COUNTY OF KENDALL, ILLINOIS
ADMIN HR COMMITTEE
County Office Building
County Board Rooms 210
Monday, December 4, 2017 at 5:30p.m.

MEETING AGENDA

1. Call to Order

2. Roll Call: Lynn Cullick (Chair), Judy Gilmour (Vice Chair), Elizabeth Flowers, Matthew Prochaska, John Purcell

3. Approval of Agenda

4. Approval of Minutes from November 15, 2017 Meetings

5. CBIZ Update

6. Wine Sergi Update

7. Department Head and Elected Official Reports

8. Public Comment

9. Committee Business
   a. Approval of Resolution Authorizing Execution and Amendment of Downstate Operating Assistance Grant Agreement
   b. Discussion about Employee Recognition Ceremony in January 2018
   c. Discussion on new Kendall County Sexual Harassment Policy
   d. Approval of the Ordinance Adopting the Amended Kendall County Policy Against Unlawful Discrimination, Harassment, and Sexual Misconduct
   e. Discussion of Request for Qualifications (RFQ) or Bid for Insurance Brokerage and Risk Management Consultant Services
   f. Review of Employee Handbook Revisions

10. Executive Session

11. Items for Committee of the Whole

12. Action Items for County Board

13. Adjournment

If special accommodations or arrangements are needed to attend this County meeting, please contact the Administration Office at 630-553-4171, a minimum of 24-hours prior to the meeting time.
CALL TO ORDER - Committee Chair Lynn Cullick called the meeting to order at 6:11 p.m.

ROLL CALL

<table>
<thead>
<tr>
<th>Attendee Name</th>
<th>Status</th>
<th>Arrived</th>
<th>Left Meeting</th>
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<tbody>
<tr>
<td>Judy Gilmour</td>
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<tr>
<td>Matthew Prochaska</td>
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<tr>
<td>Lynn Cullick</td>
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<tr>
<td>Elizabeth Flowers</td>
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<td>6:17 p.m.</td>
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<tr>
<td>John Purcell</td>
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<td>Returned at 6:56 p.m.</td>
<td>6:33 p.m.</td>
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</table>

With four members present a quorum was established to conduct committee business.

Other County Board Members Present: Bob Davidson, Scott R. Gryder, Audra Hendrix
Staff Present: Scott Koeppel, Mike Neuenkirchen

APPROVAL OF AGENDA

Motion: Member Gilmour
Second: Member Prochaska
RESULT: Approved with a 4-0 Voice Vote

APPROVAL OF MINUTES – November 6, 2017

Motion: Member Prochaska
Second: Member Purcell
RESULT: Approved with a 4-0 Voice Vote

COMMITTEE BUSINESS

> Approve Contract with CTS Software for purchase and installation of TripMaster software in the amount of $50,912.00 to be paid from IDOT and Community Foundation for the Fox River Valley grants – Mike Neuenkirchen explained the software, the proposed uses by Kendall Area Transit, and the funding by IDOT and the Foundation for the Fox River Valley grants.

Member Purcell made a motion to forward the item to the County Board for approval, second by Member Gilmour. With four members present voting aye, the motion carried.
Discussion and Approval of Workers Compensation Bid – Member Cullick updated the committee on the process status, the two bidders, and on the legal review by the State’s Attorney’s Office.

Rich Ryan from Wine Sergi again updated the committee on the differences between IPRF and ICRMT services, safety grant and clarified the 90-day opt out provision by IPRF.

Member Flowers made a motion to forward to the County Board for approval of the lowest responsible bid from ICRMT for Workers Compensation Insurance, second by Member Gilmour. With four members voting aye, the motion carried.

Discussion of Request for Qualifications (RFQ) or Bid for Insurance Brokerage and Risk Management Consultant Services – Discussion on the dynamics and qualifications required for Insurance Brokerage Firm, and RFQ versus RFB. There was consensus by the committee to move forward with an RFQ, gathering samples, beginning talks about RFQ’s in December, and going out for bid in February or March 2018 for Health Insurance Brokerage Services.

Once the Health Care RFQ is completed, the Committee will proceed with an RFQ for the Property, Casualty, Liability and Worker’s Compensation Insurance Brokerage Services.

Review of Employee Handbook Revisions – Item tabled to the December meeting

DEPARTMENT HEAD AND ELECTED OFFICIAL REPORTS

Scott Koeppel reviewed the written reports of the monthly Medical Insurance Report, monthly Benefit Summary Report, monthly Medical Insurances Invoices, Worker’s Compensation total claims, monthly Administration HR Summary Report, and the Illinois Risk Management Trust Claims Analysis

ACTION ITEMS FOR NOVEMBER 21, 2017 COUNTY BOARD AGENDA

Approval of Contract with CTS Software for purchase and installation of TripMaster software in the amount of $50,912.00 to be paid from IDOT and Community Foundation for the Fox River Valley grants

Approval of the bid from ICRMT for Workers Compensation Insurance

ITEMS FOR THE DECEMBER 14, 2017 COMMITTEE OF THE WHOLE – None

PUBLIC COMMENT – None

EXECUTIVE SESSION – Not needed
MEETING ADJOURNMENT

Motion: Member Prochaska
Second: Member Flowers
RESULT: Approved with a Unanimous Voice Vote

This meeting was adjourned at 7:01 p.m.

Respectfully Submitted,

Valarie McClain, Administrative Assistant and Recording Secretary
COUNTY OF KENDALL
Resolution 17 – ________

RESOLUTION AUTHORIZING EXECUTION AND AMENDMENT OF DOWNSTATE OPERATING ASSISTANCE GRANT AGREEMENT

WHEREAS, the provision of public transportation service is essential to the people of Illinois; and

WHEREAS, the Downstate Public Transportation Act (30 ILCS 740/2-1 et seq.) (“Act”) authorizes the State of Illinois, acting by and through the Illinois Department of Transportation, to provide grants and make funds available to assist in the development and operation of public transportation systems; and

WHEREAS, grants for said funds will impose certain obligations upon the recipient, including provision by it of the local share of funds necessary to cover costs not covered by funds provided under the Downstate Public Transportation Act.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNTY BOARD OF KENDALL COUNTY:

Section 1. That the County of Kendall enter into a Downstate Public Transportation Operating Assistance Agreement (“Agreement”) with the State of Illinois and amend such Agreement, if necessary, for fiscal year 2018 in order to obtain grant assistance under the provisions of the Act.

Section 2. That the County Board Chairman of the County of Kendall is hereby authorized and directed to execute the Agreement or its amendment(s) on behalf of County of Kendall for such assistance for fiscal year 2018.

Section 3. That the County Administrator of the County of Kendall is hereby authorized to provide such information and file such documents as may be required to perform the Agreement and to request and receive the grant funding for fiscal year 2018.

Section 4. That while participating in said operating assistance program the County of Kendall shall provide all required local matching funds.

PRESENTED and ADOPTED by the County Board, this XX day of December 2017.

Approved: ________________________________ Attest: ________________________________

Scott R. Gryder, County Board Chairman

Debbie Gillette, County Clerk and Recorder
Kendall County’s Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct
(Revised December ____, 2017)

Please be advised that this Policy is not intended to and does not create a contract of employment, express or implied, and this Policy does not alter the employment at-will relationship with Kendall County. This policy applies to all employees of Kendall County, and it supersedes any and all other policies regarding or relating to unlawful discrimination, harassment and sexual misconduct previously adopted by the Employer.

A. STATEMENT OF POLICY

The Employer does not tolerate or condone unlawful discrimination or harassment on the basis of race, color, religion, creed, sex, gender-identity, sexual orientation, pregnancy, childbirth, medical or common conditions relating to pregnancy and childbirth, genetic information, national origin, age, physical or mental disability, ancestry, marital status, military status, arrest record, unfavorable discharge from military service, order of protection status or any other classification prohibited under federal or state law. The Employer also prohibits sexual misconduct. The Employer neither tolerates nor condones unlawful discrimination, harassment or sexual misconduct by employees, elected officials, or non-employees with whom the Employer has a business, service, or professional relationship. “Employee” for purposes of this policy includes any individual performing services for the Employer, an apprentice, an applicant for apprenticeship, or an unpaid intern. The Employer prohibits retaliation against (a) an employee who complains about or reports any act of unlawful discrimination, unlawful harassment or sexual misconduct in violation of this policy or (b) any employee who participates in an investigation pursuant to this policy. The Employer is committed to ensuring and providing a work place free of unlawful discrimination, harassment, sexual misconduct and retaliation. Any employee who violates this policy is subject to disciplinary action up to and including termination of employment.

Unlawful sexual harassment includes unwelcome sexual advances, requests for sexual favors, or any other visual, verbal or physical conduct of a sexual nature when:

1. Submission to or rejection of this conduct explicitly or implicitly affects a term or condition of individual’s employment;

2. Submission to or rejection of the conduct is used as the basis for an employment decision affecting the harassed employee or;

3. The unlawful harassment has the purpose or effect of unreasonably interfering with the employee’s work performance or creating an intimidating, hostile or offensive work environment because of the persistent, severe or pervasive nature of the conduct.
Unlawful sexual harassment can occur in a variety of circumstances, including but not limited to the following:

- The employee as well as the harasser may be a woman or a man. The employee does not have to be of the opposite sex.
- The harasser can be the employee’s supervisor, an agent of the employer, a supervisor in another area, a co-worker, or a non-employee.
- The employee does not have to be the person harassed but could be anyone affected by the offensive conduct.
- Unlawful sexual harassment may occur without economic injury to or discharge of the employee.
- The harasser’s conduct must be unwelcome.

Each employee must exercise his or her own good judgment to avoid engaging in conduct that others may perceive as unlawful sexual harassment or unlawful harassment based on any status protected by law.

The Employer strictly prohibits sexual misconduct. Sexual misconduct can include any inappropriate and/or illegal conduct of a sexual nature including, but not limited to, sexual abuse, sexual exploitation, sexual intimidation, rape, sexual assault, or ANY sexual contact or sexual communications with a minor (including, but not limited to, conduct or communications which are written, electronic, verbal, visual, virtual or physical).

B. RESPONSIBILITIES

I. Supervisors

Each supervisor shall be responsible for ensuring compliance with this policy, including the following:

1. Monitoring the workplace environment for signs of unlawful discrimination, unlawful harassment or sexual misconduct;

2. Immediately notifying law enforcement where there is reasonable belief that the observed or complained of conduct violates the criminal laws of the State of Illinois.

3. Immediately notifying the Department of Children and Family Services (DCFS) Hotline (1-800-25-ABUSE or 1-800-252-2873) if the observed or complained of conduct involves the abuse of a minor.

4. Immediately stopping any observed acts of unlawful discrimination, unlawful harassment or sexual misconduct and taking appropriate steps to intervene, whether or not the involved employees are within the supervisor’s line of supervision;
5. Immediately reporting any complaint of unlawful harassment, unlawful discrimination or sexual misconduct to the applicable department head or elected official; and

6. Taking immediate action to limit the work contact between the individuals when there has been a complaint of unlawful discrimination, unlawful harassment or sexual misconduct, pending investigation.

II. Employees

Each employee is responsible for assisting in the prevention of unlawful discrimination, unlawful harassment and sexual misconduct through the following acts:

1. Refrain from participation in, or encouragement of, unlawful discrimination, unlawful harassment or sexual misconduct;
2. Immediately reporting any violations of this policy to a supervisor and law enforcement (if appropriate under the circumstances) and/or DCFS (if appropriate under the circumstances). Employees are required to report violations of this policy as soon as they occur. An employee should not wait until the conduct becomes unbearable before reporting the prohibited conduct. All employees are obligated to report instances of prohibited conduct even if the conduct is merely observed and directed toward another individual and even if the other person does not appear to be bothered or offended by the conduct. All employees are obligated to report instances of prohibited conduct regardless of the identity of the alleged offender (e.g. man, woman, supervisor, elected official, co-worker, volunteer, vendor, member of public).
3. Encouraging any employee who confides that he/she is the victim of conduct in violation of this policy to report these acts to a supervisor.

Failure to take action to stop known unlawful discrimination, unlawful harassment or sexual misconduct may be grounds for discipline.

If you are advised by another person that your behavior is offensive, you must immediately stop the behavior, regardless of whether you agree with the person's perceptions of your intentions.

The Employer does not consider conduct in violation of this policy to be within the course and scope of employment and does not sanction such conduct on the part of any employee, including supervisory and management employees.

C. COMPLAINT PROCEDURES

The Employer takes allegations of unlawful discrimination, unlawful harassment and sexual misconduct very seriously. It will actively investigate all complaints.
The employee should directly inform the offending individual that the conduct is unwelcome and must stop. The employee should use the Employer’s complaint procedure to advise the Employer of any violation of this policy as soon as it occurs.

i. Bringing a Complaint

Any employee who believes that there has been a violation of this policy may bring the matter to the attention of the Employer by making a confidential report to any one or more of the following individuals:

1. The employee’s immediate supervisor;
2. The offending employee’s immediate supervisor;
3. The department head or elected official for the applicable County department or elected office; or
4. The County Administrator.

The employee may submit their complaint directly to the Chairperson of the Kendall County Board or the Chairperson of the Kendall County Human Resources/Administration Committee at 111 W. Fox Street, Yorkville, Illinois 60560 if the alleged offender is the employee’s department head or elected official, the County Administrator, or a Kendall County Board Member.

The employee should present the complaint as promptly as possible after the alleged violation of this policy occurs.

Knowingly making a false report and/or knowingly providing false information as part of an investigation pursuant to this policy may result in disciplinary action up to and including termination of employment.

II. Resolution of a Complaint

Upon receipt of a complaint, the Employer will undertake such investigation, corrective and preventive actions as are appropriate. In general, the procedure in resolving any complaints can (but will not necessarily) include any of the following items:

1. A meeting between the employee making the complaint and an individual designated by the Employer to investigate such complaints. The complaining employee should provide the following important data:
   a. A description of the specific offensive conduct;
   b. Identification of all person(s) who engaged in the conduct;
c. The location where the conduct occurred;
d. The time when the conduct occurred;
e. Whether there were any witnesses to the conduct;
f. Whether conduct of a similar nature has occurred on prior occasions;
g. Whether there are any documents that would support the complaining employee's allegations; and
h. What impact the conduct had on the complaining employee.

2. Although not required, the Employer encourages anyone who makes a complaint under this policy to provide a written statement setting forth the above details and attaching any pertinent records to assist the Employer with its investigation.

3. After the employee submits the complaint, the alleged offending individual should be contacted by the Employer's designated investigator. The alleged offending individual should be advised of the charges brought against him or her, and may be provided with a copy of the written statement of complaint made by the complaining employee (if applicable). The alleged offending individual should have an opportunity to fully explain his or her side of the circumstances, and may also submit a written statement, if desired.

4. After the alleged offending individual is interviewed, any witnesses identified by either the complaining employee or the alleged offending individual may be interviewed separately.

5. Once the investigation is completed, the Employer will take such action as is appropriate based upon the information obtained in the investigation. In the event that the Employer finds merit in the charges made by the complaining employee, disciplinary action may be taken up to and including termination of employment.

6. Upon completion of the investigation, the Employer will advise the complaining employee of the results of the investigation.

D. NON-RETAIATION

Under no circumstances will there be any retaliation against any employee (a) for making a complaint of unlawful discrimination, unlawful harassment or sexual misconduct pursuant to this policy; (b) for engaging in protected activity under the Illinois Human
Rights Act (775 ILCS 5/1 et seq.); and/or (c) for engaging in protected activity under the State Officials and Employees Ethics Act (5 ILCS 430/1 et seq.).

Also, pursuant to the Illinois Whistleblower Act (740 ILCS 174/1 et seq.), the Employer is prohibited from retaliating against any employee who (a) discloses information in a court, an administrative hearing, or before a legislative commission or committee, or in any other proceeding, where the employee has reasonable cause to believe that the information discloses a violation of a State or federal law, rule, or regulation; (b) refuses to participated in an activity that would result in a violation of a State or federal law, rule or regulation, including, but not limited to violations of the Freedom of Information Act; and (c) is disclosing or attempting to disclose public corruption or wrongdoing.

Any act of retaliation by any party directed against a complaining employee, an accused employee, witnesses, or participants in the process will be treated as a separate and distinct charge and will be similarly investigated. Complaints of retaliation should be brought to the attention of the Employer pursuant to the complaint procedures set forth in Section C above.

The employee should present the complaint of alleged retaliation as promptly as possible after the alleged retaliation occurs.

E. MISCELLANEOUS

If you have any questions concerning the Employer's policies on this matter, please see your immediate supervisor, your department head/elected official, the County Administrator, and/or the Kendall County Board Chairperson.

An employee who believes that he or she has been the subject of unlawful harassment, unlawful discrimination, and/or unlawful retaliation in violation of the Illinois Human Rights Act also has a right to file a charge of discrimination with the Illinois Department of Human Rights pursuant to the Illinois Human Rights Act and applicable regulations. For further information, an employee may call or write to the Illinois Department of Human Rights, 100 West Randolph Street, Chicago, Illinois 60601; telephone (312) 814-6200. Also, further information may be obtained from the U.S. Equal Employment Opportunity Commission (EEOC), telephone: (800) 669-4000 or for matters involving the abuse of minors the Illinois Department of Children and Family Services (DCFS), telephone: (800) 25-ABUSE.
Receipt of Kendall County's Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct (Revised December ___, 2017)

Your signature below affirms that you have received a copy of Kendall County's Policy against Unlawful Discrimination, Harassment and Sexual Misconduct (Revised December ___, 2017), which is effective immediately. By signing this acknowledgment form, you affirm that you will read and abide by the Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct (Revised December ___, 2017).

BY SIGNING BELOW, YOU ALSO UNDERSTAND THAT YOUR EMPLOYMENT WITH REMAINS EMPLOYMENT “AT-WILL”, WHICH MEANS THAT YOUR EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE. YOU FURTHER UNDERSTAND THAT NOTHING IN THE POLICY AGAINST UNLAWFUL DISCRIMINATION, HARASSMENT AND SEXUAL MISCONDUCT THAT YOU RECEIVED TODAY IS INTENDED TO AND/OR DOES CREATE A CONTRACT OF EMPLOYMENT, EXPRESS OR IMPLIED.

_____________________________  __________________________
Signature of Employee                       Date

This form is to be signed and returned to your immediate supervisor.
COUNTY OF KENDALL, ILLINOIS
ORDINANCE # 2017-_____

APPROVAL OF THE AMENDED KENDALL COUNTY POLICY
AGAINST UNLAWFUL DISCRIMINATION, HARASSMENT AND
SEXUAL MISCONDUCT

WHEREAS, Illinois Public Act 100-0554 requires units of local government such as Kendall County, Illinois to adopt an ordinance or resolution establishing a policy to prohibit sexual harassment within sixty (60) days after the effective date of Illinois Public Act 100-0554; and

WHEREAS, Kendall County, Illinois previously adopted a sexual harassment policy, which is set forth in Section 7.5 of the Kendall County Employee Handbook; and

WHEREAS, the Kendall County Board hereby seeks to update Kendall County's existing sexual harassment policy and replace it in its entirety with the Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct attached hereto as Exhibit 1 effective immediately upon approval of this Ordinance; and

NOW, THEREFORE, BE IT ORDAINED, the Kendall County Board hereby:

1. Amends the Kendall County sexual harassment policy set forth in Section 7.5 of the Kendall County Employee Handbook and replaces said policy, in its entirety, with the Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct attached hereto as Exhibit 1 effective immediately.

2. The Kendall County Administrator is hereby directed to provide a copy of the new Policy Against Unlawful Discrimination, Harassment and Sexual Misconduct to all department heads with the direction that said Policy shall be distributed to each and every Kendall County employee and unpaid intern immediately.

IN WITNESS OF, this Ordinance has been approved by a majority vote of the Kendall County Board members present for said vote on this ____ day of December, 2017.

Attest:

Kendall County Clerk
Debbie Gillette

Kendall County Board Chairman
Scott R. Gryder
Request for Qualifications (RFQ)
Insurance Brokerage and Risk Management Consultant Services

August 28th, 2017

Due Date: September 18th, 2017

SERVICE: INSURANCE BROKER SERVICES FOR THE PURPOSE OF SOLICITING INSURANCE QUOTES FOR VARIOUS COVERAGES

1. Description of Proposal

Kendall County is requesting proposals for the services of a licensed brokerage firm to serve as Broker of Record for the placement of the following lines of insurance coverage:

- General Liability including Law Enforcement Liability;
- Auto Liability;
- Public Officials Liability;
- Umbrella Liability;
- Property including Boiler & Machinery;
- Inland Marine;
- Crime;
- Workers Compensation

The goal is to select the most qualified firm that will be able to market Kendall County’s Property & Casualty and Workers Compensation insurance programs and to provide guidance and advice to assist Kendall County in minimizing risk.

Kendall County requires the Broker of Record to have an outstanding record in evaluating, developing, and working with the professional insurance plans of Municipalities and other Public Entity related risks.

2. Overview

Kendall County government provides its residents with vital services. It is a predominately rural county in the northeastern section of the State of Illinois that contains numerous local governmental units within its boundaries. With a population of approximately 120,000 people, it has held the title for being the fastest growing county (2010 US Census).

Kendall County is currently a member of the Illinois County Risk Management Trust (ICRMT) for both our Property and Liability program and our Workers Compensation Program. ICMRT has an expiration date of December 1, 2017.
3. Proposal Evaluation Procedure and Criteria

A. Evaluation of Proposals

Kendall County will evaluate all proposals. Based on this evaluation Kendall County will determine the award the Broker of Record. Kendall County will award the Broker of Record to the respondent whose proposal is determined to be the most advantageous to Kendall County, taking into consideration the evaluation factors grouped in the relative order of importance set forth below:

- Broker qualifications and adequacy of resources
- Broker service team personnel qualifications
- Access to markets
- Responsiveness – form and content of RFP response and compliance;
- Overall quality and completeness of response

B. Award of Broker of Record

Kendall County will award one Broker of Record to the respondent who has, in the opinion of Kendall County, best demonstrated competence and qualification to provide the requested services and whose Proposal is deemed to be in the best interest of Kendall County.

C. Tentative Timeline

<table>
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<tr>
<th>Event</th>
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<tr>
<td>RFQ Posted</td>
<td>August 28th</td>
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<td>Deadline for submitting proposals</td>
<td>September 18th</td>
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<td>Interviews (if required)</td>
<td>September 25th-28th</td>
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<td>Selection notification</td>
<td>October 2nd</td>
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<td>Property &amp; Casualty Renewal</td>
<td>December 1</td>
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<td>Workers Compensation Renewal</td>
<td>December 1</td>
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The Broker selected by Kendall County is expected to present a recommended Property & Casualty proposal and Workers Compensation proposal by October 25, 2017.
## Public Sector Insurance Broker Qualification Questionnaire

### Qualifications and Experience

<table>
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<tr>
<th>Question</th>
<th>Answer</th>
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<tr>
<td>Provide a brief history and description of your firm, including its size (number of employees and/or revenues) and its areas of specialization</td>
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<td>Does your firm have a dedicated public sector practice and how many years has it been in place?</td>
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<td>Number of dedicated Illinois public entity employees?</td>
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<td>Total Number of Public Entities Insured?</td>
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<td>Number of Public Entities Insured in Illinois?</td>
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<td>How many of these clients in Illinois are Counties?</td>
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<td>Total agency premium volume?</td>
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<td>Total premium volume for Illinois municipal clients?</td>
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<td>Provide a representative list of some of your Illinois municipal and Illinois County clients.</td>
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<td>Does your agency have clients with the Illinois Counties Risk Management Trust (ICRMT)? If so, how many?</td>
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### Claims and Loss Control

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<th>Question</th>
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<tr>
<td>Does your agency have access to ICRMT’s online claims risk management information system?</td>
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<td>Does your agency have experience working with ICRMT claim adjusters?</td>
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<td>Does your agency have experience working with ICRMT’s loss control team?</td>
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Agency Specifications

Describe your firm's experience providing public sector loss control services for municipal clients.

Describe your firm's experience providing public sector claims advocacy and services.

Describe your firm's experience providing loss forecasting including loss picks and retention analysis.

Describe within a two-page limitation any expertise your firm has in the Illinois Municipal and Public Entity marketplace.

Please provide a copy of your firm's latest annual report. If you are a privately held company and do not issue an annual report, you must be prepared to provide other financial information satisfactory to Kendall County administration.

Provide evidence of Agent's Errors and Omissions insurance coverage in an amount not less than $10 million.

Account Team: Organizational Chart
Please provide an organizational chart which outlines your proposed account team.

Account Team: Experience and Resumes
Please provide the following information for all account executives and account managers who would handle our insurance program. Please also provide resumes for each account team member.

<table>
<thead>
<tr>
<th>Account Executive / Account Manager</th>
<th>Years working with Illinois villages, cities, or towns</th>
<th>Years in insurance industry</th>
<th>Length of time with current firm</th>
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### References

Please list five Public Entity references:

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<th>Account Name</th>
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<th>Client since</th>
<th>Carrier(s) providing coverage</th>
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Insurance Carriers

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County of McHenry
Request for Proposal

RFP # 15-28
Insurance Brokerage/Consulting Services for Group Health and Dental Benefit Plans

March 19, 2015

This Request for Proposal (RFP) is for the purpose of, contracting with a qualified firm for one or two years to provide benefit consulting services to the County of McHenry as outlined within this document. All requirements are as per specifications enclosed herein.

GENERAL REQUIREMENT: This is a Request for Proposal (see attached). Proposal will be opened and evaluated in private and proposal information will be kept confidential until an award is made. One (1) original and one (1) copy of the complete proposal are to be submitted.

SUBMISSION LOCATION:
Mailing Address:
Purchasing Department
McHenry County Administration Building
2200 N. Seminary Avenue Room 200
Woodstock IL 60098

Drop Off In Person:
Purchasing Department
McHenry County Administration Building
667 Ware Road Room 200
Woodstock IL 60098
Phone: (815) 334-4818
Fax: (815) 334-4680

CONTACT PERSON:
Mr. Donald A. Gray
Director of Purchasing

SUBMISSION DATE AND TIME: 2:30 PM, (CST) April 9, 2015
Proposals received after the submittal time will be rejected and returned unopened to the sender. (See below for schedule of events).

SCHEDULE OF EVENTS

March 19, 2015 RFP Available
March 25, 2015 Vendors Questions Submitted via fax to 815-334-4680 by 4:00 P.M.(CST)
April 1, 2015 Vendors Questions Answered via fax and Posted on Website by 4:00 P.M.(CST)
April 9, 2015 RFP due in Purchasing at 2:30 P.M.(CST)
April 9, 2015 to May 1, 2015 Evaluation, Committee recommendation, Award of Contract and Notification to Successful Vendor
GENERAL INFORMATION

REQUEST FOR PROPOSALS

DEFINITION
Request for Proposals (RFP) is a method of procurement permitting discussions with responsible vendor and revisions to proposals prior to award of a contract. Proposals will be opened and evaluated in private. Award will be based on the criteria set forth herein.

RECEIPT and HANDLING of PROPOSALS
Proposals shall be opened in private by the Evaluation Committee to avoid disclosure of contents to competing vendors.

EVALUATION of PROPOSAL
The proposals submitted by vendors shall be evaluated solely in accordance with the criteria set forth in the RFP.

DISCUSSION of PROPOSAL
The Evaluation Committee may conduct discussions with any offeror who submits an acceptable or potentially acceptable proposal. Vendors shall be accorded fair and equal treatment with respect to any opportunity for discussion and revision of proposals. During the course of such discussions, the Evaluation Committee shall not disclose any information derived from one proposal to any other vendor.

NEGOTIATIONS
The County of McHenry reserves the right to negotiate specifications, terms, and conditions, which may be necessary or appropriate to the accomplishment of the purpose of this RFP. The County may require the RFP and the offeror's proposal be incorporated in full or in part as Contract Documents. This implies that this RFP and all responses, supplemental information, and other submissions provided by the vendor during discussions or negotiations may be held by the County of McHenry as contractually binding on the successful Vendor.

NOTICE of UNACCEPTABLE PROPOSAL
When the Evaluation Committee determines a vendor's proposal to be unacceptable, such vendor shall not be afforded an additional opportunity to supplement its proposal.

TERMS AND CONDITIONS

AUTHORITY
This Request for Proposals is issued pursuant to applicable provisions of the McHenry County Purchasing Ordinance, approved December 1, 2006. This ordinance is incorporated by reference into this RFP as if it were contained herein. If you desire a copy of this ordinance, contact the Director of Purchasing.

RESERVED RIGHTS
The County of McHenry reserves the right at any time and for any reason to cancel this Request for Proposal, to reject any or all proposals, or to accept an alternate proposal. The County reserves the right to waive any immaterial defect in any proposal. Unless otherwise specified by the offeror, the County has no less than one hundred and twenty (120) days to accept. The County may seek clarification from a vendor at any time and failure to respond promptly is cause for rejection. The County may require submission of best and final offers.
INCURRED COSTS
The County of McHenry will not be liable in any way for any costs incurred by respondents in replying to this RFP.

AWARD
Award shall be made by the McHenry County Board to the most responsive and responsible vendor whose proposal is determined to be the most advantageous to the County, taking into consideration price and the evaluation criteria set forth herein below.

CRITERIA for SELECTION
The following criteria and point system shall be used by the selection team to determine the firm or individual(s) most qualified and best suited to perform the work:

1. Qualifications and experience for the specific scope of services as set forth herein (50pts).
2. Cost Proposal based on the contract description (5 pts)
3. Compliance with requirements of this RFP (40 pts).
4. References provided (5 points)

Total 100 points

NON-DISCRIMINATION
Vendor shall comply with the Illinois Human Rights Act, 775 ILCS 5/1-101 et seq., as amended and any rules and regulations promulgated in accordance therewith. Including, but not limited to the Equal Employment Opportunity Clause, Illinois Administrative Code, Title 44, Part 750 (Appendix A), 775 ILCS 5/1-102, which is incorporated herein by reference, and constituting of a written EEO Policy and a workforce profile that demonstrates its EEO practices. Furthermore, the Vendor shall comply the Public Works Employment Discrimination Act, 775 ILCS 10/0.01 et seq., as amended. The Vendor must have a written sexual harassment policy, which meets Illinois State Statutes, 775 ILCS, 15/3.

SECURITY
The Vendor represents and warrants to the County of McHenry that neither it nor any of its principals, shareholders, members, partners or affiliates, as applicable, is a person or entity named as a Specially Designated National and Blocked Person (as defined in Presidential Executive Order 13224) and that it is not acting, directly or indirectly, for or on behalf of a Specially Designated National and Blocked Person. The Vendor further represents and warrants to the County of McHenry that the Vendor and its principals, shareholders, members, partners, or affiliates, as applicable, are not directly or indirectly, engaged in, and are not facilitating, the transactions contemplated by this Agreement on behalf of any person or entity named as Specially Designated National and Blocked Person. The Vendor hereby agrees to defend, indemnify and hold harmless the County of McHenry, the Corporate Authorities, and all County of McHenry elected or appointed officials, officers, employees, agents, representatives, engineers and attorneys, from and against any and all claims, damages, losses, risks, liabilities, and expenses (including reasonable attorneys’ fees and costs) arising from or related to any breach of the foregoing representation and warranties.
PURCHASE EXTENSION
This contract shall be offered for purchases to be made by other counties and governmental units within the State of Illinois as authorized by the Government Joint Purchasing Act. All purchases and payments made under this authority shall be made directly by the governmental unit to the Vendor. The County of McHenry shall not be responsible in any way for such purchase orders or payments. All terms and conditions of this contract shall apply to all orders placed by another governmental unit.

PROTEST PROCEDURES
Any Bidder who believes contractual terms or specifications are unnecessarily restrictive or limit competition may submit a protest, in writing, to the Director of Purchasing. To be considered, the protest must be received by McHenry County five (5) days prior to the stated bid opening. Any adversely affected or aggrieved Bidder shall have ten (10) days from the date of the bid opening to file a written protest regarding the intent to award the bid. Protests submitted after that date will not be accepted. Protests must specify the grounds upon which the protest is based (refer to appropriate statute, rule, code, or ordinance which defines the protest process).

ADDENDUM
Should the Vendor require any additional information about this Bid, please fax to Purchasing (815-334-4680) any questions by the deadline as outlined in the schedule of events. ANY AND ALL changes to these specifications are valid only if they are included by Written Addendum to All Bidders. NO interpretation of the meaning of the plans, specifications, or other contract documents will be made orally. If required, all addenda will be faxed to bidder if a Notice of Intent to Bid has been completed and faxed to the Purchasing Office. In addition, all addenda are posted on the County of McHenry’s website. Failure of the bidder to receive any such addendum or Interpretation shall not relieve the bidder from obligation under this Bid as submitted. All addenda so issued shall become part of the bid documents. Failure to request an interpretation constitutes a waiver to later claim that ambiguities or misunderstandings caused by a bidder to improperly submit a bid.

Response to these questions will be made by means of an addendum. Only the Director of Purchasing has the authority to issue an addendum.

Addenda are written instruments issued by the County prior to the date for receipt of proposals, which modify or interpret the Bid by addition, deletions, clarifications or corrections.

Prior to the receipt of bids, addenda will be faxed or delivered to all who are known to have received a Notice to Bid. Each vendor shall ascertain prior to submitting a bid that all addenda issued have been received and, by submission of a bid, such act shall be taken to mean that such vendor has received all addenda and that the vendor is familiar with the terms thereof and understands fully the contents of the addenda.

TAXES
The County of McHenry is exempt from paying Illinois Use Tax, Illinois Retailers Occupation Tax, and Federal Excise Tax.

PAYMENTS
The Vendor shall furnish the County with an itemized invoice. Payment shall be made in accordance with applicable provisions of the "Local Government Prompt Payment Act."
VENDOR RESPONSIBILITIES
The selected Vendor will be required to assume responsibility for all services offered in this proposal. The County will consider the selected Vendor to be the sole point of contact with regard to contractual matters, including payment of any and all charges resulting from the contract.

Any contract resulting from this RFP may not be assigned, in whole or in part without written consent of the County. If the Vendor attempts to make such an assignment without the written consent of the County, the Vendor shall nevertheless remain legally responsible for all obligations under the Contract.

INTERPRETATION or CORRECTION of REQUEST for PROPOSALS
Vendors shall promptly notify the Director of Purchasing of any ambiguity, inconsistency, or error, which they may discover upon examination of the Requests for Proposals.

Interpretations, corrections, and changes to the Request for Proposals will be made by addendum. Interpretations, corrections, or changes made in any other manner will not be binding.

CHOICE OF LAW AND VENUE
The bidder agrees that this bid has been executed and delivered in Illinois and that their relationship and any and all disputes, controversies or claims arising under this bid or any resulting contract shall be governed by the laws of the State of Illinois, without regard to conflicts of laws principles. The bidder further agrees that the exclusive venue for all such disputes shall be the Circuit Court of the 22nd Judicial Circuit of McHenry County, Illinois, and the bidder hereby consent to the personal jurisdiction thereof.

RECOUSE for UNSATISFACTORY MATERIALS
Payment shall be contingent upon the County’s inspection of and satisfaction with completed work. Any defective work or materials, non-conformance to bid specifications, damaged materials, or unsatisfactory installation shall be corrected to the County’s satisfaction by the successful bidder at no additional charge.

TERMINATION
Failure to comply with the terms and conditions as herein stated shall be cause for cancellation of the contract. The County will give written notice of unsatisfactory performance and the Vendor will be allowed thirty (30) days to take corrective action and accomplish satisfactory control. If at the end of the thirty days, the County deems the Vendor’s performance still unsatisfactory, the contract shall be canceled. The exercise of its right of cancellations shall not limit the County’s right to seek any other remedies allowed by law.

The successful bidder will agree that the resulting contract is made subject to available budgetary appropriations and shall not create any obligation on behalf of the County in excess of such appropriations. In the event that no funds or insufficient funds are appropriated and budgeted, this Contract shall terminate without penalty or expense to the County thirty (30) days after written notification of termination from the County.
The successful bidder will agree that pursuant to requirements imposed under Illinois law, the County shall have 120 days after each election of county board members to terminate this Agreement, without cause and without penalty.

REJECTION of BIDS, WAIVER of IRREGULARITIES
McHenry County reserves the right to reject any or all bids, to waive irregularities, and to accept that bid which is considered to be in the best interest of the County. Any such decision shall be considered final.

DELIVERY
Delivery will be considered in making the award and the bidders shall state, in the spaces provided expected delivery after receipt of order. Failure to meet said delivery promises without prior consent of the Director of Purchasing will be considered a breach of faith.

WORKMANSHIP
Items shall be manufactured according to the highest traditions of the industry and shall meet all commercial standards of quality. The County shall be the sole judge of acceptable products. Unacceptable products will be rejected and suitable price adjustments made.

QUALIFICATIONS
Each firm submitting an RFP for this project shall submit detailed information concerning the professional qualifications of the individual(s) assigned to carry out this project. Relevant project experience, logistical capabilities and other relevant support data regarding the firm and assigned personnel must be included.

Each firm submitting a proposal for this project must provide at least three (3) references where projects of a similar nature have been successfully completed and implemented. These references should provide the name and address of the entity where the project was completed as well as a contact person.

INSURANCE

General The successful bidder shall maintain for the duration of the contract and any extensions thereof, at bidder’s expense, insurance that includes “Occurrence” basis wording and is issued by a company or companies qualified to do business in the State of Illinois that are acceptable to the County, which generally requires that the company(ies) be assigned a Best’s Rating of A or higher with a Best’s financial size category of Class XIV or higher, in the following types and amounts:

a) Commercial General Liability in a broad form, to include, but not limited to, coverage for the following where exposure exists: Bodily Injury and Property Damage, Premises/Operations, Independent Vendors, Products/Completed Operations, Personal Injury and Contractual Liability; limits of liability not less than:

$500,000 per occurrence and $1,000,000 in the aggregate;

b) Business Auto Liability to include, but not be limited to, coverage for the following where exposure exists: Owned Vehicles, Hired and Non-Owner Vehicles and Employee Non-Ownership; limits of liability not less than:

Page 6 of 16
$300,000 per occurrence combined single limit for:
Bodily Injury Liability and Property Damage Liability;

c) Workers' Compensation Insurance to cover all employees and meet statutory limits in compliance with applicable state and federal laws. The coverage must also include Employer's Liability with minimum limits of $100,000 for each incident.

d) Professional Liability Insurance with $1,000,000 per occurrence and $1,000,000 in aggregate.

EVIDENCE of INSURANCE
The successful bidder agrees that with respect to the above-required insurance that:

(a) The County of McHenry shall be provided with Certificates of Insurance evidencing the above required insurance, prior to commencement of the contract and thereafter with certificates evidencing renewals or replacements of said policies of insurance at least fifteen (15) days prior to the expiration or cancellation of any such policies;

(b) The contractual liability arising out of the contract shall be acknowledged on the Certificate of Insurance by the insurance company;

(c) The County of McHenry shall be provided with thirty (30) days prior notice, in writing, of Notice of Cancellation or material change and said notification requirement shall be stated on the Certificate of Insurance;

(d) Subcontractors, if any, comply with the same insurance requirements. In addition to being named as an additional insured on the Certificate of Insurance, each liability policy shall contain an endorsement naming the County of McHenry as an additional insured. A copy of the endorsement shall be provided to McHenry County along with the Certificate of Insurance; and

(e) have McHenry County named as an additional insured and the address for certificate holder must read exactly as:

County of McHenry, a body politic
2200 N. Seminary Avenue
Woodstock, IL 60098

(f) Insurance Notices and Certificates of Insurance shall be provided to:

McHenry County, Purchasing Department
2200 N. Seminary Avenue, Room 200
Woodstock, Illinois 60098
The County shall be provided with Certificates of Insurance evidencing the above required insurance prior to the commencement of this Agreement and thereafter with the certificated evidencing renewals or changes to said policies of insurance at least fifteen (15) days prior to the expiration or cancellation of any such policies.

The County shall be named as additional insured on all liability policies, and the parties acknowledge that any insurance maintained by the County shall apply in excess of, and not contribute to, insurance provided by successful bidder. The contractual liability arising out of the Agreement shall be acknowledged on the Certificate of Insurance by the insurance company. The County shall be provided with thirty (30) days prior notice, in writing, of Notice of Cancellation or material change, and said notification requirements shall be stated on the Certificate of Insurance.

Acceptance or approval of insurance shall in no way modify or change the indemnity or hold harmless clauses in this agreement, which shall continue in full force and effect.

HOLD HARMLESS CLAUSE
The Vendor agrees to indemnify, save harmless and defend the County of McHenry, their agents, servants, and employees, and each of them against and hold them harmless from any and all lawsuits, claims, demands, liabilities, losses and expenses, including court costs and attorney's fees, for or on account of any injury to any person, or any death at any time resulting from such injury, or any damage to property, which may arise or which may be alleged to have arisen out of or in connection with the work covered by this contract. The foregoing indemnity shall apply except if such injury, death or damage is caused directly by the willful and wanton conduct of the County of McHenry, their agents, servants, or employees or any other person indemnified hereunder.

EVALUATION
Evaluation of proposals will be done by the Director of Purchasing and associated County staff. Proposals will be evaluated on experience in doing projects of a similar nature and adherence to specifications.

DIRECTIONS FOR SUBMISSION
Qualified individuals or firms are to submit one (1) original and one (1) copy of the completed proposal along with any support documentation to:

Mr. Donald A. Gray
Director of Purchasing
McHenry County Administration Building
2200 N. Seminary Avenue, Room 200
Woodstock, Illinois 60098

All data and documentation submitted as part of this RFP shall become the property of McHenry County, Illinois. After award of this contract, all responses, documents, and materials contained in the RFP shall be considered public information and will be made available for inspection in accordance with the Illinois Freedom of Information Act.

All proposals must be received by 2:30 p.m. (CST) on April 9, 2015. Absolutely no proposal will be accepted after the time specified. Late proposals shall be rejected and
returned unopened to the sender. The County of McHenry does not prescribe the method by which proposals are to be transmitted; therefore, it cannot be held responsible for any delay, regardless of reason, in the transmission of proposals.

**BID ENVELOPES ARE TO BE CLEARLY MARKED WITH THE RFP TITLE, TIME & DATE OF OPENING.**

**SUBMITTAL**
Submit one (1) bid, multiple bids will not be accepted.

**PRICING**
Price offered shall be firm for at least 120 days after the latest time specified for submission of proposals and thereafter until written notice is received from bidder.

**FREIGHT**
Freight is all inclusive unless otherwise stated.

**FUEL SURCHARGE**
The County of McHenry does NOT accept any fuel surcharges.
SPECIFICATIONS
It is the intent of the County of McHenry to enter into a one or two year contract with a qualified professional consulting firm with at least 10 years of public sector experience to provide professional broker services with respect to the self-funded health insurance program in order to achieve the lowest individual/aggregate stop loss premiums, discounts from the health insurance provider, provide assistance with claims administration and make recommendations with regard to insurance plan coverage.

Background: The County of McHenry is a unit of local government in the State of Illinois with approximately 1,350 employees. We offer coverage under three PPO plans (a $250 deductible PPO, a $600 deductible PPO, and a High Deductible PPO) and HMO self-funded insurance plans with BlueCross BlueShield of Illinois as the TPA and provider. The current medical and dental insurance plans cover approximately 1,100 employees, retirees, and COBRA members and 1,400 dependents. The enrollment breakdown is approximately 55% PPO and 45% HMO. The policy plan year is January 1st through December 31st with open enrollment occurring in November/December. Mail order pharmacy benefit management is provided by Prime Therapeutics for the PPOs and HMO and Walgreens for HMO.

Scope of Services: The County of McHenry is seeking a broker/consultant to perform the full range of services related to the design, implementation, maintenance, communication, analysis, and improvement of the County’s group health and dental insurance. Specific responsibilities include, but are not limited to:

1. Health and Welfare Plan Administration and Compliance
   o Assist the County in administering all group health insurance plans by providing timely responses to questions and supplying information as necessary to McHenry County staff.
   o Negotiate on the County’s behalf with providers if claims are not covered.
   o Provide McHenry County employees with claim advocacy and assist in resolution of claim disputes.
   o Provide recommendations and assist in developing communications specific to the needs of McHenry County employees.
   o Attend open enrollment meetings and various other information meetings throughout the year as requested.
   o Assist in the development, education, and communication of comprehensive wellness activities geared toward improving employee health and improving costs.

2. Compliance
   o Alert County staff to changes in applicable laws or regulations including, but limited to, PPACA, COBRA, HIPAA, Section 125, Medicare, Wellness Programs, etc.
   o Provide guidance appropriate to McHenry County in implementing any required changes to policy or procedure.
   o Assist in revising plan documents and in compliance and regulatory matters when necessary.
   o Provide recommendations to educate and communicate regulatory changes to McHenry County employees when appropriate.
3. PPACA Compliance
   o Provide guidance and education on the Patient Protection and Affordable Care Act to County staff and employees when appropriate.
   o Recommend a plan of execution for PPACA reporting requirements such as the 6055 and 6056 reporting.

4. Annual Renewal Process
   o Recommend cost containment strategies, including ways to implement, on benefit plans.
   o Evaluate current medical offerings and help design cafeteria options for the employees of McHenry County to create meaningful behavior change and impact savings for the employee and McHenry County.
   o Annually prepare specifications, seek quotes, analyze quotes, and make vendor recommendations for the health and dental insurance per the McHenry County Purchasing Ordinance.
   o Prepare specifications, seek quotes, analyze quotes, and make recommendations for placement of other existing and new benefits per the McHenry County Purchasing Ordinance.
   o Market stop loss coverage and evaluate the County's stop loss reinsurance coverage.
   o Represent the County in all negotiations with vendors to secure the lowest possible rates and maximum discount levels.

5. Plan Analysis and Communication
   o On a monthly, quarterly, and annual basis, provide an analysis of claims data, including a detailed breakdown of claim categories and prescription drugs.
   o Identify and communicate trends and areas of concern to the leadership team throughout the year and to the County Board and committee meetings as requested.

6. Provide other related services as determined to be appropriate.
PROPOSAL FORM

WE, ______________________, PROPOSE TO PROVIDE THE REQUESTED SERVICES PER
THE REQUIREMENTS OF THIS REQUEST FOR PROPOSAL IN ACCORDANCE WITH THE
SPECIFICATIONS CONTAINED HEREIN.

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WE ALSO CERTIFY THAT THIS WRITTEN PROPOSAL IS VALID FOR 120 DAYS FROM THE DAY OF
THIS PROPOSAL AND THE ATTACHED INFORMATION IS RECEIVED AND FILED BY THE COUNTY OF
MCHENRY.

**Please list below other costs that may be associated with this service or use additional sheets if necessary:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Estimated start date after receipt of purchase order:  #___________ days.
1. What is the total number of clients using your services?
2. How many of these clients utilize self-funded plans?
3. What is the largest employee group being serviced by your firm?
4. How many governmental and/or educational entities are serviced by your firm? How long has your firm represented these clients?
5. Describe past and current experience, including number of current clients with health insurance benefits tied to labor agreements.
6. Provide a brief history of your organization including the length of time you have been providing benefit consulting services.
7. Describe what resources your firm offers to assist with the administration of the County’s benefit program.
8. Describe your firm’s marketplace leverage in negotiating with carriers in regard to rates, policy terms and plan design, specifically Blue Cross/Blue Shield.
9. Describe your view of the role of a Broker/Consultant and what differentiates your firm from others.
10. Summarize your firm’s strategy to manage and forecast a benefit package over a 2-3 year period.
11. Describe your firm’s philosophy for servicing an account and commitment to customer service and quality assurance.
12. Will a representative be assigned specifically to the County’s account? If so, what is his/her background and experience?
13. What services does your firm provide in regard to claim resolution?
14. Describe any in-house tools and/or technology available for the County’s access. Please provide sample materials for review if appropriate.
15. If selected as Broker/Consultant for the County of McHenry, please describe the steps you would anticipate for a smooth transition.
16. Describe your firm’s legal research capabilities and how you communicate legislative updates to your clients.
17. Describe your firm’s knowledge and experience in developing plans tailored specific to retiree populations.
18. What is your firm’s experience with private exchanges? Please provide information on the number and demographics of clients you have that use a private exchange.
19. Disclose if your company is owned by or has an ownership affiliation with any insurance company/TPA. If so, please explain in detail.

<table>
<thead>
<tr>
<th>AUTHORIZED NEGOTIATORS:</th>
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</thead>
<tbody>
<tr>
<td>Name:</td>
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<tr>
<td>Phone #</td>
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<tr>
<td>Title:</td>
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</tbody>
</table>

| Name:                   |
| Phone #                 |
| Title:                  |
List three (3) references that you have done similar work, service or supplied similar products to within the last twelve (12) months (Only correct contact names and phone numbers will be acceptable).

Entity:
Address:
City, State, Zip Code:
Telephone Number:
Contact Person:

Entity:
Address:
City, State, Zip Code:
Telephone Number:
Contact Person:

Entity:
Address:
City, State, Zip Code:
Telephone Number:
Contact Person:
CERTIFICATIONS
Vendor certifies that it has not been barred from contracting with a unit of State or local government as a result of a violation of Section 33E-3 or 33E-4 of the Criminal Code of 1961, as amended.

_____ Yes  _____ No

Under penalties of perjury, I certify that _______________________ is my correct Federal Taxpayer Identification Number. I am doing business as a (please check one):

___ Individual
___ Sole Proprietorship
*** Partnership
** Corporation
___ Not-for-Profit Corporation
___ Medical and Health Care Services Provider Corporation

*State full names, titles and addresses of all responsible principles and/or partners below;

Name: __________________________ Title: __________________________
Address: __________________________

Name: __________________________ Title: __________________________
Address: __________________________

Name: __________________________ Title: __________________________
Address: __________________________

Name: __________________________ Title: __________________________
Address: __________________________

Name: __________________________ Title: __________________________
Address: __________________________

Name: __________________________ Title: __________________________
Address: __________________________

If needed please submit any additional sheets.
THIS PAGE IS MANDATORY.

PROPOSER'S CERTIFICATION

I have carefully examined the Request for Proposal, Requirements for Statements of Qualifications, Scope of Services Background, and any other documents accompanying or made a part of this Request for Proposal.

I hereby propose to furnish the goods or services specified in the Request for Proposal. I agree that my proposal will remain firm for a period of up to 120 days in order to allow the County adequate time to evaluate the qualifications submitted.

I verify that all information contained in this proposal is truthful to the best of my knowledge and belief. I further certify that I am duly authorized to submit this proposal on behalf of the firm as its act and deed and that the firm is ready, willing and able to perform if awarded the contract.

I further certify, under oath, that this proposal is made without prior understanding, agreement, connection, discussion, or collusion with any other person, firm or corporation submitting a proposal for the same product or service. No officer, employee or agent of the County of McHenry or any other proposer is interested in said proposal and that the undersigned executed this Proposer's Certification with full knowledge and understanding of the matters therein contained and was duly authorized to do so.

**State of Incorporation _______________________

(Individual - Partnership - Company - Corporation)

(Business Address)

(City, State, and Zip Code)

(By Signature) (Title)

(Witness Signature) (Title)

(Telephone No) (Fax No)

(Date)

End of Document
Annual Wellness Plan Dates & Requirements

The Kendall County Wellness Program takes effect January 1, 2019*.

To be eligible for health care savings, an employee will need to:
  - Submit evidence of a current annual wellness screening/physical by December 1, 2018.
  - The current annual wellness screening/physical must be dated between December 2017 and November 2018.
  - If the employee is on the County's family health insurance plan then the employee's spouse must also submit an annual wellness screening.
  - Employee's children do not need to submit annual wellness screenings.

2018 HMO & HSA Premium Information

Employees electing the HMO Plan or the HSA Plan pay:
  - Single Plan – 10% of the total health premium cost.
  - Family Plan - approximately 31% of the total health premium cost (50% of difference between the family premium less 90% of the single premium).

2019* HMO & HSA Premium Information

Employees electing to participate in the wellness program and electing the HMO Plan or the HSA Plan would continue to pay:
  - Single Plan – 10% of the total health premium cost.
  - Family Plan - approximately 31% of the total health premium cost (50% of difference between the family premium less 90% of the single premium).

Employees electing not to participate in the wellness program and electing the HMO Plan or the HSA Plan would pay increased premiums in the amounts of:
  - Single Plan – 20% of the total health premium cost.
  - Family Plan - approximately 33% of the total health premium cost (50% of the difference between the family premium less 80% of the single premium).

*NOTE: 2019 Health Insurance Premium costs will not be available until November 2018