**City of Ocala - 2022 Property and Casualty Insurance Broker Services**

**Proposer Name:**

**Evaluation Criteria:** The Selection Committee shall score all proposals, which meet the submittal requirements based on the following factors:

|  |  |
| --- | --- |
| **EVALUATION CRITERIA** | **WEIGHT** |
| **Qualifications, Experience, and Licensing Requirements** | **40 points** |
| **Approach and Methodology; *OPTIONAL: Value-Added Programs/Services*** | **40 points** |
| **Price Proposal** | **20 points** |
| **TOTAL** | **100 points** |

**Proposal Response:** The following information must be submitted in your proposal response*. Do not alter any of the headings.* **Proposal response shall be no more than thirty (30) pages**, excluding a cover page, cover letter, resumes, letters of reference, certifications, insurance, and certificates.

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| --- | --- |
| **Qualifications, Experience, and Licensing Requirements\*** | **40 points** |

*\* Do not include the City of Ocala in your references or experience.*

1. **Qualifications (20 points):** 
   1. Identify the individuals who will be assigned to provide services, their roles, resumes,\* tenure, and qualifications.
   2. Include the name, title, phone number, and location of the office.

*\*****NOTE****: resumes should be attached at the end of the document after ATTACHMENT 1 – RESUMES cover page and are excluded from the page count.*

***Response****:*

1. **Experience (15 points):** 
   1. Provide a list of at least two (2) public agencies, or large private agencies, for which your company has provided similar services during the last five (5) years.
   2. Include the agency/company name, contact information, period of the contract, dollar value of the contract, services provided, and insurance lines.

***Response****:*

1. **Licensing Requirements (5 points):** 
   1. Describe how frequently you evaluate your licensing requirements and what that process entails.
   2. Are you in full compliance with the requirements now?

***Response****:*

|  |  |
| --- | --- |
| **Approach and Methodology; *OPTIONAL: Value Added Programs/Services*** | **40 points** |

1. **Approach and Methodology (38 points):**
2. Provide an overview of your approach to performing the Scope of Work to best serve the City of Ocala. Demonstrate the intended methods for design, implementation, maintenance, communication, and improvement of the City’s property and casualty insurance lines.

***Response****:*

1. Specify your service commitment levels, including timeframes for the following: RFP timeframe; binder delivery; policy issuance (including receipt of policy or amendments); and billing.

***Response****:*

1. What is your expected response time to answer questions/inquiries from City of Ocala HR/Risk management representatives? What will the inquiries be limited to?

***Response****:*

1. What is your process to identify programs, products, and insurers capable of meeting the City’s insurance needs? Explain your sourcing and marketing program to add new insurers to your database/distribution list.

***Response****:*

1. Please provide your standard carrier financial requirements. Please indicate the rating based on AM Best, Standard & Poors, etc. The City requires all placements to meet the minimum-security requirements of AM Best rated companies (A- or better); can you comply?

***Response****:*

1. Describe the criteria used when evaluating current insurance markets.

***Response****:*

1. How will you develop an annual schedule of coverage which lists the policy by coverage, company, policy number, policy duties, premium, and brief description? Provide examples of the schedule format. Does this include proposing coverage enhancements?

***Response****:*

1. How will your firm issue solicitations and evaluate proposals? Provide examples if available.

***Response****:*

1. What is your process for reviewing policies and endorsements for accuracy and conformance with negotiated coverage? Who is responsible for this verification? Do you have a process currently in place?

***Response****:*

1. Detail your process to issue and deliver valid binders for insurance policies purchased by the City through the Broker. What information will be included in the binders?

***Response****:*

1. How will you assist the City in determining insurance requirements for various City contracts (design, construction, and service)? Will you assist the City in reviewing insurance policies, contracts, leases, and bonds as requested by the City? Do you currently have standard requirements?

***Response****:*

1. Will your service team join client meetings if needed? Are meetings included in your fee?

***Response****:*

1. Will you audit the City’s Workers’ Compensation classification coding? If so, explain the process. Is this audit included in your fee, or a separate charge (provide charge amount)?

***Response****:*

1. Explain how you will coordinate with the City’s HR/Risk Management representative to assure that up-to-date exposure data will be incorporated into the issuance of newly purchased policies.

***Response****:*

1. How will you promptly and accurately process insurance policy certificates and endorsements and other change requests as needed? Outline the timeframes for these processes.

***Response****:*

1. Explain your role when representing the City in negotiations with insurers, underwriters, insurance regulatory authorities, and other parties on brokered policies. Do you currently provide such services?

***Response****:*

1. How will you coordinate loss control/safety services desired by the City that are available at “no-cost” from the insurers whose policies were purchased through the broker?

***Response****:*

1. What is your plan to provide evaluation, training, and education relative to loss control, safety, claims management, and related topics in the area of risk management?

***Response****:*

1. How often will you provide information concerning new exposures, regulatory requirements, and uninsurable risk? Where is this information garnered from and how will you communicate it to the City?

***Response****:*

1. Do you allow insureds to report claims directly to the Carrier?

***Response****:*

1. How will you serve as a resource for information on coverage issues, policy interpretation, claims issues, potential exposure, and other issues? Do you have In-House claim professionals available to advise the City of Ocala?

***Response****:*

1. Detail how you will assist in risk-related contractual agreements.

***Response****:*

1. How do you maintain confidential client data? Describe your firm’s process for data security monitoring.

***Response****:*

1. Can you provide access to the Carrier’s online reporting data or adjuster notes?

***Response****:*

1. Will you provide COI review for compliance and provide guidance on coverage to best protect the City’s interests?

***Response****:*

1. State any services you are unable to provide or any deviations from the Scope of Work.

***Response****:*

1. List performance guarantees.

***Response****:*

1. **OPTIONAL: Value-Added Programs/Services (2 points):**
   1. List any additional programs or services provided by your company at no cost to the City (i.e. training programs, written programs, educational classes).
   2. This may include OSHA, HR, wellness, safety, etc.

*This section is optional and not required. If your firm is not offering any value-added programs and/or services, please state “N/A” or “none” in this section.*

***Response****:*

|  |  |
| --- | --- |
| **Price Proposal** | **20 points** |

1. **Price Proposal (20 points):**
   1. Provide a **FLAT FEE** annual price based on the Scope of Work.
      * This fee should be full compensation for the broker’s professional services and shall include any and all travel required by the broker to meet with City staff as outlined in the Scope of Work and the proposer’s approach and methodology.
      * Additional compensation will not be paid to the broker or to any other party and is strictly prohibited. **Any and all additional compensation or commissions, as part of brokered policies**, paid to any party, including brokers, wholesale brokers, or third-party intermediaries, **must be promptly returned to the City**.
      * Broker may not accept any type of compensation without full disclosure to the City of the dollar amount or percentage of compensation prior to binding the insured’s coverage along with fully refunding the compensation to the insured.
      * Failure to disclose third-party compensation agreements/understandings to the City may result in bid rejection or future contract termination.

***Response****:*

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| --- | --- |
| **FLAT FEE PRICING** | |
| **ANNUAL (12-Month Pricing):** | $ |
| **CONTRACT TERM TOTAL:**  ***January 1, 2023 - December 31, 2025*** | $ |

1. **References (REQUIRED - No points):**

***NOT PROVIDING REFERENCES AND LETTERS OF REFERENCE IS CAUSE FOR PROPOSAL REJECTION***

* 1. Submit a minimum of four references, of which two must be letters of reference, with names, titles, mailing addresses, email addresses, telephone numbers, and the service description.
     + References should be for similar services provided over the last five years. Public agency references are preferred.
     + Include at least two current clients with 500 or more employees.

***Response****:*

* 1. **A minimum of two letters of reference\*\* are required**. \*\****NOTE****: letters of reference should be attached at the end of the* *document after ATTACHMENT 2 – LETTERS OF REFERENCE cover page and are excluded from the page count.*

**ATTACHMENT 1**

RESUMES

**Section A.1:** **Qualifications**

***(Insert Resumes after this page.)***

**ATTACHMENT 2**

LETTERS OF REFERENCE

**Section G: References**

***(Insert Letters of Reference after this page.)***

**ATTACHMENT 3**

***(Optional)***

CERTIFICATIONS, LICENSES, AND INSURANCE

**NOT SCORED – OPTIONAL DOCUMENTS**

***(Insert certifications, licenses, and insurance after this page.)***