

**Muskegon Community College
Request for Proposal
Insurance Agent/Broker**

REQUEST FOR PROPOSAL

Muskegon Community College is seeking and accepting proposals for licensed Insurance brokers to provide brokerage and consulting services for Employee Benefits and Insurance.

Sealed proposals will be received by either mail or personal delivery until **Friday, April 1, 2011 at 2:00 p.m.** Proposals received after the specified time will not be considered. Proposals shall be sealed and plainly marked on the outside of the envelope/box with **RFP Insurance Agent/Broker Services** with name of firm submitting proposal. It is the sole responsibility of the proposer to assure that their proposal is received by Muskegon Community College prior to the time specified. One (1) original and five (5) identical copies should be submitted to the following address:

Muskegon Community College
Attn: Amy James
221 S. Quarterline Rd.
Muskegon, MI 49442

BACKGROUND ON MUSKEGON COMMUNITY COLLEGE

Providing service to the lakeshore region of West Michigan, Muskegon Community College (MCC) is located near the shores of Muskegon Lake and Lake Michigan. MCC serves a broad and diverse body of over 5,000 students, with an average age of 27 years, and offers 41 Associate Degree programs and 48 Certificate programs, known for their transferability and value.

MCC was founded as Muskegon Junior College in 1926, and has been continually accredited by the Higher Learning Commission of North Central Association since 1929. The community college district was created via the Michigan Constitution of 1963 along with an elected Board of Trustees. The college moved to its current campus location, an Alden B. Dow designed facility that opened to the public in 1967.

In 1995, the Stevenson Center for Higher Education opened, comprising a consortium of Ferris State University, Grand Valley State University, and Western Michigan University, designed to increase access to educational opportunities for Muskegon residents. In 2010 the Outdoor Learning Lab, a focal point of green technology and center for MCC's new Alternative and Renewable Energy certificate program opened. The college is currently located on a 111-acre campus in Muskegon, with extension centers in Fremont, Grand Haven, Newaygo and Whitehall.

Muskegon Community College employs approximately 250 employees in various positions. The employee population is highly diverse in all aspects (job duties, age, race, sex and national origin) thus, creating complexity in terms of meeting the employee's benefits needs.

SCOPE OF SERVICES

Muskegon Community College seeks an Insurance Agent/Broker to provide innovative plan design, and effective health care choices for the college's group health and other employee benefit plans. Insurance Agents/Brokers are invited to submit proposals to provide service for the following:

1. Group Health Insurance
2. Group Dental Insurance
3. Group Vision Insurance
4. Group Short Term Disability Insurance
5. Group Life Insurance
6. Group Long Term Disability Insurance
7. Prescriptions
8. Accidental Death and Dismemberment
9. Worker's Compensation

MANDATORY PROPOSER REQUIREMENTS

The proposer must have acted as a full-service Agent/Broker for at least five (5) years and have expertise and training in the fields of group life, health and related insurance programs.

The proposer must be fully HIPPA compliant and their employees must be trained in the requirements of HIPPA Laws.

The selected firm will provide a full range of services, including but not limited to innovative plan design, funding alternatives, risk identification, risk exposures, insurance placement, written analysis and recommendations. Some specific responsibilities include but are not limited to the following:

1. Analyze the insurance needs of Muskegon Community College employees and provide written recommendations for changes where appropriate, or dictated by changing market conditions or laws. Suggest alternative funding methods and plan changes to affect cost savings.
2. Assist in the design of a comprehensive insurance program, addressing retention levels, broadest available coverage terms and insurer financial security.
3. Organize renewal information and prepare insurance specifications.
4. Annually approach insurance marketplace on behalf of Muskegon Community College. Analyze insurer proposals with respect to cost, coverage and stability of insurers. Negotiate final terms.
5. Review all policies and endorsements to assure coverage is as intended. Verify accuracy of all policies, endorsements and invoices prior to delivery.
6. Assist Muskegon Community College in submittal of claims to insurance carriers. Interface with carrier when coverage issues arise.
7. Be available to attend meetings when needed. Respond to questions and general correspondence in a timely manner.
8. Prior to renewal of insurance policies, Agent shall analyze claims and claims history trends, with frequency and severity information on claims.
9. Negotiate renewal rates with current carriers and/or market group coverage to competing carriers.
10. Represent Muskegon Community College as requested in communications with all underwriters, claims adjusters and claimants.

11. Coordinate Muskegon Community College employee open enrollment prior to the beginning of a new policy year and assist with employee orientation, employee education, and in communicating benefit changes.
12. Act as liaison between benefit providers.
13. Be available to Muskegon Community College for consultation as needed in performing obligations under this agreement.

PROPOSAL FORMAT

In order to insure a uniform review process and obtain the maximum degree of compatibility, it is required that the proposals be organized in the manner specified below.

1. **Title Page:** The proposer should identify the RFP subject, the name of the firm, local and corporate address, telephone number, name and title of contact person and date of submission.
2. **Table of Contents:** Provide clear identification of the material by section and by page number.
3. **Letter of Transmittal:** Should be brief and introductory in nature.
4. **Company History:** Information related to the agent/brokerage firm's qualifications and resources including the following:
 - a. Briefly describe your firm's history, number of employees and years in existence.
 - b. Provide details of your company's financial status and stability.
5. **Qualifications and Experience of Staff:**
 - a. Describe what makes your firm uniquely qualified to work on our account.
 - b. What client size does your practice generally support?
 - c. Describe any specific expertise with colleges/universities.
6. **Understanding and Approach:** A written statement explaining the firm's approach to assisting colleges/universities to maximize benefits for employees while minimizing the financial impact of rising insurance premiums.
 - a. How do you manage vendor relationships?
 - b. What is your service philosophy?
 - c. Describe your process for negotiating renewals.
7. **Location and Accessibility:** The name of the office and location of the account executive directly responsible for handling Muskegon Community College's account.
 - a. How many accounts for which the account executive is responsible.
 - b. How Muskegon Community College's account would compare in size and scope to the other clients of the agent/broker.
 - c. Steps the account executive or firm will take to assure that proper attention will be given to Muskegon Community College.
 - d. List commitment level to this account by percent of time.

8. **References:** List at least three (3) client references. (See page 6)
 - a. Number of employees
 - b. Number/type of plans serviced
 - c. Length of servicing relationship with your firm
 - d. Contact name, title, and phone number
9. **Proposal Fees:** Muskegon Community College is prepared to pay a fixed annual fee rather than commission for services rendered. The stated fee shall include all costs associated with the performance of the services specified, including labor, material, transportation, etc. No other charges shall be allowed.
10. **Required Forms:** Complete and sign all required forms and include a copy of your state of Michigan Insurance license.

GENERAL INFORMATION

1. **Interview:** A proposer may be required to make a presentation of their proposal. This will provide an opportunity to clarify or elaborate on the proposal, but will not, in any way provide an opportunity to change any fee amount originally proposed. If Muskegon Community College chooses to have presentations, they will schedule and notify the Proposer(s) of the time and location of their presentation.
2. **Modifications:** Muskegon Community College reserves the right to request that the proposer modify the proposal to more fully meet the needs of the college.
3. **Request for Additional Information:** The proposer shall furnish such additional information if Muskegon Community College may require.
4. **Acceptance/Rejection/Modification to Proposals:** Muskegon Community College reserves the right to negotiate modifications to proposals that it deems acceptable, reject any and all proposals, and waive minor irregularities in the procedures.
5. **Optional Conference Call:** On March 11, 2011 the proposer will have the opportunity to clarify or ask questions on this RFP. Starting promptly at 2:00 p.m. eastern standard time, you can call (888) 450-5996, and use passcode number: 251071.

EQUAL OPPORTUNITY NOTICE:

It is the policy of Muskegon Community College to provide equal opportunities and not discriminate in enrollment, education, employment, public accommodations, activities or services on the basis of race, color, religion, sex, national origin, marital status, sexual orientation, political persuasion, disability, height, weight, age, or other prohibitive matters.

It is the policy of the College to patronize only those firms and vendors that demonstrate a commitment to equal opportunity within their own enterprises and who abide by Federal and State laws.

TERMS AND CONDITIONS/AGREEMENT

1. **Term of Contract:** The contract, if awarded, will be for an initial term of three (3) years. However, by mutual consent the contract may be extended.
2. **Termination:** The contract may be terminated by mutual consent of both parties or by Muskegon Community College at its discretion. This contract, if awarded, may be cancelled in whole or in part by Muskegon Community College upon giving at least sixty (60) days written notice prior to cancellation; except that nonperformance on the part of the contractor(s) will be grounds for termination. Termination will take place within fifteen (15) days of notification.
3. **Commercial General Liability Insurance:** Agent shall obtain, at Agent's expense, and keep in effect during the term of this contract, Comprehensive General Liability Insurance covering Bodily Injury and Property Damage, with a minimum coverage of \$1,000,000 per occurrence and \$3,000,000 aggregate.
4. **Professional Liability:** Agent shall obtain, at Agent's expense, and keep in effect during the term of this contract, Professional Liability Insurance covering any damages caused by an error, omission or any negligent acts, with a minimum coverage of \$1,000,000 per occurrence and \$3,000,000 aggregate.
5. **Workers' Compensation Insurance:** The Agent, its subcontractors and all employers providing work under this Agreement are subject under the Michigan Workers' Compensation Law and shall comply with it.
6. **Manner of Performance:** The contractor will abide by all State and Federal Regulations on wages and hours of any employee. The contractor shall be responsible for all of its employees, subcontractors and their actions during their term of the contract with Muskegon Community College. The contractor shall keep current all licenses and permits.

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LIST OF REFERENCES

IMPORTANT: This form must be returned with the bid proposal form.

1. Name of Company _____
Address _____
Contact Person/Title _____
Telephone Number _____
Number of employees covered _____
Length of servicing time _____
Number/type of plan serviced _____

2. Name of Company _____
Address _____
Contact Person/Title _____
Telephone Number _____
Number of employees covered _____
Length of servicing time _____
Number/type of plan serviced _____

3. Name of Company _____
Address _____
Contact Person/Title _____
Telephone Number _____
Number of employees covered _____
Length of servicing time _____
Number/type of plan serviced _____

Authorized Signature _____

Printed Name and Title

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PROPOSER'S CERTIFICATION

I have carefully examined the Request for Proposal, Instructions, Terms and Conditions, Scope of Services, Bid forms and all other documents accompanying this proposal.

I propose to furnish the services specified in the Request for Proposal at the prices or rates quoted in my proposal. I agree that my proposal will remain firm for a period of ninety (90) days in order to allow Muskegon Community College adequate time to evaluate the proposals.

I certify that all information contained in this Request for Proposal is truthful to the best of my knowledge and belief. I further certify I am duly authorized to submit this proposal on behalf of the vendor/contractor and that the vendor/contractor is ready, willing and able to perform if awarded this Bid/Proposal.

I further certify that this bid/proposal is made without prior understanding, agreement, connection, discussion or collusion with any other person, firm or corporation submitting a bid/proposal for the same commodity or service; no officer, employee or agent of Muskegon Community College or of any other bidder/proposer interested in bid/proposal; and the undersigned executed this bidders/proposers certification with full knowledge and understanding of the matters contained and was duly authorized to do so.

Name of Business _____

Signature _____

Name & Title _____

Mailing Address _____

Telephone Number _____