

NEW JERSEY INTERGOVERNMENTAL INSURANCE FUND



REQUEST FOR PROPOSAL

**Position of: SAFETY AND LOSS CONTROL CONSULTANT -
SPECIAL SERVICES - WORKERS COMPENSATION
INSURANCE FUND**

Submission Deadline: November 14, 2019

**Submission Location: NJIIF, Administrators
c/o Mr. John Serapiglia/Eric Nemeth, Esq.
Polaris Galaxy Insurance, LLC
777 Terrace Avenue, Suite 309
Hasbrouck Heights, New Jersey 07604**

RFP Number: 2020-007

New Jersey Intergovernmental Insurance Fund

REQUEST FOR PROPOSAL

RFP's for the NJIIF Workers Compensation Insurance Fund: Position of Safety and Loss Control Consultant – Special Services

RFP Number: 2020-007

Sealed Proposals for RFP 2020-007 will be received by the New Jersey Intergovernmental Insurance Fund (NJIIF), C/O John A. Serapiglia and Eric J. Nemeth, P.C, Polaris Galaxy Insurance, LLC, 777 Terrace Ave., Suite 309, Hasbrouck Heights, NJ 07604 until 2:00 P.M. prevailing time, November 14, 2019. All proposals will be opened at 2:00 P.M. at the same address.

All proposals must be received in a sealed envelope bearing the name and address of the vendor and shall be endorsed with the title of the Professional Service being quoted and the applicable RFP number, addressed to the **New Jersey Intergovernmental Insurance Fund, Attention Fund Co-Administrators**, at the place and hour mentioned above.

Please note that proposals received after the above dates or which fail to comply with the listed Minimum Proposal Requirements will not be considered.

All proposals shall address the “Minimum Requirements for Vendor Response” in the RFP, but may also include such other information that the interested parties believe will assist the NJIIF in evaluating the proposal.

The NJIIF’s selection of a professional for the position of **Safety and Loss Control Consultant-Special Services** will be based on review of the documentation and information submitted in response to this RFP as well as independent research performed by the NJIIF, such as review of references, an evaluation of performance with other governmental and non-governmental entities and/or all other available information. The NJIIF reserves the right to choose one or more professional for each service, or to elect not to make a selection based on this Notice, or to post subsequent Notices for the same, similar or different services.



N.J. Pay to Play Compliance

Compliance with N.J.S. 19:44A-20.4 ET. Seq.

The NJIIF is a joint insurance fund whose whole operations fall within the ambit of legislation which became effective on January 1, 2006 known as the “Local Unit Pay to Play Law”, codified at N.J.S.A. 19:44A-20.4 et. Seq. (“PTP”). In Compliance with the PTP, the NJIIF has chosen to enter into contracts for its professionals in accordance with N.J.S.A. 19:44A-20.7, otherwise known as the “fair and open process”.

New Jersey Intergovernmental Insurance Fund
2020 RFP Background Information

The New Jersey Intergovernmental Fund (NJIIF) is a New Jersey approved self-insured, reinsured Public Entity Insurance Pool serving twenty two members statewide. The NJIIF offers all New Jersey public entities multiple lines of insurance including; Workers Compensation, General Liability, Police Professional, Public Officials, Automobile, Property, Inland Marine, Cyber, Boiler Machinery, Blanket Accident for Emergency employees and volunteers, Crime and Environmental coverages.

2019 MEMBERSHIP

<p>Township of Aberdeen City of Asbury Park City of Bayonne Township of Cedar Grove Borough of Hasbrouck Heights Borough of Mantoloking Township of Maplewood Township of Mine Hill Morristown Parking Authority Borough of North Haledon Township of Old Bridge</p>	<p>Borough of Riverdale Borough of Roseland Borough of Teterboro City of Union City Union City Parking Authority Township of Verona Borough of Wanaque County of Warren Warren County Mosquito Comm. Township of Wayne Borough of Woodland Park</p>
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These public entities collectively form the following data:

Building Values:	\$1,062,507,642	Number of Vehicles:	2,219
Full Time Employees:	3,289	Part Time Employees:	2,030
Resident Population:	503,881	Seasonal:	1,287
Payroll Information:	\$280,192,028	Budget:	\$676,842,166

**REQUEST FOR PROPOSAL:
SAFETY AND LOSS CONTROL CONSULTANT WORKERS COMPENSATION
INSURANCE FUND**

The NJIIF is soliciting proposals for the position of Safety and Loss Control Consultant-Special Services to provide professional services to the Fund for its Workers Compensation Line Insurance Fund for calendar year 2017. The NJIIF will select a vendor (“applicant”) for the position of Safety and Loss Control Consultant-Special Services based upon a fair and open process, pursuant to N.J.S.A. 19:44A-20.4 et. seq. Please note that in order to have its proposal considered by the NJIIF, the applicant must satisfy the minimum requirements for the position of Administrator as set forth in Section III hereof and demonstrate that it otherwise complies with the proposal requirements set forth in the NJIIF’s NOTICE and SOLICITATION OF PROPOSALS section of the NJIIF’s web site.

- I.) **Appointment of Safety and Loss Control Services Consultant:** The appointment of a Safety and Loss Control Consultant-Special Services (“SCSS”) for the Workers Compensation Insurance Fund shall be for a term of one year. The NJIIF, however, at its sole discretion, may determine to extend its agreement with the SCSS for two additional one year periods. The NJIIF may select an individual or firm for this position, so long as they are satisfied that the Minimum Requirements set forth in Section III hereof will be satisfied. No substitution may be made without the express written consent of the NJIIF Executive Board, which consent may be withheld in its sole discretion.
- II.) **Scope of Services:** The selected SCSS shall perform the following minimum duties as well as those prescribed by applicable law, subject to review and approval of the NJIIF.
- A. Conduct safety and loss control services for the City of Union City (the “City”) consisting of:
1. Perform an audit of current loss control procedures and management practices and provide recommended improvements.
 2. Review all City locations for physical hazards and provide recommended corrective actions.
 3. Review the City’s loss/claim history and conduct accident analysis to identify loss trends.
 4. Based upon the information gathered in tasks 1-3 above, conduct targeted safety training and accident investigations during 7, full-day sessions at the City. The accident investigations will include employee interviews as appropriate.
- B. Attend Executive Board meetings of the NJIIF and provide status updates on loss control activities as requested.
- C. Special Projects: Consult with the Fund or its Safety Committee on loss control matters as requested by the Co-Administrators.

III.) **Minimum Qualifications:** In order for its proposal to be considered by the NJIIF, interested parties submitting proposals in response to this solicitation for the position of SCSS must meet the following minimum requirements

A. Preferred Qualifications

1. Demonstrates knowledge and experience in the evaluation of WC losses incurred by public entities in New Jersey;
2. Has knowledge and expertise in providing safety training services;
3. Has knowledge and expertise in conducting loss control inspections;
4. Has knowledge and expertise in developing claim trend charts and loss data;
5. Has knowledge and expertise in designing and implementing loss control programs for public entities.
6. Has sufficient staff to satisfy the scope of services described in Section II hereof.

B. Minimum Requirements for Vendor Response to the NJIIF's Solicitation of Proposals: Interested parties wishing to provide a proposal in response to this RFP shall provide the following minimum information in its proposal, which proposal must be submitted at the location and within the time constraints set forth above:

1. Full name, business address, phone and fax number, of entity of person submitting the proposal.
2. List of all individuals who, if selected, will provide services to the NJIIF, along with a summary of the post-high school education and licenses held by each person.
3. Number of years each person providing services has worked for New Jersey joint insurance funds, the identities of those funds and the services provided to each.
4. A description of the services to be provided in addition to those set forth in Section II hereof.
5. Proposed costs to provide the services set forth in Section II and II (B) (4) hereof during 2020. The services required under Section II (A) shall be provided on a lump sum basis. All other tasks shall be quoted on an hourly basis plus disbursements. For services are to be billed on an hourly basis, the proposal shall include the hourly rates to be charged as well as the cost of all estimated disbursements.
6. Proposals for second and third years of service should the NJIIF elect to exercise options to contract with applicant for the calendar years 2021 and 2022.

7. A copy or description of the professional liability insurance policy maintained to cover the individual(s) providing services to the NJIIF.
8. Completed copies of Exhibits A, B, C, D, E, F and G and a copy of Vendor's NJ Business Registration Certificate.
9. A statement that the applicant complies with N.J.S.A. 10:5-1 et. Seq. (Law Against Discrimination) and P.L. 1975 C. 127 (Affirmative Action). (Exhibit B)
10. A list and description of all professional liability claims, if any, brought against the applicant during the past five (5) years.
11. A copy of description of your Disaster Recovery Plan.
12. The applicant shall provide the NJIIF with five (5) copies of its Proposal.
13. Applicants are encouraged to provide any supplemental information deemed important to the overall evaluation of the proposal and the reason it should be considered in the overall evaluation of the proposal.
14. In submitting its response to this RFP, the applicant shall make the affirmative representation that other than as set forth in Exhibit G, attached to its proposal, within the last twelve months, it has received no payment, compensation or reimbursement in any form from any person, company or entity for the referral or assignment of work, business or for services provided to or on behalf of the NJIIF or any of its members. Applicant shall complete Exhibit G providing therein a detailed list of all individuals that have paid or reimbursed applicant during the past twelve months and the amounts of all such payments where such payment(s), compensation of reimbursement was/were derived from, based upon or related to the NJIIF.

In submitting its response to this RFP, the applicant shall represent and agree that in its contract with the NJIIF (should applicant be retained) that any materials physically handed or electronically transmitted to the NJIIF's insureds shall be boldly marked with the NJIIF logo and shall indicate that the materials are part of the safety services provided by the NJIIF.

15. In submitting its response to this RFP, the applicant shall describe in detail all streaming and on-line safety training videos available to the NJIIF's insureds and if there is any additional cost associated with the NJIIF's access to such training materials (and if so, the applicable charges).

IV.) Basis for Award of Professional Services Contract: The NJIIF shall award the agreement for the professional services described herein, at its sole discretion, based upon numerous factors, including by way of example and not limitation, vendor qualifications, merit, proposal cost, references and experience with issued confronting the NJIIF. The NJIIF reserved the right to select a vendor and negotiate with said vendor the compensation to be paid for its services and other terms of the contract pursuant to which said services will be



rendered to the Fund. A final award shall be made by Resolution adopted by a majority of the Executive Board of the NJIIF based upon the proposal made to the NJIIF that has been determined to be **the most advantageous to the NJIIF, price and other factors considered.** The specific criteria will include, by way of example and not limitation

1. Responsiveness to the scope of services;
2. Organization of the proposal;
3. Experience, reputation, and qualifications of the principal assigned to service the NJIIF;
4. History and experience with similar types of governmental entities;
5. Knowledge of the operations of JIF's and Insurance Pools in N.J., the NJIIF and the services to be provided as Medical Claims Manager;
6. Knowledge of N.J. Workers Compensation
7. Favorable references from Public sector clients for whom similar services are/were provided;
8. Supplemental information provided as part of the proposal;
9. Other factors the Executive Board deems in the best interest of the NJIIF membership;
10. The NJIIF reserves the right to reject any proposal(s), to waive any irregularities or technicalities and to accept the proposal deemed the most advantageous to the NJIIF;
11. All awards are and shall be subject to the availability of funds.

Exhibit A

RFP DOCUMENT CHECKLIST

Instructions to Respondents and Statutory Requirements

Initial each checked entry to confirm applicant’s review and response to each item

Required by NJIIF	Submission Requirement	Initial
X	RFP Document Checklist (Exhibit A)	
X	Business Registration Certificate Form (mandatory with RFP submission)	
X	Stockholder Disclosure Certification Form (Exhibit D)	
X	Non-Collusion Affidavit Form (Exhibit E)	
X	Photocopy of Affirmative Action Compliance - Evidence and Language Read and Acknowledged (Exhibit C)	
X	RFP Proposal Form (Exhibit A-2)	
X	Respondent’s Information Sheet (Exhibit A-1)	
X	Financial Disclosure (Schedule FD)	

Place the following mandatory submissions at the beginning of the Proposal:

1. Business Registration Certificate

Exhibit B

**AFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27**

**GOODS AND SERVICES CONTRACTS
(INCLUDING PROFESSIONAL SERVICES)**

This form is a summary of the successful bidder's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

The successful bidder shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

(a) A photocopy of a valid letter that the contractor is operating under an existing Federally approved or sanctioned affirmative action program (good for one year from the date of the letter);

OR

(b) A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-4;

OR

(c) A photocopy of an Employee Information Report (Form AA302) provided by the Division and distributed to the public agency to be completed by the contractor in accordance with N.J.A.C. 17:27-4.

The successful vendor may obtain the Affirmative Action Employee Information Report (AA302) from the contracting unit during normal business hours.

The successful vendor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the public agency, and the vendor copy is retained by the vendor.

The undersigned vendor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27 and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her bid shall be rejected as non-responsive if said contractor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

COMPANY: _____ SIGNATURE: _____

PRINT NAME: _____ TITLE: _____

DATE: _____

N.J.S.A. 10:5-31 and N.J.A.C. 17:27
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
Goods, Professional Services and General Service Contracts
(Mandatory Affirmative Action Language)

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. Except with respect to affectional or sexual orientation, the contractor will take affirmative action to ensure that such applicants are recruited and employed, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex. Such action shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting for the provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex.

The contractor or subcontractor, where applicable, will send to each labor union or representative or workers with which it has a collective bargaining agreement or other contract or understanding, a notice, to be provided by the agency contracting officer, advising the labor union or workers' representative of the contractor's commitments under this act and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to employ minority and women workers consistent with the applicable county employment goals established in accordance with N.J.A.C. 17:27-5.2 or a binding determination of the applicable county employment goals determined by the Division, pursuant to N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, labor unions, that it does not discriminate on the basis of age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the applicable employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, creed, color, national origin, ancestry, marital status, affectional or sexual orientation or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Contract Compliance and EEO as may be requested by the Division from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Contract Compliance & EEO for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

Exhibit C

**STOCKHOLDER DISCLOSURE CERTIFICATION
This Statement Shall Be Included with RFP Submission**

Name of Business _____

I certify that the list below contains the names and home addresses of all stockholders holding 10% or more of the issued and outstanding stock of the undersigned.

OR

I certify that no one stockholder owns 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business organization:

- | | | |
|---|--|--|
| <input type="checkbox"/> Partnership | <input type="checkbox"/> Corporation | <input type="checkbox"/> Sole Proprietorship |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Limited Liability Corporation | <input type="checkbox"/> Limited Liability Partnership |
| <input type="checkbox"/> Subchapter S Corporation | | |

Sign and notarize the form below, and, if necessary, complete the stockholder list below.
(copy if need more space)

Stockholders:

Name: _____

Name: _____

Home Address: _____

Home Address: _____

Name: _____

Name: _____

Subscribed and sworn before me this ____ day of _____, 2__.

(Notary Public)

My Commission expires:

(Affiant)

(Print name & title of affiant)

(Corporate Seal)

Exhibit D

NON-COLLUSION AFFIDAVIT

State of New Jersey
County of _____

ss:

I, _____ residing in _____
(name of affiant) (name of municipality)
in the County of _____ and State of _____ of
full age, being duly sworn according to law on my oath depose and say that:

I am _____ of the firm of _____
(title or position) (name of firm)
_____ the bidder making this Proposal for the bid

entitled _____, and that I executed the said proposal with
(title of bid proposal)

full authority to do so that said bidder has not, directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive bidding in connection with the above named project; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the _____ relies upon the truth of the statements contained in said Proposal and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by _____.

Subscribed and sworn to

before me this day _____ of

Signature

_____, 2 _____

(Type or print name of affiant under signature)

Notary Public of

My Commission expires: _____
(Seal)

Exhibit E

RESPONDENTS INFORMATION SHEET

Please fill in the following information and submit with your proposal:

COMPANY NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

FAX NUMBER: _____

FEDERAL I.D. NUMBER: _____

NAME OF PERSON PREPARING BID: _____

PHONE NUMBER _____ EXT. _____

CONTACT PERSON FOR CORRESPONDANCE REGARDING THE PROPOSAL

NAME: _____

ADDRESS: _____

PHONE: _____ FAX NUMBER: _____

E-MAIL ADDRESS _____

PROJECT COORDINATOR

COMPANY NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CELL PHONE NUMBER: _____

FAX NUMBER: _____

PERSON TO CONTACT: _____

EMAIL ADDRESS: _____

Exhibit F

NJIIF PROPOSAL FORM

Name: _____

Signature: _____

Address: _____

Phone: _____ Fax: _____

Title/Number of RFP - _____

The following as applicable:

	2020	2021	2022
Flat/Annual rate for services outlined herein	\$ _____	\$ _____	\$ _____
Hourly Rate for providing services outlined herein ...	\$ _____	\$ _____	\$ _____
Hourly Rate for additional services/personnel:	\$ _____	\$ _____	\$ _____
Description: _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Any other anticipated expenses/costs:

Description: _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Exhibit G
Schedule FD
Vendor Financial Disclosure Form

Entity Name / Source of Compensation	Amount Received from a) 1/1/19 – 12/31/19; and b) Anticipated to be received from 1/1/20 – 1/31/20

By submitting its response to this RFP, _____ hereby represents and warrants that other than as set forth in this Schedule FD, other than payments that listed above, it has received no payment, compensation or reimbursement and anticipates receiving no future payments, compensation or reimbursement, in any form from any person, company or entity for the referral or assignment of work, business or services provided to or on behalf of the NJIIF or any of its members.

Name (printed)

Witnessed by:

Signature

Date