Human Resources Department

Temporary Employee Services & Information Technology Staffing Resources

2008 RFP

Human Resources Department

Candy Clarke Aldridge, Acting Human Resources Director

Ramiro Cano, Assistant Director

Chas Smith, Division Manager

Christine Gallegos, Administrative Supervisor

Welcome, special guests from Affirmative Action Division and Legal Dept.

Human Resources Department
Temporary Employee Services & Information Technology Staffing Resources Proposal

RFP location: **http://purchasing.houstontx.gov**

- **Due Date: Friday, September 5, 2008**
  11:00 AM (CDT)
- **Location: City Secretary's Office**
  Public Level – City Hall Annex

We are the primary organization within the City authorized to issue invitations to bid and request for proposal, process and release purchase orders and administer term contracts through our 50+ staff members and an operating budget of $3.0 million. The City Purchasing Agent can delegate authority to department staff to release purchase orders against contracts and to issue non-contract purchases under $50,000.

Our mission is to manage, facilitate and provide the highest quality, value-added procurement services that exceed the needs and expectations of our customers.

Learn how we do business:

- The City Purchasing Agent
- Guide to Doing Business
- DPU Contact List
- Employee Directory
- Glossary of Terms
- Procurement Links

Our New SAP System:

- Letter to Our Suppliers
- NIGP Commodity Code
- Material & Vendor Master
- SPD Purchasing Groups

Terms & Conditions:

Bids & RFPs:

- Formal Bids & RFPs
- ~~Register to Download~~ Bids
- Logon to Place Bids Online
- Solicitation Forms & Attachments
- Pre-Bid Conference Schedule
- FAQs

City Suppliers:

- Register to be a Supplier
- Update My Supplier Profile
- View Active Contract Roster
- FAQs

Help Desk:

Related Links

- Help Desk
- Guide to Doing Business
- Bids & RFPs
- City Suppliers
- Purchasing Catalog

Search: Purchasing Website

- Bid Tabulations
- NIGP Living Code
- Material & Vendor Search

Each RFP contains the following sections:

- General Instructions
- Scope of Work
- Proposal Outline and Content
- Evaluation of Proposal

Submittal Procedures and Proposal Format

Submittal Procedures:

•Provide rate and markup on CD
•Clearly "labeled" proposal
•Provide 1 original, 4 copies
•Submission Address:

City Of Houston
City Secretary's Office
900 Bagby
Room P101 City Hall Annex
Houston, TX 77002

Proposal Format:

The proposal must be

- ✓ typed
- ✓ signed in ink by an officer of the company
- ✓ clearly written in concise language
- ✓ complete
- ✓ bound and sealed when submitted

“Proposal for Temporary Employee Services”

T23001

“Proposal for Information Technology Staffing Services”

T23002

Insurance Requirements

- Insurance (link to Mary's insurance ppt)
  - Indemnification Procedures
  - Insurance Requirements

Temporary Employee Services RFP – T23001
Information Technology Staffing Resources – T23002

Understanding and Enforcing Insurance Requirements in City Contracts

August 22, 2008

Mary McKerall
Senior Assistant City Attorney
Legal Department, Contracts Division

Understanding and Enforcing Insurance Requirements in City Contracts
OUTLINE

- Basic Business Insurance Package
- City Required Coverages
- Additional City Insurance Requirements
- Evidence of Insurance
- Enforcing Insurance Requirements

Basic Business Insurance Package

- Workers' Compensation
- Employer's Liability
- Commercial General Liability
- Automobile Liability
- Commercial Crime or Fidelity Bond

Basic Business Insurance Package

- Workers' Compensation
  - Covers medical and rehabilitation costs and lost wages for employees injured on the job.
  - Three parts:
    - 1. Injured employee's medical bills & lost wages.
    - 2. Employer's liability if employee's family sues.
    - 3. Employment practices liability; covers suits of discrimination or sexual harassment (optional).

Basic Business Insurance Package

- Commercial General Liability (CGL)
  - Covers accidents on business premises and exposure to company's products
  - Tends to have many exclusions (e.g., damage cannot be due to poor workmanship)

Basic Business Insurance Package

- Auto Liability
  - Used when company has car involved in company business (delivery vans, fleet vehicles for employee use)
  - Minimum policy amounts set by state ($1 million recommended)

Required Coverages for City Contracts

- Workers' Compensation
- Employer's Liability
- Commercial General Liability
- Automobile Liability (if applicable)
- Professional Liability (if design professional, architect, etc.)

Required Coverages for City Contracts

- Workers' Compensation = "Statutory amount" or "As required by law"

Required Coverages for City Contracts

- Employer's Liability
  - Bodily Injury by accident $500,000 (each accident)
  - Bodily Injury by Disease $500,000 (policy limit)
  - Bodily Injury by Disease $500,000 (each employee)

Required Coverages for City Contracts

- Commercial General Liability (CGL)
  - Includes Broad Form Coverage, Contractual Liability, Bodily and Personal Injury, Completed Operations, etc.
  - Bodily Injury and Property Damage = Combined Limits of $500,000 for each Occurrence and $1,000,000 aggregate

Required Coverages for City Contracts

- Automobile Liability Insurance = $1 million
  - Covers three classes of vehicles:
    - Owned = owned by contractor
    - Non-owned = owned by contractor's employees
    - Hired = borrowed or leased
- If contractor does not own any vehicles, it must supply a letter stating that if it does buy any it will also buy "owned" coverage.
- Contractor must have "non-owned" and "hired" coverage. Otherwise City would have to go after each employee to be added as Additional Insured.

Additional City Insurance Requirements

- Policy issuers must have a Certificate of Authority to transact business in Texas, or
- Be a non-admitted issuer in Texas with a Best's rating of at least B+ with a Financial Size Category of 6 or better.
- This provides City with assurance that issuer will remain solvent.

Additional City Insurance Requirements

- City's Additional Insured Status
  - All policies except Workers' Compensation, Employer's Liability, and Professional Liability must name City (and its officers, agents, and employees) as Additional Insured.
  - Additional Insured Status may be contractually limited not to extend to cases of the City's sole negligence unmixed with any fault of Contractor.

- Benefits of Additional Insured Status:
  - City shares in Named Insured's coverage, thus diluting the limit of liability available for claim settlement.
  - City shares in Named Insured's policy rights to defense. Or, the insurer has a duty to defend the City as well as the Named Insured.

Additional City Insurance Requirements

- Deductibles
  - Contractor must pay for any claims up to the amount of any deductibles.
  - Waives any claim against City for deductibles.
- Liability for Premiums
  - Contractor must pay all premiums and City does not have to.
- Endorsement of Primary Insurance
  - Each policy, except Workers' Compensation and Professional Liability (if any), must state that Named Insured's policy is primary to any other policy available to City with respect to claims under a particular contract.

Additional City Insurance Requirements

- Cancellation Clause
  - Insurance company cannot cancel or not renew a policy without first giving a COH Director 30 days' advance written notice.
  - A policy should have more than 30 days remaining before expiring.
    - If 30 days or less, we require a letter from the insurance agent stating they know of no reason the policy would be cancelled.
  - If insurance company does not allow agent to make changes to original language, cancellation language can be amended in "descriptions of operations" box on Certificate of Insurance, as long as the new language "supersedes" or "amends" original clause.

Additional City Insurance Requirements

- Waiver of Subrogation
- Subrogation means that one party can step into the shoes of another for purposes of bringing a claim
  - X at fault for causing damage to Contractor's property. Contractor's insurance company pays claim and is subrogated to Contractor, or can bring a lawsuit on its behalf against X.
- Contractor waives any claim or right of subrogation to recover against City, its officers, agents, or employees.
- Required as an endorsement to each policy, except for Professional Liability (if any).

Additional City Insurance Requirements

- Subcontractors and Consultants

- **Subcontractors** must name City as **Additional Insured** and comply with all requirements in prime contractor's agreement, except for policy amounts.
  - Amounts are commensurate with amount of subcontract, but no less than $500,000

Certificates of Insurance

"Evidence" or "Proof" of Insurance

1. Date
2. Insurance Agent/Broker
3. Company writing policy
4. Insured (Contractor,
5. Auto = Owned, Hired, Non-Owned
6. Policy number
7. Type and actual amounts carried
8. Other types (if required)
9. Other types (if required)
10. Special items (project description, additional insured, waiver of subrogation)
11. Certificate Holder's name & address
12. Cancellation clause (as edited)
13. Name & signature of authorized representative
14. Expiration date for each type

CERTIFICATE OF INSURANCE GUIDELINES — DATE (MM/DD/YY) (1)

PRODUCER (2)

INSURED (4)

COMPANIES AFFORDING COVERAGE
- Company Letter A (3)
- Company Letter B (3)
- Company Letter C (3)
- Company Letter D (3)
- Company Letter E (3)

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	TYPE OF INSURANCE	
	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE / OCCUR X OWNER'S & CONTRACTOR'S PROT	(6)		(14)	GENERAL AGGREGATE PRODUCTS-COMP/OP AGG PERSONAL & ADV INJURY EACH OCCURRENCE FIRE DAMAGE (Any one fire) MED EXP (Any one person)	$ $ $ $ $ $
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS (5) HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				COMBINED SINGLE LIMIT (7) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE	$ $ $ $
	EXCESS LIABILITY X UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE AGGREGATE	$ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: X INCL / EXCL				X STATUTORY LIMITS / OTHER EL EACH ACCIDENT EL DISEASE - POLICY LIMIT EL DISEASE - EA EMPLOYEE	$ $ $
	OTHER (8)				(9)	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
THE CITY OF HOUSTON IS NAMED AS ADDITIONAL INSURED ON AUTOMOBILE LIABILITY, COMMERCIAL GENERAL LIABILITY AND WAIVER OF SUBROGATION ON THE WORKERS COMPENSATION, GENERAL LIABILITY & AUTOMOBILE LIABILITY, AS REQUIRED BY WRITTEN CONTRACT ON PROJECT #_____ (10)

CERTIFICATE HOLDER

CITY OF HOUSTON (11)
[CONTRACTING DEPARTMENT]
P. O. BOX 1562
HOUSTON, TEXAS 77251-1562
ATTN: [PROJECT MANAGER]

CANCELLATION (12)

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~ENDEAVOR TO MAIL~~ 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, ~~BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENT OR REPRESENTATIVES.~~

AUTHORIZED REPRESENTATIVE (13)

Enforcing Insurance Requirements

Contractor must supply original ACCORD certificate to the Director of Human Resources

Enforcing Insurance Requirements

Contractor <u>must</u> maintain required coverages without interruption.

If not, Director has authority to either:

1. **Suspend contractor from performing and begin <u>termination for default</u>, or**
2. **Use City money to <u>buy the insurance</u> and deduct costs from payments due.**

In no case will the City be prohibited from asserting its right to terminate a contract because of its acts or omissions in reviewing insurance documents.

City Contractors' Pay or Play Program (POP)

City of Houston

Affirmative Action and Contract Compliance Division

Contractor's Pay or Play (POP)

Executive Order 1-7
and
Ordinance 2007-534

POP Background & Purpose

POP program mandates City Contractors to offer their employees a minimum level of health benefits OR Contribute prescribed amount towards "Contractors Responsibility Fund" to defray the costs of providing health care to uninsured people in Houston and Harris County area.

The purpose of the Pay or Play Program is to:

1. Create a more level playing field among competing contractors.

2. To recognize and account for the fact that there are costs associated with the health care of the uninsured.

3. The City of Houston intends to enhance fairness in the competition for contracts between bidders that choose to offer a health benefit to their workforce and those who do not.

Contracts Covered Under POP

POP program applies on:

1. Contracts Advertised after July 1, 2007.

2. Contracts for:
   - i) professional service
   - ii) construction
   - iii) service contracts

3. Contracts valued at or above $100K including contingencies

4. Subcontracts valued at or above $200K including contingencies

Note: Program does not apply to any contract in which the primary purpose is procurement of property, goods, supplies, and or equipment.

Covered Employees

- The program applies to employees of a covered contractor or sub-contractor, including contract labor, who are:
  - Over age 18
  - Work at least 30 hours per week and
  - Work any amount of time under a covered city contract or sub-contract

PLAY

- Contractors who opt to "play" will provide health benefits to covered employees.
  1- the employer contributes no less than $150 per covered employee per month toward the total premium cost;
  2- the covered employee contributes, if any amount, no greater than 50% of the total month premium cost (excluding family).

PLAY Cont'd....

Contractors that opt to "Play" will:

a) Provide periodic reports to the Contract Administrator showing continued proof of coverage on POP-7. The self-insured contractors have to get approval from AAD and furnish documents as required.

b) Retain the following records for at least 3 years:

- i) remittal forms with names of employees participating in health benefits plan, and amount paid by employer.
- ii) proof of coverage and/or proof of payment for each covered employee.
- iii) refusal of offer, signed by employee (if applicable)
- iv) report subsequent subcontracts to contract administrator within 30 days of date of subcontract agreement.

Do all of the above for covered employees of subcontractors.

PAY

- Contractors who opt to "pay" will contribute $1.00 per covered employee per hour for work performed under the contract with the City.

  1. The contractor will provide monthly report on POP-5 listing the names of employees, hours worked,exemptions and amount owed to City.

  2. POP liaisons and project managers will check and verify the details on POP-5

  3. Companies will submit an initial report with the second invoice to the department. Payments based on each report will be submitted to Affirmative Action within 30 days, along with copies of supporting documentation provided to contracting department. Payment via wire transfer available upon request, however supporting documentation must be submitted to Affirmative Action.

PAY Cont'd....

Contractors that opt to "Pay" will:

4. Retain POP program documents for at least 3 years.

5. report subsequent applicable subcontracts to contract administrator or within 30 days of date of subcontract agreement.

Do all of the above for covered employees of subcontractors.

Note – Prime contractors are responsible for submitting applicable documentation for their subcontractors.

What If?

Q: An Employee hired by the contractor but has to wait 30-90 days probation time before health benefits are provided?

A: During the probation period they will be considered as contract labor for POP purposes and have to pay for the hours worked at city's jobs. After the probation is over and if contractor wants to provide health benefits they can move them from "Pay" to "Play" category.

Q:Contractors move their workers from jobs to jobs, if a covered worker moved from non-city job to city job temporarily how POP will affect that?

A: If the temporary or substitute worker is a covered worker and has been provided with health benefits then nothing is required except proof of health coverage; However, if the covered worker is without health benefits then contractor has to pay towards POP funds for the hours worked at city jobs.

POP Web Page (Your Resource Center)

- AAD provides POP related help, POP forms and all the POP related updates through our website. Data management and POP reporting is facilitated with the help of following POP-Forms:

PAY OR PLAY (POP) FORMS	
POP-1 (Document 00840)	Pay or Play Requirements
POP-1A (Document 00460)	Pay or Play Acknowledgement Form
POP-2 (Document 00630)	Certificate of Agreement to Comply with Pay or Play Program
POP-3 (Document 00631)	List of Participating Contractors
POP-4	Contractor/Subcontractor Waiver Request
POP-5	Contractor/Subcontractor Reporting Form (Payment Option)
POP-6	POP Quarterly Update- by City Departments
POP-7	Employee Health Benefits Update

City of Houston

Pay or Play Program
Acknowledgement Form

What this form does. This form acknowledges your awareness of the Pay or Play program. Your signature affirms that you will comply with the requirements of the program if you are the successful bidder/proposer, and ensure the same on behalf of subcontracts subject to the Pay or Play Program.

For more information, contact the Contract Administrator.

Routing. Return this form with your bid or proposal.

I declare under penalty of perjury under the laws of the State of Texas that if awarded a contract, I will comply with the requirements of the Pay or Play Program.

Signature	Date
Print Name	City Vendor ID
Company Name	Phone Number
Email Address	

CITY OF HOUSTON
STANDARD SPECIFICATION
FORM POP 2 (DOCUMENT 00630)

AFFIRMATIVE ACTION AND CONTRACT COMPLIANCE
CERTIFICATION BY BIDDER
EFFECTIVE 7.1.07

CERTIFICATION OF AGREEMENT TO COMPLY WITH PAY OR PLAY PROGRAM

Contractor Name: _____ $ _____
(Contractor/Subcontractor) (Amount of Contract)

Contractor Address: _____

Project No.: [GFS/CIP/AIP/File No.] _____

Project Name: [Legal Project Name] _____

In accordance with the City of Houston Pay or Play Program authorized by Ordinance 2007-534, Contractor agrees to abide by the terms of this Program. This certification is required of all contractors for contracts subject to the program. You must agree EITHER to PAY or to PLAY for each covered employee, including those of subcontractors subject to the program.

[ ] Yes [ ] No Contractor agrees to Pay $1.00 per hour for work performed by covered employees, including covered subcontractors' employees and contract labor, under the contract with the City.

[ ] Yes [ ] No Contractor agrees to offer health benefits to each covered employee, including covered subcontractors' employees that meet or exceed the following criteria:
(1) the employer will contribute no less than $150 per employee per month toward the total premium cost; and
(2) the employee contribution, if any amount, will be no greater than 50% of the total premium cost.

[ ] Yes [ ] No Contractor agrees to pay on behalf of some covered employees and contract labor and play on behalf of other covered employees, in accordance with program requirements, including subcontractors' employees, if applicable.

[ ] Yes [ ] No If contract labor is utilized the Contractor agrees to report hours worked by the contract laborer and Pay $1.00 per hour for work performed.

[ ] Yes [ ] No Contractor will comply with all provisions of the Pay or Play Program and will furnish all information and reports requested to determine compliance with program provisions.

[ ] Yes [ ] No For Prime Contractors Only: Contractor will file compliance reports with the City, which will include activity for subcontractors subject to the program, in the form and to the extent requested by the administering department or the Affirmative Action and Contract Compliance Office. Compliance reports shall contain information including, but not limited to, documentation showing employee health coverage and employee work records.

Following Information is Mandatory	
Total No. Of Employees on City Job	
No. Of Employees-"Playing"	
No. Of Employees –"Paying"	
No. Of Employees "Exempt"	

I hereby certify that the above information is true and correct.

_____ _____
CONTRACTOR (Signature) DATE

_____
NAME AND TITLE (Print or type)

Each RFP contains the following sections:

- General Instructions
- Scope of Work
- Proposal Outline and Content
- Evaluation of Proposal

Scope of Work

A. General Scope of Services and Reporting
T23001- pages 16-17 & Attach. #1
T23002- pages 16 & Attach. #1

Failure to respond to any items requested in RFP, may result in the entire proposal being rejected.

Scope of Services-Attachment 1

City of Houston requirements of contracted agencies:

- Provide all labor material & supervision necessary
- Provide a single point of contact with experienced staff member
- Provide a local office
- Administer proper skills tests and evaluation methods
- Provide criminal background checks on qualified temporary employees
- A 24-hour operation – emergency contact information
- A “drug free” workplace
- Appropriate dress code for all employees
- Proper tools, licenses, certifications
- Commitment to complete the temporary assignment

Page 9 and 18

Scope of Services – Signature Page

- **Acknowledge by <u>signature</u> at the end of the Scope of Services Section.**
- **A copy of the signed page <u>must</u> be included in your bid proposal.**

Proposal Outline & Content

- Title Page
- Table of Contents
- Letter of Transmittal
- Agency Qualifications
- Proposed Strategy & Operational Plan
- Proposed Transition Plan
- Financial Statements & References
- Cost of Services – Attachments 3A, 3B, 3C, 3D
- Content

III: PROPOSAL OUTLINE AND CONTENT

To simplify the review process and to obtain the maximum degree of comparability, the proposal must follow the outline as set forth below and, at a minimum, contain the information as requested. Proposers are encouraged to include additional relevant information.

28) Title Page:

i) The title page should include the title of the RFP and number, the name and address of the Proposer, and the date of the proposal.

29) Table of Contents:

i) Place the "Table of Contents" on top of all documents, even before the "Transmittal Letter." In other words, the "Table of Contents" should be the first page seen when the binder is opened.

ii) Number all pages sequentially. Use a Bates stamp to number the pages, in case they are produced from different departments, divisions or sections of your company. In the event that all documents cannot be numbered sequentially but tabs are used to separate the documents, please indicate—in the "Table of Contents"—where pertinent information, especially Exhibits, Attachments and required forms can be found. For example: If the Financial Statement is under Tab 7, on pages 15-23, please indicate it in the "Table of Contents" as:

Financial Statement.....Tab 7, pages 15-23

30) Letter of Transmittal:

i) A letter of transmittal shall include the following:

(a) The names, titles, addresses, and telephone numbers of the individuals who are authorized to make representations on behalf of the Proposer.

(b) A statement that the person signing the letter of transmittal is authorized to legally bind the Proposer; that the proposal and the total fixed price contained therein shall remain firm for a period of one hundred-eighty (180) days and that the proposal will comply with the requirements and arrangements in Section I of this RFP.

31) Agency Qualifications:

i) Complete Proposer Qualification Questionnaire – Attachment 2

(a) Answers should be concise, straightforward and responsive. Please avoid long, rambling and verbose statements. The answer to each question should be limited to LESS than 250 words, if possible.

(b) If need be, you may refer to an answer which is responsive to a previous question provided the two questions are in the same section of the questionnaire. For example: If the answer to Question 9 is the same as or similar to Question 3, under "Vendor Qualifications," you may refer to the previous answer. But do not make references to answers from different sections of the document in a manner that makes it cumbersome to find the reference. Where extraordinary circumstances compel the need to reference an answer outside the scope of a particular section,

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Transmittal Letter

- Proposer's name
- Business address
- Legal status
- Federal Tax ID #,
- Primary point of contact
  - email address, phone, fax, pager
- Signed in <u>blue</u> ink by an officer of company

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- Scope of Work
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- Evaluation of Proposal

Proposer Qualifications

Proposer Qualifications

- **T23001- pages 18-19 & Attach. #2**
- **T23002- pages 17-18 & Attach. #2**

Proposer Qualifications

- Staff qualifications
- Recruitment
- Hiring process – skills evaluation
- Termination – notification
- MIS Capabilities – technology
- Transition Plan

Proposal Outline & Content

- Title Page
- Table of Contents
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- Agency Qualifications
- Proposed Strategy & Operational Plan
- Proposed Transition Plan
- Financial Statements & References
- Cost of Services – Attachments 3A, 3B, 3C, 3D
- Content

ATTACHMENT 3-A

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
RFP: AUGUST 2008 PROPOSAL CONTRACT POSITION RATE SCHEDULE

Complete Mark-Up (MU) information for each Job Title and Contract Year. Indicate "NA" in MU, if proposer declines to provide a particular service(s)

Job Category:	Administrative / Clerical Personnel								
	Contract Year 1			Contract Year 2 * (Optional)			Contract Year 3 * (Optional)		
Job Titles	Pay Rate ($)	MU%	Bill Rate ($)	Pay Rate ($)	MU% **	Bill Rate ($)	Pay Rate ($)	MU%	Bill Rate ($)
01 Account Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
02 Senior Account Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
03 Cashier	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
04 Clerk Typist	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
05 Clinic Assistant	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
06 Customer Service Representative	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
07 Data Entry Operator	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
08 Senior Data Entry Operator	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
09 General Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
10 Senior Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
11 Receptionist	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
12 Secretary	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
13 Senior Secretary	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
14 Administrative Aide	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
15 Administrative Assistant	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
16 Administrative Specialist	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
17 Administrative Coordinator	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -

Job Category:	Service / Maintenance								
	Contract Year 1			Contract Year 2			Contract Year 3		
Job Titles	Pay Rate ($)	MU%	Bill Rate ($)	Pay Rate ($)	MU%	Bill Rate ($)	Pay Rate ($)	MU%	Bill Rate ($)
18 Driver/Messenger	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
19 Laborer/Utility Worker	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
20 Refuse Laborer	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
21 Inventory Management Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
22 Senior Inventory Management Clerk	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
23 Equipment Operator I	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
24 Public Health Investigator	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
25 Nutritionist	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
26 Senior Imaging Technician	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -

Job Category:	Professional / Technical								
	Contract Year 1			Contract Year 2			Contract Year 3		
Job Titles	Pay Rate ($)	MU%	Bill Rate ($)	Pay Rate ($)	MU%	Bill Rate ($)	Pay Rate ($)	MU%	Bill Rate ($)
27 Accountant	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
28 Senior Accountant	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
29 Nurse Practitioner	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
30 Licensed Vocational Nurse	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -
31 Public Health Nurse II (RN)	$	0.00%	$ -	$	0.00%	$ -	$	0.00%	$ -

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option

*** Mark-Up (MU) must include all costs including salary and benefits; mandated payroll taxes and workers' compensation coverage on each employee.**

■

Rate Request Attachments

"Indicate "NA" for rate, if proposer declines to provide a particular service(s)."

- Proposer must provide an <u>explanation</u> for any "NA" entries.
- Rate Request Form must be complete – All blanks must be filled.

ATTACHMENT 3-B

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL PAYROLLING MARKUP RATE REQUEST

Proposer: _____

_____

The City of Houston is requesting markup rates in regards to providing payrolling services in Years 1 - 3. Payrolling is comprised of the following three (3) groups, Administrative, Industrial-1, Industrial-2.

Please indicate Administrative and Industrial percent markup and breakdown the cost for each type under Markup Rate Disclosure.

Markup Rate Disclosure	Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Administrative / Clerical / Personnel			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%
Industrial -1 / Service Maintenance			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%
Industrial - 2 / Professional			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%

You must indicate payrolling percent markup on Administrative and/or Industrial - 1 & 2.

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for Total Markup if proposer declines to provide a particular service(s)

ATTACHMENT 3-C

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL SPECIALIZED PERSONNEL MARKUP RATE REQUEST

Proposer: _____

_____

Please indicate the specialized personnel markup percent and breakdown the cost under the Markup Rate Disclosure.

Note: Specialized is rated by groups

Markup Rate Disclosure	Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Administrative / Clerical Personnel			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%
Industrial -1 / Service Maintenance			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%
Industrial - 2 / Professional			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%

(This must be the same percent on all specialized personnel requested from your agency).

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for Total Markup, if proposer declines to provide a particular service(s)

ATTACHMENT 3-D

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL DRUG TEST CHARGE

Proposer: _____

_____

Proposer must provide a charge associated with drug testing those temporaries requested by the City of Houston on the job ordering form.

Markup Rate Disclosure		Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Drug Testing Charge	$	$ _____	$ _____	
(minimum 5 panel screen is required)				

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for rate, if proposer declines to provide a particular service(s).

ATTACHMENT 3-A

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL PAYROLLING MARKUP RATE REQUEST

Proposer: _____

_____

The City of Houston is requesting markup rates in regards to providing payrolling services in Years 1 - 3.

Please indicate Administrative and Industrial percent markup and breakdown the cost for each type under Markup Rate Disclosure.

Markup Rate Disclosure	Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Information Technology			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for Total Markup if proposer declines to provide a particular service(s).

ATTACHMENT 3-B

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL SPECIALIZED PERSONNEL MARKUP RATE REQUEST

Proposer: _____

_____

Please indicate the specialized personnel markup percent and breakdown the cost under the Markup Rate Disclosure.

Markup Rate Disclosure	Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Information Technology			
FICA	%	%	%
SUTA	%	%	%
FUTA	%	%	%
WC	%	%	%
OTHER	%	%	%
PROFIT	%	%	%
Total Markup	%	%	%

(This must be the same percent on all specialized personnel requested from your agency).

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for Total Rate, if proposer declines to provide a particular service(s).

ATTACHMENT 3-C

CITY OF HOUSTON / TEMPORARY EMPLOYEE SERVICES PROGRAM
AUGUST 2008 PROPOSAL DRUG TEST CHARGE

Proposer: _____

_____

Proposer must provide a charge associated with drug testing those temporaries requested by the City of Houston on the job ordering form.

Markup Rate Disclosure		Contract Year 1	Optional Contract Year 2	Optional Contract Year 3
Drug Testing Rate (minimum 5 panel screen is required)	$	_____ $	_____ $	

(Optional) Proposed Contract Term is One-Years with (2) One-Year Option
Indicate "NA" for rate, if proposer declines to provide a particular service(s).

Each RFP contains the following sections:

- General Instructions
- Scope of Work
- Proposal Outline and Content
- **Evaluation of Proposal**

What are causes of rejection?

PHASE I - PASS / REJECT

- Submit labeled, bound typed proposal & required copies by deadline
- Submission includes:

  Completed Contract Position Rate Request-

  T23001 Attachment 3A

  Completed Payrolling Markup Rate Request-

  T23001 Attachment 3A
  T23002 Attachment 3B

  Completed Specialized Markup Rate Request-

  T23001 Attachment 3C
  T23002 Attachment 3B

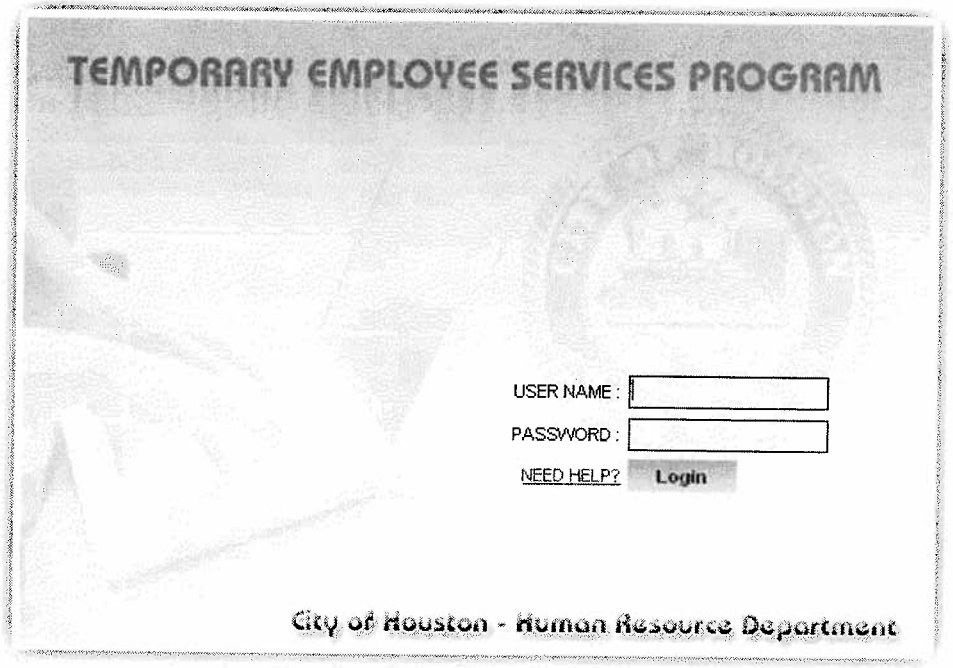
  Form 6559 Transmitter Report — Exhibit VI

- Typed proposal signed by an officer of the company
- Disk with all rate and markup information
- Transmittal Letter and completed Transmittal Check List — Page 17- 20 & Checklist

Evaluation of Proposal

- Quality of response submitted (all questions addressed)
- Strategy to perform the Scope of Work and Transitional Plan
- Experience and success in performing similar services for other entities
- Experience of the proposed managerial and account processing team
- Ability to timely offer qualified temporary employees
- Invoicing/Reporting/Technological ability
- Financial Strength of Proposer
- Reasonableness of cost projections
- Value Added Services

Temporary Employee Services Program



-Must have high speed internet access
-Must maintain application integrity
-Must maintain data integrity
-Must maintain logon/passwords security
-Vendor cannot extend to sub-contractors unless city grants approval

Anticipated Timeline

Task	Date
Release RFP	Wednesday, August 13, 2008
Pre-proposal conference	Friday, August 22, 2008
Deadline for RFP questions	Friday, August 22, 2008
Proposals due	Friday, September 5, 2008
Analysis of proposals, clarification of proposals, presentations, if necessary	September 2 - 19, 2008
Finalize documentation and recommendations	Monday, September 22, 2008
City Council acts on recommendations	Wednesday, October 8, 2008
Award notifications	Upon Council Approval
Effective date	Saturday, November 1, 2008

Human Resources Department
Temporary Employee Services
Proposal

- Due Date: Friday, September 5, 2008
  11:00 AM (CDT)
- Location: City Secretary's Office
  Public Level – City Hall Annex