Tule River Indian Health Center, Inc of California Seeks Proposals from Insurance Broker/s

The Tule River Indian Health Center, Inc is soliciting proposals from Insurance Broker/s to provide insurance coverage on the following: General Liability, Property, Crime, Commercial Auto, Excess Liability, Aviation, Differences in Condition and Workers Compensation.

Proposals must be received no later than June 7, 2022. Notification of awards will be made by June 14, 2022. Indian owned firms are especially invited to respond to this Request for Proposals. The Tule River Indian Health Center, Inc shall exercise its Tribal Sovereignty and shall retain the right to reject any and all proposals as deemed necessary.

All documents must be received by the Tule River Indian Health Center, Inc Administration Office on or before 5:00 PM on June 7, 2022. Postmarks not accepted. (Late submittals will not be considered.)

Proposal should address the following items:

Perform General services as requested, including identifying issues and exposures negotiating on the behalf of the Tule River Indian Health Center, Inc with insurance carriers; keeping Tule River informed of the significant developments affecting its insurance coverage. The Respondent selected as the broker of record shall be authorized to represent and assist the Tule River Indian Health Center, Inc in discussions and transactions with all insurance carriers, provided that the broker shall not place any insurance on behalf of Tule River Indian Health Center, Inc unless so authorized in writing.

Review Policies and endorsements for accuracy and conformity to specifications and negotiated coverage’s.

Providing coverage summaries to Tule River Indian Health Center, Inc for all new coverage’s and updates. Processing or facilitating the processing of certificates of insurance, as requested by Tule River Indian Health Center, Inc.

The Broker shall forward Tule River Indian Health Center, Inc claims to the insurance carrier while monitoring the claim status and assist in obtaining timely resolutions of the submitted claim.

Broker must attend regular, special, emergency meetings as the Tule River Indian Health Center, Inc deems necessary. Provides regular Risk management services to the Tule River Indian Health Center, Inc and its staff.

The proposals submitted by the respondent must meet or exceed the professional, administrative and financial qualifications set forth in this section and shall incorporate the information requested.

Respondents are encouraged to be clear, factual, and concise in their presentation of information.

The initial Term of the insurance policies to be procured by the Broker will begin July 1, 2022 and last for (3) three years; current policies expire on June 30, 2025.

Content of Proposal Response

All documents must be received by the Tule River Tribal Administration Office on or before 5:00 PM on June 7, 2022. Postmarks will not be accepted. Late submittals will not be accepted.

1. Letter of Transmittal
   Company Name, address, telephone number, Fax number, email address and contact person.
2. Qualifications  
   Experience of Firm  
   Key personnel, including partners, sub-partners

3. Legislative Compliance  
   Inclusion of suspension and debarment

4. Fee Proposal

5. Incomplete proposals shall be considered non-responsive.

   a. All correspondences or inquiries should be directed to:

      ATTN: Anand Dhakal, CFO  
      Tule River Indian Health Center, Inc  
      380 N Reservation Road, Porterville, CA 93257  
      Direct (559) 791-2558  
      Email: anand.dhakal@crihb.org

   b. This request does not constitute an offer of employment or to contract for services.

   c. Subsequent to issuance of this RFP, the Tule River Indian Health Center, Inc (through issuance of addenda to all firms that have received a copy of the RFP) may modify, supplement or amend the provisions of this RFP in order to respond to inquiries received from prospective respondents or as otherwise deemed necessary or appropriate by (and sole judgment of) the Tule River Indian Health Center, Inc.

   d. The Indian Health Center, Inc reserves the right to retain all proposals submitted for consideration.

   e. Proposals should conform to the following: All pages are to be numbered and shall include a table of contents. Experience of References may be included as additional exhibits or attachments.

Neither the Tule River Indian Health Center, Inc, nor their respective staffs, consultants nor advisors (including but not limited to the insurance committee) shall be liable for any claims or damages resulting from the solicitation or preparation of the proposal, nor will there be any reimbursement to respondents for the cost of preparing and submitting a proposal or for participating in this procurement process.

**Responsiveness/Experience Requirements:**

Proposal content and completeness will be important criteria in the evaluation process. In order to streamline the evaluation process and insure that all proposals are evaluated on an equal basis, it is required that proposals adhere to the standard format outlined below for presentation:

**Letter of Transmittal:** The respondent must provide a letter of transmittal signed by the individual who is authorized to commit the firm to the scope of services contained in this RFP and the Firms corresponding proposal.

Letter must incorporate the following:

Acknowledgement of the receipt of this RFP stating that it is understood that all conditions contained in this RFP may be incorporated into any resulting contract.

Provide a narrative statement of the respondents understanding of Tule River Indian Health
Center, Inc’s needs, and goals.

A statement that guarantees that the proposal is valid for 90 days from the date of receipt by the Tule River Indian Health Center, Inc.

Statement of acknowledgement that all information contained in the proposal is factual and accurate.

Statement that respondent is in compliance with all applicable affirmative action regulations.

Experience of the Firm: Respondent must demonstrate the experience and qualifications of the Firm. Respondent must provide the following:

- Brief History of the firm; highlight the benefits the firm believes it can contribute to the Tule River Indian Health Center, Inc.
- Explanation of fields of expertise and any other information the respondent deems pertinent which demonstrates an ability to perform the requested services.
- Experience working with Indian Health Center, Inc with knowledge of work in Indian Country.

Key Personnel Experience: Must demonstrate the experience and qualifications of the firm and its professionals who will be performing work for TRIHCI. Respondent shall provide the following:

- Resumes of the professional who will be assigned and committed to the Tule River Indian Health Center, Inc, identifying each professions’ status in the firm, i.e., partner, associate, etc., and his or her applicable experience.

A list of all immediate relatives of Principal(s) of respondent who are Tule River Indian Health Center, Inc employees elected officials of Indian Health Center, Inc. For Purposes’ of the above, “immediate relative” means a spouse, parent, step-parent, brother, sister, child, step-child, direct line aunt or uncle, grandparent, grandchild, and in-laws by reason of relation.

Other information respondent deems pertinent which demonstrates an ability to perform the requested services.

The Tule River Indian Health Center, Inc shall require the supplier/s to sign on the certification regarding debarment, suspension, and other responsibility matters primary covered transaction (form #PP10-02). View attachment.

Fee Proposal:

Identify the proposed fee for the provision of the services described in Content of proposal response. A one-time financing fee annual fee (if any) must be included by the respondent.

Submission of proposal:

Respondents must submit an original and three (3) copies of their proposal to designated contact person. To be responsive, Proposals must provide all requested information, and must be in strict conformance with the instructions set forth herein. Proposals and all related information must be bound, signed and acknowledged by the respondent.
The Indian Health Center, Inc objective in soliciting proposal is to enable it to select a firm or organization that will provide high quality and cost-effective services to Tule River Indian Health Center, Inc. The Tule River Indian Health Center, Inc will consider proposals only from firms that, in the Indian Health Center, Inc judgment, have demonstrated the capability and willingness to provide high quality services to the members of the Tule River Indian Health Center, Inc.

A. Size, resources (safety, loss control, risk management) and reputation in the field.

B. Service Team Experience;

C. Special expertise in providing insurance brokerage services to Tribal entities;

D. Ability and availability to accommodate the professional needs of Tule River.

E. Access to insurance providers, online website capabilities;

F. Responsiveness to the request for Proposal;

G. Other Factors determined to be in the best interest of the Tule River Indian Health Center, Inc.
TULE RIVER INDIAN HEALTH CENTER, INC
CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND
OTHER RESPONSIBILITY MATTERS

The prospective participant certifies to the best of its knowledge and belief that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;

2. Have not within a three year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

3. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (2) of this certification; and

4. Have not within a three year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

I understand that a false statement on this certification may be grounds for rejection of this proposal or termination of the award. In addition, under 18 U.S.C. Sec. 1001, a false statement may result in a fine of up to $10,000 or imprisonment for up to 5 years, or both.

____________________________________________________
Prime or Subcontractor's Name:

____________________________________________________
Signature and Title of Authorized Official

Date

I am unable to certify to the above statements. Attached is my explanation.

Telephone Number: ___________________________________
Submit to: Tule River Indian Health Center, Inc, PO Box 589, Porterville, CA 93258