



STATE OF CONNECTICUT
TEACHERS' RETIREMENT BOARD
21 GRAND STREET HARTFORD CT 06106-1500
Toll free 1-800-504-1102 X8402 (860) 241-8402 Fax (860) 525-6018
"An Affirmative Action/Equal Opportunity Employer"
www.ct.gov/trb

RFP ADDENDUM #4

DESCRIPTION: Medical, Vision and Hearing Benefits Administrative Services

On the census that we received: is the zip code tab by subscriber.....defined as retiree only? Does the birthday tab include all members.....defined as retiree and spouse?

The zip code tab includes all plan participants.

The zip code file only includes members.

The date of birth tab includes all plan participants.

The date of birth tab includes all plan participants.

We do not differentiate retiree from spouse in our membership/participant file.

The enrollment file we create has an identifier in it to differentiate between employee and spouse.

Date Issued: 01/04/2008



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RFP ADDENDUM #3

DESCRIPTION: Medical, Vision and Hearing Benefits Administrative Services

Is the dental portion of the rfp out to bid?

No, we are not bidding dental at this time.

Confirm eligibility will be received on a member level.

The membership/ participant file will be submitted on an individual basis.

On the census that we received: is the zip code tab by subscriber.....defined as retiree only? Does the birthday tab include all members.....defined as retiree and spouse?

The zip code tab includes all plan participants.

The date of birth tab includes all plan participants.

We do not differentiate retiree from spouse in our membership/participant file.

Do you have a self bill today or are you invoiced each month on a pmpm basis (listing each member and a fee for each on the invoice)?

We have had a self insured program at TRB that has worked out relatively well over the last fifteen years. While we will accept bids for an insured program, generally we would like a self insured bid to contain a PMPM illustration.

Is Medicare Crossover currently in place?

The program that we have provides for electronic claim adjudication with Medicare. The drugs are separate and we receive the subsidy.

Date Issued: 12/19/2007



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RFP ADDENDUM #2

DESCRIPTION: Medical, Vision and Hearing Benefits Administrative Services

Clarification regarding SAS audit requirement:

A Type two SAS70 audit covering each year of the contract is required at the bidders expense.

The following are questions we received in reference to the Connecticut Teachers' Retirement Board (TRB) Request for Proposals. The responses are given below each question, and both questions and answers will be made available through the TRB website.

Question 1: Will a carrier be disqualified from bidding if they are unable to bill on a PMPM basis?

Answer: We have had a self insured program at TRB that has worked out relatively well over the last fifteen years. While we accept bids for an insured program generally we would like a self insured bid to contain a PMPM illustration.

Question 2: Is Medicare Crossover currently in place.

Answer: The program that we have provides for electronic claim adjudication with Medicare. The drugs are separate and we do receive the subsidy.

Date Issued: 12/5/2007



Invitation to Bid

STATE OF CONNECTICUT

TEACHERS' RETIREMENT BOARD

21 GRAND STREET HARTFORD, CT 06106-1500 In CT 1-800-504-1102 (860) 241-8402 Fax (860) 525-6018 www.ct.gov/trb

Form TRB1

BID # 2008-01 Medical, Vision, and Hearing Benefits Administrative Services

Intention to Bid letter due: December 6, 2007 by 3:00 pm

Bid Due Date: January 11, 2008 by 3:00pm

1. Ethics summary & forms:

http://www.ct.gov/ethics/lib/ethics/contractors_guide_final2.pdf

a. Gift Certification Form 1:

http://www.ct.gov/opm/lib/opm/finance/psa/opm_ethicsform1_103107.pdf

b. Annual Contract Certification Form 5:

http://www.ct.gov/opm/lib/opm/finance/psa/opm_ethicsform5_103107.pdf

c. Consulting Agreement Affidavit Form 6:

http://www.ct.gov/opm/lib/opm/finance/psa/opm_ethicsform6_103107.pdf

2. Executive Orders:

Executive Order No. Three (3); No. Seven C (7C); No. Sixteen (16); No. Seventeen (17); No. Fourteen (14):

http://www.das.state.ct.us/Purchase/Info/Executive_Orders.pdf

No. Fourteen (14) Compliance policy: <http://www.das.state.ct.us/Purchase/EPP/EPPPpolicy.pdf>

3. State Contractor Contribution Ban:

Form SEEC 10: http://www.ct.gov/seec/lib/seec/seec_form_10_notice_to_state_contractors.pdf

Form SEEC 11:

http://www.ct.gov/seec/lib/seec/attachment_c-seec_form_11_notice_to_executive_branch_state_contractors_3.20.07.pdf

4. Bidder information form (will be used if you are selected)

[http://www.das.state.ct.us/Purchase/Info/Vendor_Profile_Form_\(SP-26NB\).pdf](http://www.das.state.ct.us/Purchase/Info/Vendor_Profile_Form_(SP-26NB).pdf)

<http://www.ct.gov/chro/lib/chro/pdf/notificationtobidders.pdf>

5. TRB HIPAA Business Associate Agreement:

http://www.ct.gov/trb/lib/trb/formsandpubs/TRBBusinessAssoc_Committee.pdf

Evaluation Criteria: *The State of Connecticut has a vested interest in finding the best services/products for the lowest cost.*

Signing this form will acknowledge your receipt of the above State of Connecticut contracting requirements. This must be *Signed & Returned* with your bid by January 11, 2007.

Authorized Signature of Bidder

Company Name

Date

Request for Proposals

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Introduction

The Teachers' Retirement Board (the "Board") is a statutory agency of the State of Connecticut. It was established in 1917 to provide retirement and medical benefits for certain classes of retired employees. The statutory authority under which the program operates is defined in Chapter 167a of the Connecticut General Statutes.

The Teachers' Retirement Board operates a medical program for retirees participating in Medicare A and B. The program is self-funded and is currently administered by Stirling and Stirling, a benefits administrator located in Milford, CT. The Pharmacy Benefits Manager is currently Medco Health.

The Board is interested in receiving proposals with regards to the provision of medical, vision and hearing insurance/benefit management services. The reason for the request for proposals is that the Board has determined that the plan needs to be examined on a regular basis to assure that the plan is economically run and that the administrative services represent the state of the art available. The successful bidder will be asked to begin administering the plan effective July 1, 2008.

The following pages outline the plan in its current form, the proposed plan, and provide information about the current plan's operation. Additionally, there is a questionnaire that outlines the form of the responses desired.

The State desires that the period of the contract initially be for a period of three years. The Board will be the contracting agency for the State.

Intention to Bid

By December 6, 2007, 3:00pm, we request that all interested parties respond with their letter of intent to bid. Failure to provide timely notice of intent to bid will disqualify the bidder from participation. Upon determining your intention to bid, please notify Ms. Darlene Perez at Teachers' Retirement Board, 21 Grand Street, Hartford, CT 06106 or darlene.perez@po.state.ct.us of your intent. The intent to bid letter is not a binding statement; it simply identifies potential bidders for future communication.

Time Table

Request for proposals available	November 20, 2007
Intention to bid letter	December 6, 2007
Bids Due	January 11, 2008
Finalist Presentations	January 28, 2008
Selection Administrator	February 8, 2008
Implementation	July 1, 2008

Bidders must provide seven copies of all documents and exhibits submitted. Failure to provide seven copies of a complete and conforming bid by 3:00 PM January 11, 2008 will result in disqualification from the bid process. Delivery of the bid must be made to Darlene Perez at Teachers' Retirement Board office at 21 Grand Street Hartford, 06106. Deliveries by common carriers must be received at the Board no later than 3:00 PM on the 11th of January 2008 in order to be considered a timely bid.

Solicited Bidders

The following plan administrators received notice of the bid process. Additional vendors may be involved as a result of public notice that is required of such state contracts.

Stirling & Stirling
Wellpoint Health Systems (formerly Anthem)
Insurance Programmers Inc.
Diversified Benefits Group
United Healthcare

Composition of Teachers' Retirement Board

The Teachers' Retirement Board sponsors the plan. The Board's administrator is Ms. Darlene Perez. The Board is a combination of elected and appointed individuals composed of 12 members. Five of the members are teachers and/or retired teachers and five members are public members. Ex-officio to the Board are the Commissioner of Education and the Commissioner of the State Department of Social Services. All correspondence with regards to this proposal shall be sent to Ms. Darlene Perez at the address noted above or by email, darlene.perez@po.state.ct.us.

Legal Form of Bids

As an agency of the State of Connecticut, the Teachers' Retirement Board and all potential vendors are subject to the purchasing rules of the State of Connecticut. As a state plan, the plan is exempt from ERISA. As an agency of the State of Connecticut, the Board is exempt from Connecticut state sales taxes. The Teachers' Retirement Board purchases no stop loss coverage for its members. The State will not return any bids provided and they retain the right to accept or reject any or all bids. A description of the specifics of the State of Connecticut's purchasing rules is outlined in Appendix A, Instructions to Bidders.

Source of Funds

There are three primary sources of revenue for the program. The first source of funds is the contribution by active teachers, who are required to pay 1.25% of their salaries toward the program. The second source of funds is from the State of Connecticut. The final source of funds is contributions from plan participants, either in the form of employee/ retiree cost shares or in the form of employee co-pays, deductibles and coinsurance. Currently, a base program is provided at a one-third cost share to the members and dental, vision and hearing are provided at 100% cost to the membership. Any modifications under the Medicare Modernization Act will be incorporated into the plan as required.

Plan Membership and Eligibility

Many teachers in the State of Connecticut are not eligible for Social Security as a result of their employment by the local school boards. As a result, retired teachers fall into two broad classes with regards to health insurance: those who by reason of other employment or their spouse's employment are Medicare eligible, and those who are not. By statute those who participate in Medicare Parts A & B, must be offered the opportunity to join the Teachers' Retirement Board medical program. Those who are not participating in Medicare must be given the opportunity to join the plan of the local board of education. Often those who retire prior to age 65 join the Teachers' Retirement Board plan after spending several years in the local school board plan as retirees. Retired employees who participate in the local plan are paid a stipend of \$110 per month as an offset to the cost of their medical program.

Current Enrollment

Currently participants of the Teachers' Retirement plan have three options with Stirling & Stirling: basic plan includes medical and drug only; basic plan with dental coverage; or the basic coverage plus both dental and vision and hearing.

The June 2007 enrollment represents a 4% member increase over the July 2006 period.

Table 1 provides a summary of the current enrollment.

<u>Month and Year</u>	<u>Number of Members in Medical</u>	<u>Number of Members in Vision/Hearing</u>
July 2006	12,365	5,807
Aug 2006	12,382	5,876
Sept 2006	12,532	6,044
Oct 2006	12,562	6,094
Nov 2006	12,592	6,139
Dec 2006	12,642	6,444
Jan 2007	12,685	6,491
Feb 2007	12,705	6,527
Mar 2007	12,728	6,574
Apr 2007	12,763	6,631
May 2007	12,813	6,689
June 2007	12,897	6,795

Expected Medical, Vision and Hearing Spend

The expected medical, vision and hearing claims for the first year of the contract period, July 1, 2008 through June 30, 2009 is expected to be slightly over \$18 million. These estimates are based upon an annual growth rate in membership of ten percent and annual growth rates in per person medical spend of eight percent.

Participant and Plan Cost Sharing

The statutory basis of the benefit programs require that individuals be provided a base plan at one-third of the cost of the basic medical and drug plan and at 100% of the cost of the dental and vision and hearing plans.

The following Table provides a summary of the monthly claim costs associated with the current plans.

<u>Month/Year</u>	<u>Number of Members</u>	<u>Medical Claims Paid</u>	<u>Number of Members</u>	<u>Vision/Hearing Claims Paid</u>
Jul 2006	12,365	\$746,437	5,807	\$10,365
Aug 2006	12,382	\$1,797,332	5,876	\$34,748
Sept 2006	12,532	\$1,270,762	6,044	\$32,390
Oct 2006	12,562	\$1,508,428	6,094	\$32,941
Nov 2006	12,592	\$1,174,534	6,139	\$22,664
Dec 2006	12,642	\$1,530,720	6,444	\$27,138
Jan 2007	12,685	\$1,568,205	6,491	\$39,308
Feb 2007	12,705	\$746,834	6,527	\$12,551
Mar 2007	12,728	\$1,203,102	6,574	\$24,196
Apr 2007	12,763	\$1,390,100	6,631	\$28,066
May 2007	12,813	\$1,800,261	6,689	\$30,004
Jun 2007	12,897	\$1,161,745	6,795	\$21,809

Current Plan Benefits

A copy of the description of the benefits is found in Appendix B. The description includes the provisions of the medical, vision and hearing coverage. The medical plan provides for no drug coverage other than drugs that are consumed while in a facility covered under Medicare. The current drug plan is not out to bid and is not a subject of this RFP. A description of the exclusions under the current program may also be found in Appendix B.

Proposed Plan Design

The proposed medical, vision and hearing plans will provide similar benefits to what is currently offered. The Board has experienced significant increases in major medical claims that exceed the lifetime limits under the Medicare program. As these are first dollar claims, the exposure of the Board is significant. The Board is particularly interested in reviewing proposals that provide for discounted services on such hospital claims as well as an increased level of management for such services. We believe that the costs of such services offer an

opportunity of savings that would not negatively impact the services that are delivered to members. The Board is particularly concerned with level of management that assures an appropriate examination of the level of acuity of care and to assure that the care being provided is critical care that does not have significant custodial attributes.

Contractual Basis

A copy of the sample agreement is attached in Appendix C.

Service Requirements

The Successful bidder is expected to provide a comprehensive set of services to the Teachers' Retirement Board and their members. The services are expected to include:

Electronic management of the eligibility and benefits system.

Management of utilization for services in excess of Medicare.

Maintenance of the in-force file (monthly modifications will be provided), issuance of cards, response to member concerns.

Maintenance of network.

Provision of paper and electronic provider directories.

Reporting of plan trends and utilization.

Assistance in annual ratemaking process.

Guaranteed phone/service center hours.

Provision of annual financial and SAS 70 audits (note this is to be included as part of the bid price).

Bidder Questionnaire

The questionnaire must be completed in full in order to be considered a conforming bid. Questions may be forwarded in email to darlene.perez@po.state.ct.us at the Teachers' Retirement Board.

Firm Description

1. Name of firm:
2. Business address and telephone of firm:
3. Local Representative for firm:
4. Address, telephone and email of Local Representative:
5. Location (s) of Administrative office(s) proposed to handle STRB claims:
6. Total number of lives for which your firm serves as the Medical and/or Vision and Hearing benefits administrator:

7. Total number of organizations for which your firm serves as the benefits administrator:
8. Please list your ten largest customers and the number of lives in each of the ten accounts.
9. Please provide references for the other organizations in which you serve as the benefits administrator:
10. Identify key members of the account management team, their roles, and their time commitments, both pre and post-implementation. Include in your list the account executive, local account manager, implementation coordinator, medical director and day-to-day liaison to the Teachers' Retirement Board.

	Name	Address	Title	Years of Service
Account Manager				
Account Manager				
Service Coordinator				
Underwriter				
Customer Service Manager				
Implementation Manager				

11. Please provide brief resumes for each of the individuals identified in item 10, including each individual's mailing address, phone number and email address.
12. Please list other accounts that each account manger handles including location, size of organization and type of services provided.
13. What are your companies' current rating from A.M. Best, Moody's, Standard & Poor's and Weiss?
14. If different from above, please list the location of the office (city & state) that will provide the following services for the network: quality assurance, claims administration, member services, dental management, and customer service.

Network

1. Please provide a national zip code match report for each proposed product base upon the current group of Teachers' Retirement Board beneficiaries. Include the entire population in the report.
2. The link below lists all 3-digit zip codes for the current members. For each zip code, identify your ability to service these members. Include the entire population in the report.

<http://www.ct.gov/trb/lib/trb/formsandpubs/TRBzipcodes.pdf>.

3. Are there any questions or pending reviews in the organization's license to operate? Is your organization currently under investigation by any state or Federal agency?
4. Please describe the arrangements that are provided for members outside the United States.

Providers

1. What provider turnover did you experience during 2006?
2. Is your provider directory accessible on the Internet? If so, where?
3. Please explain whether and how your organization collects and verifies the following information pertaining to providers: professional education and license, clinical performance, malpractice history, malpractice insurance coverage, involvement in any formal proceedings.

Quality Assurance and Member Relations

1. Explain your organization's process for complaints from members concerning quality of care issues.
2. List the business hours of telephone accessibility for the office or offices you are proposing to service the Teachers' Retirement Board for customer service.
3. Provide the following statistics for the office you are proposing to service the Teachers' Retirement Board in Connecticut. Answer separately for questions regarding claims, eligibility and other information.
 - a. Average time to answer telephone:
 - b. Average hold time:
 - c. Average abandoned rate:

Financials/ Pricing

1. The Board is seeking proposals on either an ASO or an insured basis. Describe the details of the financial arrangements you are proposing.
2. For an ASO and/or insured arrangement, The Board requests the administration fees assessed on a per member per month basis (a married couple of teachers constitute two members.) The fee can be different by plan type but not by tier. Please confirm your compliance with the fee arrangement. Would this fee arrangement require a year-end settlement? If so, indicate the components and the basis for calculating the final cost. If the number of claims is a variable, define how you count claims. Are the fees and rates included in your proposal based on a mature or immature year? If they were based on immature year, what would be the factor to convert these fees to a mature basis?

3. Assuming that premium or fee payments are due on the first of the month (please advise if this is not the case), will you permit a premium delay of 30 days? What is the additional charge associated with the delay? What is your normal grace period?
4. Indicate the rating methodology you use to set rates and include a complete description of how you apply that methodology in both the initial rate setting and in the renewal process. Specify any difference among plan types and indicate any regional participant size limitations or thresholds.
5. The Teachers' Retirement Board is seeking multi-year fee and rate guarantees on the increases. Please describe the guarantees you propose.
6. The Teachers' Retirement Board is also seeking administrative performance guarantees in the area of implementation, transitional care, account management, member services, non-network claims accuracy, turnaround and member satisfaction. Please describe the guarantees you propose and indicate the total amount, in dollars, which you are willing to be put at risk.

Claim Payment

1. Please provide an overview of the claims processing process. Include the systems that are used and how the managed care, eligibility and reporting systems are accessed.
2. Indicate the extent to which your organization uses subcontractors in any part of the claim administration process. If sub contractors are used, provide names and locations.
3. What is the accuracy of claim payment by dollars and by transactions? Do you have service targets for accuracy of claim administration? Explain.
4. Are members required to submit claim forms and bills? If so, when?
5. How is coordination of benefits tracked and administered?

Reporting

1. Please provide an example of your standard reporting package. This should include the monthly utilization and financial reports, the quarterly reporting mechanism and the annual review. Of the reporting is not a standard part of the bid provided, please provide the cost basis of the service provision.
2. Please address how your reporting mechanism deals with deductible accumulations, large case issues, claim lag report and problem utilization areas.

3. Please provide a listing of any other reports that your organization provides and the separate costs (if any) of such reports.
4. Please provide sample member and provider EOB's. Indicate whether and how deductible credits are reported to members.
5. Aside from the EOB, does your organization provide any additional member reports? If so, describe.
6. Is there a mechanism for members to acquire current balances? How are lifetime maximums reported?

APPENDIX A

**STATE OF CONNECTICUT
TEACHERS' RETIREMENT BOARD
21 GRAND STREET, 2ND FLOOR
HARTFORD, CT 06106**

Standard Bid Terms and Conditions

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Submission of Bid

1. Bids must be submitted on forms supplied by the Agency and must be submitted no later than the date and time specified in the Invitation to Bid. Telephone or facsimile bids will not be accepted in response to an Invitation To Bid.
2. Bids received after the time and date of bid opening specified in each Invitation To Bid shall not be accepted for consideration and shall be returned unopened. Bid envelopes must clearly indicate the bid number as well as the date and time of the opening of the bid. The name and address of the Bidder should appear in the upper left hand corner of the envelope.
3. Incomplete bid forms may result in the rejection of the bid. Amendments to bids received by the Agency after the time specified for opening of bids shall not be considered. An original and two copies of the bid schedule shall be returned to the Agency. Bids shall be computer prepared, typewritten or handwritten in ink. Bids submitted in pencil shall be rejected. All bids shall be signed by a person duly authorized to sign bids on behalf of the bidder. Unsigned bids may be rejected. Errors, alterations or corrections on both the original and two copies of the bid schedule to be returned must be initialed by the person signing the bid proposal or their authorized designee. If an authorized designee initials the correction, there must be written authorization from the person signing the bid to the person initialing the erasure, alterations, or correction. Failure to do so shall result in rejection of bid for those items erased, altered or corrected and not initialed.
4. Conditional bids shall be rejected. A conditional bid is one which limits, modifies, expands or supplements any of the terms and conditions and/or specifications of the Invitation To Bid.
5. Alternate bids will not be considered unless the Invitation To Bid specifically requests alternate bids. An alternate bid is one which is submitted in addition to and is not dependent upon the bidder's primary response to the Invitation To Bid.
6. In the event of a discrepancy between the unit price and the extension, the unit price shall govern. Prices should be extended in decimal form, not fractions, to be net, and shall include transportation and delivery charges fully prepaid by the Contractor to the destination specified in the Invitation To Bid, and subject only to cash discount.
7. Pursuant to Section 10-412 of the Connecticut General Statutes, the State of Connecticut is exempt from the payment of excise, transportation and sales taxes and imposed by the Federal Government and/or the State. Such taxes must not be included in bid prices.
8. All bids will be opened and read publicly on the date specified in the Invitation To Bid and, upon award, are subject to public inspection.
9. The Bidder fully acknowledges and agrees with all of the terms and conditions contained in this Bid Form, the accompanying Invitation To Bid and Contract TRB2008-01. Further, if the bidder is awarded a contract for the goods and/or services called for in the Invitation To Bid, the bidder's signature on Bid Form TRB1 shall mean that the bidder shall be bound by and perform fully in accordance with all of the terms and conditions set forth in the Invitation To Bid, this Contract TRB2008-01 as if the bidder had actually executed Form SP19 and Contract TRB2008-01 itself.

Guaranty or Surety

1. Bid and or performance bonds may be required. Bonds must meet the following requirements: Corporation – must be signed by an official of the corporation above their official title and the corporate seal must be affixed over the signature; Firm or Partnership – must be signed by all the partners and indicate they are "doing business as"; Individual – must be signed by the owner and indicated as "Owner". The surety company executing the bond or countersigning must be licensed in Connecticut and the bond must be signed by an official of the surety company with the corporate seal affixed over their signature. Signatures of two witnesses for both the principal and the surety must appear on the bond. Power of attorney for the official signing the bond for the surety company must be submitted with the bond.

Samples

1. The quality of accepted bid samples does not supersede specifications for quality in the Invitation to Bid unless the sample is superior in quality. All deliveries shall have at least the same quality as the accepted bid sample.
2. Samples are furnished free of charge. Bidders must indicate if their return is desired, which the Agency shall do provided that they are returned at the Bidder's sole cost and expense, FOB Bidder's destination, and that they have not been made useless by testing. If they are made useless by testing, the State may dispose of the samples as it deems to be appropriate. Samples may be held for comparison with deliveries.

Award

1. Award of a contract will be made to the lowest responsible qualified bidder and shall be based on quality of the goods or services to be supplied, their conformance with specifications, delivery terms, price, administrative costs, past performance, and financial responsibility.
2. The Agency may reject any bidder in default of any prior contract of guilty of misrepresentation or any bidder with a member of its firm in default or guilty of misrepresentation.
3. The Agency may correct inaccurate awards resulting from clerical or administrative errors.
4. Bidders have ten days after notice of award of the contract to reject the award; after ten days the contract will be binding on the Contractor. If the Contractor rejects the award within the ten day period, the Agency will award the contract to the next lowest responsible qualified bidder.

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Standard Bid Terms and Conditions

Pg. 2 of 2

Submission of Bid

Other Requirements

1. Conn. Gen. Stat. § 4a-81 (the "Act") requires that the Invitation to Bid of which these Terms and Conditions are a part include a notice of the consulting affidavit requirements described in the Act. Accordingly, pursuant to the Act, vendors are notified as follows:
 - (a) No state agency shall execute a contract for the purchase of goods or services, which contract has a total value to the state of fifty thousand dollars or more in any calendar or fiscal year, unless the state agency obtains the written affidavit described in subsection (b) of this section.
 - (b) (1) The chief official of the vendor awarded a contract described in subsection (a) of this section or the individual awarded such contract who is authorized to execute such contract, shall attest in an affidavit as to whether any consulting agreement has been entered into in connection with such contract. Such affidavit shall be required if any duties of the consultant included communications concerning business of such state agency, whether or not direct contact with a state agency, state or public official or state employee was expected or made. "Consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of the state, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction or requests for information or (C) any other similar activity related to such contract. "Consulting agreement" does not include any agreements entered into with a consultant who is registered under the provisions of Chapter 10 of the Connecticut General Statutes concerning the State's Codes of Ethics, as of the date such affidavit is submitted. (2) Such affidavit shall be sworn as true to the best knowledge and belief of the person signing the certification on the affidavit and shall be subject to the penalties of false statement. (3) Such affidavit shall include the name of the consultant, the consultant's firm, the basic terms of the consulting agreement, a brief description of the services provided, and an indication as to whether the consultant is a former state employee or public official. If the consultant is a former state employee or public official, such affidavit shall indicate his or her former agency and the date such employment terminated. (4) Such affidavit shall be amended whenever the vendor awarded the contract enters into any new consulting agreement during the term of the contract.
 - (c) If a vendor refuses to submit the affidavit required under subsection (b) of this section, then the state agency shall not award the Contract to such vendor and shall award the contract to the next highest ranked vendor or the next lowest responsible qualified bidder or seek new bids or proposals.
2. Conn. Gen. Stat. § 4-252 (the "Statute") requires that the Invitation to Bid, of which these Terms and Conditions are a part, include a notice of the vendor certification requirements described in the Statute. Accordingly, pursuant to the Statute, vendors are notified as follows:
 - (a) The terms "gift," "quasi-public agency," "state agency," "large state contract," "principals and key personnel" and "participated substantially" as used in this section shall have the meanings set forth in the Statute.
 - (b) No state agency or quasi-public agency shall execute a large state contract unless the state agency or quasi-public agency obtains the written certifications described in this section. Each such certification shall be sworn as true to the best knowledge and belief of the person signing the certification, subject to the penalties of false statement.
 - (c) The official of the person, firm or corporation awarded the contract, who is authorized to execute the contract, shall certify on such forms as the State shall provide:
 - (1) That no gifts were made between the date that the state agency or quasi-public agency began planning the project, services, procurement, lease or licensing arrangement covered by the contract and the date of execution of the contract, by (A) such person, firm, corporation, (B) any principals and key personnel of the person, firm or corporation, who participated substantially in preparing the bid or proposal or the negotiation of the contract, or (C) any agent of such person, firm, corporation or principals and key personnel, who participated substantially in preparing the bid or proposal or the negotiation of the contract, to (i) any public official or state employee of the state agency or quasi-public agency soliciting bids or proposals for the contract,
 - (2) who participated substantially in the preparation of the bid solicitation or request for proposals for the contract or the negotiation or award of the contract, or (ii) any public official or state employee of any other state agency, who has supervisory or appointing authority over such state agency or quasi-public agency;
 - (3) That no such principals and key personnel of the person, firm or corporation, or agent of such person, firm or corporation or principals and key personnel, knows of any action by the person, firm or corporation to circumvent such prohibition on gifts by providing for any other principals and key personnel, official, employee or agent of the person, firm or corporation to provide a gift to any such public official or state employee; and
 - (4) That the person, firm or corporation made the bid or proposal without fraud or collusion with any person.
 - (d) Any bidder or proposer that does not make the certifications required under subsection © of this section shall be disqualified and the state agency or quasi-public agency shall award the contract to the next highest ranked proposer or the next lowest responsible qualified bidder or seek new bids or proposals.
 - (e) The date that the state agency or quasi-public agency began planning the project, services, procurement, lease or licensing arrangement to be covered by the contract is on or after 25 January 2007.

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HARTFORD, CT 06106**

Vendor Authorization Guidelines – Page 1 of 2

All contracts must include appropriate vendor documentation that does the following three things:

- A. Authorizes the vendor to enter into contracts,
- B. Authorizes a particular officer to execute contracts on behalf of the vendor and
- C. Evidences that the officer signing in fact holds his/her office.

Corporations – Appropriate vendor documentation usually involves a certificate from the Secretary or other appropriate officer setting forth a copy of a board resolution. Sometimes this is not possible, in which case the vendor should observe the following:

- 1) In lieu of the secretary's certificate, the vendors must submit:
 - (a) A current certified copy of the applicable section of the corporation's bylaws which authorizes the execution of contracts by the signing person and
 - (b) A current certification that the officer signing the assignment agreement in fact holds that office
- 2) In lieu of the certified resolution or bylaws, the vendor must include a certified copy of the corporate minutes of their respective boards of directors, which must specifically authorize the person signing the assignment agreement to execute it.

NOTE: If the bylaws or resolutions cannot be found, a formal legal opinion must be obtained attesting to:

- (a) The authority of the company and
- (b) The officer's ability to bind the company to enter into a contract.

Limited Liability Companies (LLC'S) – LLC's that do not have boards of directors must submit the following:

- 1) A document indicating unanimous consent from all
- 2) A certified copy of all those relevant portions of their management agreement or operations agreement that identify which members or managers have the authority to bind the LLC in contracts. The certification must also show that the signing party is in fact a manager/member or that a manager/member has duly (in accordance with the management agreement or operations agreement) delegated signatory authority to the signing person.

If the company can't find the management agreement or operations agreement, a formal legal opinion must be obtained attesting to:

- a. The authority of the company and
- b. The signing party's ability to bind the company to enter into a contract.

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Vendor Authorization Guidelines – Page 2 of 2

Partnerships – Partnerships, like LLC's, do not have boards of directors. Generally, any general partner can bind the partnership. However, it is prudent to make every effort to obtain a partnership authorization that includes some evidence of a partner's authority to bind the partnership. This can include partnership resolutions that read very much like a corporation's resolutions or a copy of the partnership agreement (or all relevant sections) that address the authority of partners to bind the partnership, again taking into account any limitations, or a consent from the appropriate partners. The partnership agreement governs in the same way as the LLC's management or operations agreement.

Sole Proprietors – Sole Proprietors do not need to submit any documentation with regards to vendor authorization or certification. Sole Proprietors must submit a letter on company letterhead stating:

- 1) That the company holds Sole Proprietor status,
- 2) The name(s) of those authorized to execute contracts on behalf of the company and
- 3) The signature of Sole Proprietor.

NOTE: You may review and/or download the Vendor Authorization Guidelines and Samples from the DAS/Procurement website www.das.state.ct.us/busopp.asp. Scroll down until you see the heading "**Vendor**" on the far right side of the screen. The click on "**Vendor Authorization Guidelines and Samples**".

STATE OF CONNECTICUT
Certificate of Compliance with
Connecticut General Statute Section 31-57b

I hereby certify that all of the statements herein contained below have been examined by me, and to the best of my knowledge and belief are true and correct.

The _____ HAS / HAS NOT
Company Name (Cross out Non-applicable)

been cited for three (3) or more willful or serious or serious violations of any Occupational Safety and Health Act (OSHA) or of any standard, order or regulation promulgated pursuant to such act, during the three year period preceding the bid, provided such violations were cited in accordance with the provisions of any State Occupational Safety and Health Act of 1970, and not abated within the time fixed by the citation and such citation has not been set aside following appeal to the appropriate agency of court having jurisdiction or **HAS / HAS NOT** (Cross out Non-applicable) received one or more criminal convictions related to the injury or death of any employee in the three-year period preceding the bid.

The list of violations (if applicable) is attached.

(Name of Firm, Organization or Corporation)

Signed:

Written Signature:

Name Typed:

Title:

(Title of Above Person, Typed)

Dated:

State of

)

County of

)

ss:

A.D., 20 _____

Sworn to and personally appeared before me for the above, _____,
(Name of Firm, Organization, Corporation)

Signer and Sealer of the foregoing instrument of and acknowledged the same to be the free act and deed of

_____, **and his/her free act and deed as**
(Name of Person appearing in front of Notary or Clerk)

_____.
(Title of Person appearing in front of Notary or Clerk)

My Commission Expires:

(Notary Public)

(Seal)

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Bidder's Statement of Qualifications

This form will be used in assessing a Bidder's qualifications and to determine if the bid submitted is from a responsible bidder. State law designates that contracts be awarded to the lowest responsible qualified bidder. Factors such as past performance, integrity of the bidder, conformity to the specifications, etc., will be used in evaluating bids. Attach additional sheets if necessary.

Company Name: _____
&
Address _____

Number of years company has been engaged in business this name: _____ years

List any contract awards to your company by the State of Connecticut within the last three (3) years that you actually performed service against. Indicate which state agency, and provide contract name and number and the name and telephone number of the purchasing agent administering the contract.

Contract No.	Contract Name	State Agency	Purchasing Agent	Tel No.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List any contract awards to your company by the State of Connecticut within the last three (3) years. Indicate which state agency, and provide contract name and number, and the name and telephone number of the purchasing agent administering the contract.

Contract No.	Contract Name	State Agency	Purchasing Agent	Tel No.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List other names your company goes by: _____

List previous company name(s): _____

List at least three completed projects similar in nature to this **INVITATION FOR BIDS** which demonstrates your company's ability to perform the required services.

	Company Name and Address	Telephone No.	Dollar Value
1.	_____ _____	_____	_____
2.	_____ _____	_____	_____
3.	_____ _____	_____	_____

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Company Name: _____

Size of Company

Or Corporation: Number of Employees: Full Time _____ Part Time _____

Company Value Equipment Assets _____ Total Assets _____

Is your company registered with the Office of the Connecticut Secretary of State? ☐ Yes ☐ No

Registration Date, if available _____

List any relevant certifications, licenses, registrations, etc. which qualify your company to meet the requirements of this bid.

(Attach additional sheets if necessary)

List any criminal convictions against your company and any of your company's officers, principal shareholders, directors, partners, LLC members and LLC managers.

(Attach additional sheets if necessary)

List any administrative actions either pending review by the State or determinations that the State has made regarding your company or any of your company's officers, principal shareholders, directors, partners, LLC members or LLC managers. This would include court judgments, actions, suits, claims, demands, investigations and legal, administrative or arbitration proceedings pending in any forum. Include a listing of OSHA violations and any actions or orders pending or resolved with any state agency such as the Department of Consumer Protection, the Department of Environmental Protection, etc. Detail this information on a separate sheet of paper. Such information should be for the last three (3) years.

(Attach additional sheets if necessary)

I hereby certify under penalty of false statement that all the information supplied is complete and true.

Signature

Date

Title

Appendix B

Please click the link below for the TRB Summary Plan Description

http://www.ct.gov/trb/lib/trb/formsandpubs/TRB_SPD_REV091907.pdf

Appendix C

CONTRACT

Between

THE STATE OF CONNECTICUT

Acting by its

TEACHERS' RETIREMENT SYSTEM

AND

FOR THE SERVICES PROVIDED FOR
TRB2008-01
**Medical, Vision and Hearing Benefits
Administrative Services**

July 2008

Sample State Contract link below:

http://www.das.state.ct.us/Purchase/Info/Form_Contract_042407.pdf

Appendix D

Please click the link below for the TRB Census Information (Zipcodes and Birth Dates)

http://www.ct.gov/trb/lib/trb/formsandpubs/TRBCensus_Zipcodes_Birthdates.pdf