transfer of all property titled to the Agency and records electronic or otherwise generated under this Agreement. Any non-expendable personal property or equipment provided to or purchased by the Actuary with contract funds shall become property of the Agency upon termination and shall be submitted to the Agency as soon as practicable.

5. Status of Contractor.

The Actuary and its agents and employees are independent contractors performing professional services for the Agency and are not employees of the State of New Mexico. The Actuary and its agents and employees shall not accrue leave, retirement, insurance, bonding, use of state vehicles, or any other benefits afforded to employees of the State of New Mexico as a result of this Agreement. The Actuary acknowledges that all sums received hereunder are reportable by the Actuary for tax purposes, including without limitation, self-employment and business income tax. The Actuary agrees not to purport to bind the State of New Mexico unless the Actuary has express written authority to do so, and then only within the strict limits of that authority.

7. <u>Assignment</u>.

The Actuary shall not assign or transfer any interest in this Agreement or assign any claims for money due or to become due under this Agreement without the prior written approval of the Agency.

8. Subcontracting.

The Actuary will not utilize subcontractors in the course of this examination unless disclosed in their bid and or approved by the Agency. Contract employees listed in Exhibit A attached hereto are the

only employees authorized to work on this examination. Refer to paragraph 1-A-3 entitled Contract Staff herein.

9. Release.

Final payment of the amounts due under this Agreement shall operate as a release of the Agency, its officers and employees, and the State of New Mexico from all liabilities, claims and obligations whatsoever arising from or under this Agreement.

10. Confidentiality.

Any confidential information provided to or developed by the Actuary in the performance of this Agreement shall be kept confidential and shall not be made available to any individual or organization by the Actuary without the prior written approval of the Agency.

11. Product of Service - Copyright.

All materials developed or acquired by the Actuary under this Agreement shall become the property of the State of New Mexico and shall be delivered to the Agency no later than the termination date of this Agreement. Nothing developed or produced, in whole or in part, by the Actuary under this Agreement shall be the subject of an application for copyright or other claim of ownership by or on behalf of the Actuary.

12. <u>Conflict of Interest; Governmental Conduct Act.</u>

The Actuary warrants that it presently has no interest and shall not acquire any interest, direct or indirect, which would conflict in any manner or degree with the performance or services required under the Agreement. The Actuary certifies that the requirements of the Governmental Conduct Act, NMSA 1978 §10-16-1 through §10-16-18, regarding contracting with a public officer or state employee or former state employee have been followed.

13. Amendment.

This Agreement shall not be altered, changed or amended except by instrument in writing executed by the parties hereto and all other required signatories. If the Agency proposes an amendment to the Agreement to unilaterally reduce funding due to budget or other considerations, the Actuary shall have the option to terminate the Agreement or to agree to the reduced funding, within thirty (30) days of receipt of the proposed amendment.

14. Merger.

This Agreement incorporates all the Agreements, covenants and understandings between the parties hereto concerning the subject matter hereof, and all such covenants, Agreements and understandings have been merged into this written Agreement. No prior Agreement or understanding, oral or otherwise, of the parties or their agents shall be valid or enforceable unless embodied in this Agreement.

15. Penalties for violation of law.

The Procurement Code, Sections 13-1-28 through 13-1-199, NMSA 1978, imposes civil and criminal penalties for its violation. In addition, the New Mexico criminal statutes impose felony penalties for illegal bribes, gratuities and kickbacks.

16. Equal opportunity compliance.

The Actuary agrees to abide by all federal and state laws and rules and regulations, and executive orders of the Governor of the State of New Mexico, pertaining to equal employment opportunity. In accordance with all such laws of the State of New Mexico, the Actuary assures that no person in the United States shall, on the grounds of race, religion, color, national origin, ancestry, sex, age, physical or mental handicap, or serious medical condition, spousal affiliation, sexual orientation or gender identity, be excluded from employment with or participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity performed under this Agreement. If Actuary is found not to be in compliance with these requirements during the life of this Agreement, Actuary agrees to take appropriate steps to correct these deficiencies.

17. Applicable Law.

The laws of the State of New Mexico shall govern this Agreement, without giving effect to its choice of law provisions. Venue shall be proper only in a New Mexico court of competent jurisdiction in accordance with Section 38-3-1 (G) NMSA 1978. By execution of this Agreement, Actuary acknowledges and agrees to the jurisdiction of the courts of the State of New Mexico over any and all lawsuits arising under or out of any term of this Agreement.

18. Workers Compensation.

The Actuary agrees to comply with state laws and rules applicable to workers compensation benefits for its employees. If the Actuary fails to comply with the Workers Compensation Act and applicable rules when required to do so, this Agreement may be terminated by the Agency.

19. Records and Financial Audit.

The Actuary shall maintain detailed time and expenditure records that indicate the date; time, nature and cost of services rendered during the Agreement's term and effect and retain them for a period of three (3) years from the date of final payment under this Agreement. The records shall be subject to inspection by the Agency, the Department of Finance and Administration and the State Auditor. The Agency shall have the right to audit billings both before and after payment. Payment under this Agreement shall not foreclose the right of the Agency to recover excessive or illegal payments. A copy of the executed contract and all approved payments will be filed with the docketed order for this examination at the Docketing Office, room 406, old PERA Building, of the Agency.

20. Indemnification.

The Actuary shall defend, indemnify and hold harmless the Agency and the State of New Mexico from all actions, proceeding, claims, demands, costs, damages, attorneys' fees and all other liabilities and expenses of any kind from any source which may arise out of the performance of this Agreement, caused by the negligent act or failure to act of the Actuary, its officers, employees, servants, subcontractors or agents, or if caused by the actions of any client of the Actuary or resulting in injury or damage to persons or property during the time when the Actuary or any officer, agent, employee, servant or subcontractor thereof has or is performing services pursuant to this Agreement. In the event that any action, suit or proceeding related to the services performed by the Actuary or any officer, agent, employee, servant or subcontractor under this Agreement is brought against the Actuary, the Actuary shall, as soon as practicable but no later than two (2) days after it receives notice thereof, notify the legal counsel of the Agency and the Risk Management Division of the New Mexico General Services Department by certified mail.

21. New Mexico Employees Health Coverage.

- **A.** If Actuary has, or grows to, six (6) or more employees who work, or who are expected to work, an average of at least 20 hours per week over a six (6) month period during the term of the contract, Actuary certifies, by signing this agreement, to have in place, and agree to maintain for the term of the contract, health insurance for those employees and offer that health insurance to those employees no later than July 1, 2010 if the expected annual value in the aggregate of any and all contracts between Actuary and the State exceed \$250,000 dollars.
- **B.** Actuary agrees to maintain a record of the number of employees who have (a) accepted health insurance; (b) declined health insurance due to other health insurance coverage already in place; or (c) declined health insurance for other reasons. These records are subject to review and audit by a representative of the state.

Actuary agrees to advise all employees of the availability of State publicly financed health care coverage programs by providing each employee with, as a minimum, the following web site link to additional information: http://insurenewmexico.state.nm.us/.

22. Invalid Term or Condition.

If any term or condition of this Agreement shall be held invalid or unenforceable, the remainder of this Agreement shall not be affected and shall be valid and enforceable.

23. Enforcement of Agreement.

A party's failure to require strict performance of any provision of this Agreement shall not waive or diminish that party's right thereafter to demand strict compliance with that or any other provision. No waiver by a party of any of its rights under this Agreement shall be effective unless express and in writing, and no effective waiver by a party of any of its rights shall be effective to waive any other rights.

24. Notices.

Any notice required to be given to either party by this Agreement shall be in writing and shall be delivered in person, by courier service or by U.S. mail, either first class or certified, return receipt requested, postage prepaid, as follows:

To the Agency: Office of Superintendent of Insurance

6200 Uptown Blvd. NE, Suite 100

Albuquerque, NM 87110

Attn: Paige Duhamel, Health Care Policy Manager.

To the Actuary: MR. OR MS. ACTUARY

NAME OF EXAMINATION COMPANY AND THEIR

ADDRESS.

25. Authority.

If Actuary is other than a natural person, the individual(s) signing this Agreement on behalf of Examiner represents and warrants that he or she has the power and authority to bind Actuary, and that no further action, resolution, or approval from Actuary is necessary to enter into a binding contract.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date of signature by the DFA Contracts Review Bureau below.

	Date:
Agency	
	Date:
Agency's Legal Counsel -	-Certifying legal sufficiency
	Date:
Contractor	Date

The records of the Taxation and Revenue Department reflect that the Contractor is registered with the Taxation and Revenue Department of the State of New Mexico to pay gross receipts and compensating taxes.

ID Number: XXXXXXXXXX

By:	Date:
Taxation and Revenue Department	
This Agreement has been approved by the	DFA Contracts Review Bureau:
By: DFA Contracts Review Bureau	Date:

Exhibit A

BI-WEEKLY ACTUARY STATUS REPORT

Date: XX/XX/XXXX

To: Paige Duhamel

Health Care Policy Manager, New Mexico Office of Superintendent of Insurance

From: NAME, AND ACTUARY CONTRACTOR COMPANY

Actuary

Re: Essential Health Benefits Review.

Progress Report as of (DATE OF CURRENT PROGRESS REPORT)

Status of Assignment:

Complete as of Current Date of Status Report:

	Actuary	Staff	Total
Original Time Budget	308.00	0.00	501.00
Actual Hours to Date	134.00	0.00	209.00
Hours Remaining to Date	174.00	0.00	292.00

Progress Report

XXXXXXXXX, 2019 (THIS IS THE DATE OF THE CURRENT PROGRESS REPORT)

General Comments

- 1.
- 2.
- 3.

APPENDIX D

COST RESPONSE FORM

Sample Below

Description	Type	Quantity	Cost per Item

Option Year 1: (xx/xx/xxxx thru xx/xx/xxxx) Price:\$_____

(includes all labor, materials, equipment, transportation, configuration, installation, training, taxes and profit to provide the Services described in Section IV, (as amended by any current RFP amendments for the period specified above)

APPENDIX E

LETTER OF TRANSMITTAL FORM

APPENDIX E

Letter of Transmittal Form
RFP#:
Offeror Name: FED ID# Items #1 to #7 EACH MUST BE COMPLETED IN FULL Failure to respond to all seven items WIL RESULT IN THE DISQUALIFICATION OF THE PROPOSAL!
1. Identity (Name) and Mailing Address of the submitting organization:
2. For the person authorized by the organization to contractually obligate on behalf of this Offer: Name
Title
E-Mail Address
Telephone Number
3. For the person authorized by the organization to negotiate on behalf of this Offer:
Name
E-Mail Address
Telephone Number
4. For the person authorized by the organization to clarify/respond to queries regarding this Offer: Name
Title
E-Mail Address
Telephone Number
 5. Use of Sub-Contractors (Select one) No sub-contractors will be used in the performance of any resultant contract OR The following sub-contractors will be used in the performance of any resultant contract:
(Attach extra sheets, as needed)
6. Please describe any relationship with any entity (other than Subcontractors listed in (5) above) which w be used in the performance of any resultant contract.
(Attach extra sheets, as needed)
 7 On behalf of the submitting organization named in item #1, above, I accept the Conditions Governing the Procurement as required in Section II. C.1. I concur that submission of our proposal constitutes acceptance of the Evaluation Factors contained in Section V of this RFP. I acknowledge receipt of any and all amendments to this RFP.
, 2018 Authorized Signature and Date (Must be signed by the person identified in item #2, above.)
Authorized Signature and Date (widst be signed by the person identified in item #2, above.)

APPENDIX F

ORGANIZATIONAL REFERENCE QUESTIONNAIRE

The State of New Mexico, as a part of the RFP process, requires Offerors to submit a minimum of three (3) business references as required within this document. The purpose of these references is to document Offeror's experience relevant to the scope of work in an effort to establish Offeror's responsibility.

Offeror is required to send the following reference form to each business reference listed. The business reference, in turn, is requested to submit the Reference Form directly to the OSI Procurement Manager (contact details below) by May 24, 2019 for inclusion in the evaluation process. The form and information provided will become a part of the submitted proposal. Business references provided may be contacted for validation of content provided therein.

Name: Dorothy Mendonca, Procurement Manager Address: Office of Superintendent of Insurance

1120 Paseo de Peralta, Rm 217

PO Box 1689

Santa Fe NM 87504-1689

Telephone: (505) 827-8453

Email: Dorothy.Mendonca@state.nm.us

RFP # 20-440-4000-00003 ORGANIZATIONAL REFERENCE QUESTIONNAIRE FOR:

(Nam	e of Of	ferc	or)												
This	form	is	being	submitted	to	your	company	for	completion	as	a	business	reference	for	the

This form is being submitted to your company for completion as a business reference for the company listed above. This form is to be returned to the State of New Mexico, Office of Superintendent of Insurance via facsimile or e-mail at:

Name: Dorothy Mendonca, Procurement Manager Address: Office of Superintendent of Insurance

1120 Paseo de Peralta, Rm 217

PO Box 1689

Santa Fe NM 87504-1689

Telephone: (505) 827-8453 Fax: (505) 827-4734

Email: Dorothy.Mendonca@state.nm.us

No later than May 24, 2019, and <u>must not</u> be returned to the company requesting the reference.

For questions or concerns regarding this form, please contact the State of New Mexico Procurement Manager listed above. When contacting us, please be sure to include the Request for Proposal number listed at the top of this page.

Company providing reference:	
Contact name and title/position	
Contact telephone number	
Contact e-mail address	
Project description;	
Project dates (starting and ending);	
Technical environment for the	
project your providing a reference	
(i.e., Software applications, Internet	
(i.e., Software applications, Internet capabilities, Data communications,	

QUESTIONS:

1. In what capacity have you worked with this vendor in the past? COMMENTS: 2. How would you rate this firm's knowledge and expertise? _ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable) COMMENTS: 3. How would you rate the vendor's flexibility relative to changes in the project scope and timelines? _ (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable) COMMENTS: 4. What is your level of satisfaction with hard-copy materials produced by the vendor? (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable) **COMMENTS:** 5. How would you rate the dynamics/interaction between the vendor and your staff? (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 = Unacceptable) COMMENTS:

6.	Who were the vendor's principal representatives involve you rate them individually? Would you comment on the other factors on which you based the rating? (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfactory; 0 =	ne skills, knowledge, behaviors or
	Name:	Rating:
	Name:	
	Name:	Rating:
	Name:	Rating:
	COMMENTS:	
7.	How satisfied are you with the products developed by the (3 = Excellent; 2 = Satisfactory; 1 = Unsatisfacto COMMENTS:	
8.	With which aspect(s) of this vendor's services are you mo COMMENTS:	ost satisfied?
9.	With which aspect(s) of this vendor's services are you lear COMMENTS:	ast satisfied?
10.	Would you recommend this vendor's services to your org COMMENTS:	anization again?

APPENDIX G RESIDENT VETERANS CERTIFICATION

New Mexico Preference Resident Veterans Certification Reminder, a copy of Resident Veterans Preference Certificate must be submitted with the proposal in order to ensure adequate consideration and application of NMSA 1978, § 13-1-21 (as amended).
application of the resident veterans' preference to this procurement:
Please check one box only
\Box I declare under penalty of perjury that my business prior year revenue starting January 1 ending December 31 is less than \$1M allowing me the 10% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.
□ I declare under penalty of perjury that my business prior year revenue starting January 1 ending December 31 is more than \$1M but less than \$5M allowing me the 8% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.
□ I declare under penalty of perjury that my business prior year revenue starting January 1ending December 31 is more than \$5M allowing me the 7% preference on this solicitation. I understand that knowingly giving false or misleading information about this fact constitutes a crime.
"I agree to submit a report, or reports, to the State Purchasing Division of the General Services Department declaring under penalty of perjury that during the last calendar year starting January 1 and ending on December 31, the following to be true and accurate: "In conjunction with this procurement and the requirements of this business' application for a Resident Veteran Business Preference/Resident Veteran Contractor Preference under NMSA 1978, § 13-1-21 or 13-1-22, when awarded a contract which was on the basis of having such veterans preference, I agree to report to the State Purchasing Division of the General Services Department the awarded amount involved. I will indicate in the report the award amount as a purchase from a public body or as a public works contract from a public body as the case may be. "I understand that knowingly giving false or misleading information on this report constitutes a crime."
I declare under penalty of perjury that this statement is true to the best of my knowledge. I understand that giving false or misleading statements about material fact regarding this matter constitutes a crime.
(Signature of Business Representative)* (Date)

^{*}Must be an authorized signatory for the Business. The representations made in checking the boxes constitutes a material representation by the business that is subject to protest and may result in denial of an award or termination of award of the procurement involved if the statements are proven to be incorrect.