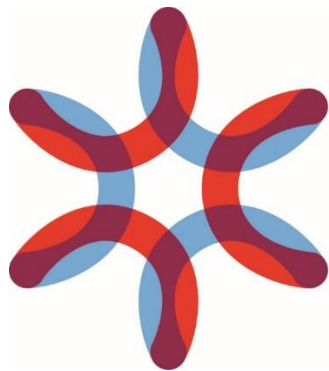


# ILLINOIS MEDICAL DISTRICT COMMISSION

## REQUEST FOR PROPOSALS *for* *Government Affairs and Legislative Advisory Professional Services*



**ILLINOIS  
MEDICAL  
DISTRICT**

**IMD 18-001**

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#### Project Contact:

Kesner Bienvenu  
Illinois Medical District Commission  
2100 W Harrison St., Chicago, IL 60612  
kbienvenu@medicaldistrict.org

Phone: 312-738-5800  
Fax: 312-738-5801  
TDD: 312-738-5804

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**KEY DATES:**

- RFP Issuance September 25, 2017
- Question Submission Cut-Off October 2, 2017
- RFP Response Due Date October 12, 2017
- Final Selection November 1, 2017 (estimate)

*In this document the IMD will be referred to as “District”, “we” or “us”. The person submitting an Offer will be referred to as “Proposer / Proposing Party / Proposing Entity” “Respondent,” “Contractor,” “Vendor”, “Firm” or “You”. For the purposes of this solicitation “Offer” shall also refer to a Respondent’s “Proposal” and/or “Response” in connection with this solicitation.*

Interested Respondents are responsible for periodically visiting the IMD website for any and all notification, updates and addenda (<http://www.medicaldistrict.org/request-for-proposals-rfps/>)

### 1.1 PURPOSE OF THE REQUEST FOR PROPOSALS (“RFP”)

The Illinois Medical District (the “IMD”) is requesting proposals (“Proposals”) from qualified, responsible parties (“Respondents”) to meet the IMD’s needs for legislative and governments affairs services, and the proven expertise to represent the interests of the IMD in the legislative and executive branches of city, state, and federal government and to enhance and strengthen the IMD’s governmental relationships.

The IMD seeks to work with firms that demonstrate an understanding of the IMD’s organizational goals and mission as well as the context of existing and potential resources available to the IMD. The IMD is also interested in firms that demonstrate the capacity to fulfill and enhance the IMD leadership’s long term strategic vision for the Illinois Medical District as a leader in patient care and medical research.

### 1.2 KEY DATES

The IMD anticipates a timely completion of the RFP process with the selection of one or more qualified Respondents and the execution of one or more agreements for professional services. The IMD reserves the right to make adjustments to the schedule throughout the process.

- |                               |                             |
|-------------------------------|-----------------------------|
| • RFP Issuance                | September 25, 2017          |
| • Question Submission Cut-Off | October 2, 2017             |
| • RFP Response Due Date       | October 12, 2017            |
| • Final Selection             | November 1, 2017 (estimate) |

#### Project Contact:

Kesner Bienvenu	Phone:	312-738-5800
Illinois Medical District Commission	Fax:	312-738-5801
2100 W Harrison St., Chicago, IL 60612	TDD:	312-738-5804
kbienvenu@medicaldistrict.org		

### 1.3 SUBMISSION OF QUESTIONS / CLARIFICATIONS

Questions regarding the Services must be sent in writing via email to the Project Contact on or before October 2, 2017. Submitted questions and IMD responses will be posted on the IMD website (<http://www.medicaldistrict.org/doing-business/request-for-proposals>)

Suspected errors in the RFP should be directed to the attention of the Project Contact via email.

In accordance with the provisions of the Quiet Period described below, Respondents may be disqualified for discussing this RFP or any related potential or actual Proposal, either directly or indirectly, with any IMD officer or employee, other than the IMD Project Contact.

### 1.4 QUIET PERIOD

The Quiet Period governs how and when the IMD staff may communicate with prospective Respondents during the pendency of a solicitation. The Quiet Period rules are designed to ensure that prospective vendors have equal access to information regarding selection parameters, that communications related to selection are consistent and accurate, and that the IMD’s process for selecting vendors is transparent, efficient, diligent and fair.

The following Quiet Period rules will apply during this RFP:

1. The Quiet Period begins upon the public release of the RFP and will end upon the IMD's public announcement of its final selection. Initiation and conclusion of the Quiet Period shall be publicly communicated to prevent inadvertent violations.
2. Throughout the Quiet Period, all IMD Commissioners and staff shall refrain from communicating with potential vendors regarding the Services or anything related to the RFP. If any Commissioner or IMD staff member is contacted by a potential vendor regarding the Services or the RFP during the Quiet Period, the Commissioner shall refer the vendor to the Project Contact without responding to any question.
3. Notwithstanding the Quiet Period, IMD staff are not prohibited from communicating with representatives of any party that already holds an existing contract with the IMD, so long as such communications relate only to the business already being conducted by the vendor on behalf of the IMD and so long as such communications do not relate to this RFP or the Services solicited herein.
4. Communications between staff designated by the IMD Executive Director and shortlisted Respondents are not prohibited.
5. A potential vendor may be disqualified from the consideration under the solicitation for a violation of the Quiet Period.

#### 1.5 PROPOSAL SUBMITTAL, DUE DATE, TIME AND SUBMISSION LOCATION

Submittals must be submitted in a sealed container and must include the following:

- 5 complete, signed original Proposals in hardcopy;
- 1 flash drive with the complete, signed Proposal in PDF format (if any portion of the Proposal is marked as confidential, then the flash drive should also include a redacted copy of the signed Proposal in PDF format)

Respondents may request confidential treatment of any portion of their Proposal. Any such request must be included in the cover letter, must be indicated on the enclosed forms, and a PDF copy of the redacted Proposal must be included on the flash drive.

Requests for confidential treatment will not supersede the IMD's legal obligations under Illinois Freedom of Information Act ("FOIA") (5 ILCS 140) or other applicable law.

Due Date and Time: **Proposals must be received by October 12, 2017, by 3:00 p.m. CST.** Failure by a delivery service will not excuse the Respondent from the deadline. IMD will not consider Proposals, modifications or withdrawals received after the Due Date and Time.

#### **DELIVER OFFERS TO:**

Kesner Bienvenu  
Illinois Medical District Commission  
2100 W Harrison St., Chicago, IL 60612

#### **LABEL OUTSIDE OF ENVELOPE / CONTAINER:**

Government Affairs and Legislative Advisory Professional  
Services  
RFP Response 3:00 p.m.  
3:00 p.m. Central Time  
[Respondent Name & Address]

IMD will open Proposals at the Due Date, Time and Delivery Location. Prior to the Due Date and Time, Respondents may mail or hand-deliver Proposals, modifications, and withdrawals. IMD will not accept e-mail or fax or any other electronic submissions.

All Proposals must remain firm for 270 days from opening.

#### 1.6 REVIEW AND EVALUATION OF PROPOSALS

The IMD will endeavor to review all proposals expeditiously and pursuant to the criteria established in Section 4. Upon initial review, the IMD may request clarifications and additional information from Respondents as it deems necessary to

adequately and fairly understand and assess the proposals.

#### **1.7 NOTICE OF SELECTED RESPONDENTS**

IMD will post a notice to the IMD website identifying the apparent selected Respondents. The notice extends the Proposal Firm Time until the IMD and selected Respondent(s) sign a contract(s) or determine not to sign a contract. IMD may accept or reject any Proposal as submitted, or may request contract negotiations. If negotiations do not result in an acceptable agreement, IMD may reject the selected Proposal that is the subject of such negotiations. The Commission reserves the right to reject any or all Proposals received in response to this solicitation.

#### **1.8 PUBLIC RECORDS AND REQUESTS FOR CONFIDENTIAL TREATMENT**

Proposals become the property of the IMD and will not be returned to Respondents. Proposals may be available to the public under the FOIA (5 ILCS 140) and other applicable laws and rules. Respondents may request that certain information be treated as exempt. The IMD reserves the right to review such requests on a case-by-case basis. A request for confidential treatment will not supersede the IMD's legal obligations under the FOIA (5 ILCS 140). IMD will not honor requests to exempt entire Proposals. Respondents must identify the specific grounds in FOIA or other law or rule that support exempt treatment. Regardless, IMD may disclose the successful Respondent's team's name, the substance of the Proposal, and the pricing. If you request exempt treatment, you must submit an additional copy of the Proposal with exempt information deleted. This copy must tell the general nature of the material removed and shall retain as much of the Proposal as possible. Respondents will be responsible for any costs or damages associated with our defending your request for exempt treatment. Respondents agree the IMD may copy the Proposal to facilitate evaluation, or to respond to requests for public records. By submitting proposal, all Respondents warrant that such copying will not violate the rights of any third party.

#### **1.9 MBE / WBE / PARTICIPATION**

Consistent with the IMD Procurement Policy, the IMD encourages Respondents to use best efforts to use a diverse team, including but not limited to the participation of minority and women-owned businesses at all tiers of this engagement. The IMD has set a goal of twenty-five percent (25%) participation by certified minority business enterprises (MBE) and five percent (5%) by certified women-owned business enterprises (WBE). Entities which qualify for more than one type of certification shall not be credited more than once with regard to the Respondent's commitment. Only certifications by the State of Illinois (Business Enterprise Program), Cook County or the City of Chicago will be accepted for these purposes.

Respondents may achieve the M/WBE participation goal by the Respondent's own status as a certified MBE or WBE or Respondent's subcontracting portions of the Services to certified MBE or WBE entities (but only to the extent of any actual, meaningful and substantive work performed by the subcontractor).

#### **1.10 RESERVATIONS**

IMD reserves the right to reject any or all Proposals or portions of Proposals; and to award by item, group of items, or grand total. The IMD may request a clarification; inspect a Respondent's premises; interview staff; request a presentation; or otherwise verify the contents of the Proposal, including information about subcontractors and suppliers. IMD may request Best & Final Offers. IMD will make all decisions on compliance, evaluation, terms and conditions, and shall make decisions solely in the best interests of the IMD.

##### **Cancellation**

The IMD reserves the right, at any time and in its sole and absolute discretion, to reject any or all submittals, or to withdraw the RFP without notice. In no event shall the IMD be liable to any Respondent for any cost or damages or other costs incurred in connection with this RFP and any response thereto.

##### **Amendments**

The IMD reserves the right to amend this Request for Proposals at any time. The respondent must acknowledge receipt of an amendment in its submittal with the signature of an individual legally authorized to bind the respondent.

**Nonmaterial and Material Variances**

The IMD reserves the right to waive or permit cure of nonmaterial variances in a Response. "Nonmaterial variances" include minor informalities that do not affect responsiveness; that are merely a matter of form or format; that do not prejudice other Respondents; that do not change the meaning or scope of the RFP; or that do not reflect a material change in the RFP. In the event the IMD waives or permits cure of nonmaterial variances, such waiver or cure will not modify the RFP requirements or excuse the Respondent from full compliance with Request for Proposal specifications or other contract requirements if the Respondent is awarded the contract. The determination of materiality is in the sole discretion of the IMD.

**SUBMITTAL DOES NOT GUARANTEE A CONTRACT**

The RFP process will enable the IMD to evaluate competitive Proposals for professional services. Respondents do not develop a right to an award by submitting a Proposal, nor do Respondents have right to a contract based on our posting a business on the any IMD web site notice. IMD is not responsible for and will not pay any costs associated with the preparation and submission of a Respondent's Proposal. Any Respondent that may be selected must not commence work prior to the date all parties execute the contract, unless approved in writing in advance by the IMD.

**1.11 GOVERNING LAW, POLICIES, AND FORUM**

*This RFP was prepared in accordance with the IMD Procurement Policy. A copy of such Policy is available at <http://www.medicaldistrict.org/doing-business/procurement-guidelines>.*

Illinois law and rule govern any contract resulting from this solicitation. Respondents must bring any action relating to this RFP or any resulting contract in the appropriate court in Illinois. IMD will not consent to binding arbitration.

**NON-DISCRIMINATION POLICY:** *In compliance with the State and Federal Constitutions, the Illinois Human Rights Act, the U.S. Civil Rights Act, and Section 504 of the Federal Rehabilitation Act, the IMD will not discriminate on the basis of any protected class when making selection decisions for employment, contracts, or any other IMD activity.*

## SECTION 2: IMD OVERVIEW, VISION & SCOPE OF WORK

### 2.1 IMD OVERVIEW

The IMD is a political subdivision, unit of local government, and body politic and corporate that was formed by an act of the Illinois State Legislature in 1941 (70 ILCS 915/0.01, *et seq.*), as amended from time to time (the “Act”) for the purpose of:

- 2.1.1 **Administering, developing and zoning property within the District to attract and retain academic centers of excellence, viable health care facilities, medical research facilities, and emerging high technology enterprises;**
- 2.1.2 **Attracting and facilitating both medically-related commerce and research and new business ventures for the economic vitality and general welfare of the District, the State of Illinois, Cook County, and the City of Chicago; and**
- 2.1.3 **Serving as the leader in patient care and medical research by utilizing its diversity and unique assets to drive economic growth**

The IMD includes 560 acres of medical research facilities, labs, a biotech business incubator, universities, raw land development areas and more than 40 healthcare related facilities located less than two miles from downtown on the near West Side of the City of Chicago. One of the largest medical districts in the U.S., the IMD is bounded by Congress Street on the north, Ashland Avenue on the east, Oakley Boulevard on the west, and the Union Pacific inter-modal yard on the south. The IMD is governed by a seven-member Board of Commissioners who work in concert with the IMD’s Executive Director to govern the District’s growth, development, and mission.

The IMD represents a valuable urban and economic development asset for the City, the County and the State, which up until recently has been underutilized and underleveraged. With 4 major medical institutions anchoring the District, two medical universities, medical research and health care industries, and a growing technology park, the IMD is unlike any other medical district in the U.S. and represents a rare opportunity for new growth and investment. To that end, the IMD has already seen a great re-investment by major stakeholders over the last decade, signaling clear growth and development in the area.

On a daily basis, the IMD holds 29,000 employees, 8,000 medical students, and 50,000 visitors; taken together, the size and daily population of the IMD approaches that of a mid-size urban city such as Evanston, Illinois. In addition, the IMD is surrounded by tens of thousands of permanent residents and hundreds of thousands of office workers and employees.

The IMD desires to enhance the District with new and complimentary development to further serve its mission. To support these efforts, the IMD commissioned studies which revealed that the IMD annually provides nearly \$3.5 billion to the local economy, ranking it as one of region’s major economic engines, on par with the annual impact of Chicago’s McCormick Place convention center and Navy Pier tourist destination.

The IMD has adopted a new strategic vision for its growth and development. That strategy includes establishing the IMD as a leading healthcare and technology innovation district. This vision includes development of the district to attract private sector investment and businesses, which will also assist the District in fostering economic growth of the surrounding area. The IMD will need qualified advisors and supportive personnel to assist with leveraging the capacity of public, private and civic networks in ways that foster research and technology development, transform physical infrastructure and grow the talent pipeline, including but not limited to securing diverse funding mechanisms, incentives to attract private sector stakeholders, development of strategic partnerships and implementing policies that encourage local hiring and community benefits.

This RFP provides an opportunity for qualified governmental affairs professionals to submit Proposals to assist the IMD in furtherance of its mission to fulfill become the country’s next great innovation district.



## 2.2 SCOPE OF WORK

Respondents, if selected, may be requested to perform some or all of the below listed services (the “Services”):

### Representation and Advocacy

- Representation of IMD before the County of Cook, Cook County Board of Commissioners, Cook County Health and Hospital Systems, and County administrative offices and departments;
- Representation of IMD before City of Chicago, City Council, City Council Committees, Alderman and City administrative departments;
- Representation of IMD before Illinois General Assembly and agencies, departments, employees and agents of the State of Illinois;
- Representation of IMD before United States Congress, the President of the United States, and all relevant federal agencies;

### Legislative Services

- **Monitor Legislation**
  - Identify bills that could impact IMD policy, operations, objectives, reputation, real estate and economic development efforts or financial condition;
  - Attend relevant committee hearings and advocate on the IMD’s behalf as necessary; Gather information on potential legislation from staff, legislators and third party interests; Identify potential allies and coalitions that could support IMD objectives
  - Evaluate which proposals are likely to advance;
  - Identify motives underlying legislation;
  - Compile weekly legislative tracking reports and end-of-session comprehensive analysis;
  - Monitor agencies and departments and propose rules, bills or legislation furthering IMD interests and objectives;
  - Analyze legislative and political climates and make suggestions for IMD action and strategic decisions
  - Identify adverse legislation at earliest stages and develop and implement strategy for early opposition and defense;
- **IMD Legislative Proposals** - Develop and implement strategy for IMD-focused legislation before legislative bodies in County, City, State, and federal government;
  - Monitor all local and federal policy initiatives, programs, and activity related to economic development within and surrounding the IMD;
  - Assist IMD in continuing to strengthen, maintain, and further engage with members of County, City, State and Federal public bodies to garner support of IMDC programs and endeavors;
  - Identify new possible funding sources for IMD objectives within the relevant City, State, and Federal granting private and governmental organizations, and private sector entities.

### General Services

- Act as a liaison to build strong public-private sector relationships.
- Provide regular updates and reports as directed.
- Provide crisis management as necessary.
- Shall assist, advise, and consult with IMD on other matters as requested from time to time.

## **SECTION 3 OFFER REQUIREMENTS**

### **3.1 RESPONDENT CONTACT**

Respondents must identify the Respondent Contact for the project and complete the form included in Exhibit A1 of the Responsibility Forms.

### **3.2 FORMAT**

Proposals shall be prepared on standard 8 and 1/2" x 11" letter size paper. Drawings, renderings, schedules, etc. requiring a larger format should be no larger than 11" x 17" size paper.

The proposal contents must be organized into separate sections according to the Proposal Contents Sections below for each submittal. The proposal sections must be clearly identified and separated with tabs.

### **3.3 RFP QUALITATIVE RESPONSE CONTENTS**

Each proposal must include the items listed below in the order they are listed. Portions of the proposal containing proprietary information may be designated as confidential information. Any confidential information must be clearly marked as CONFIDENTIAL. Please see Section 1.11 for additional information related to confidential materials.

#### **Title Page**

A page with a title and the name of the lead firm(s) submitting the proposal should be evident. The title should read: "Response to the IMD for Government Affairs and Legislative Advisory Services". It should be located on the top half of the page. The lead firm name(s) should be located on the bottom half of the page.

#### **Tab 1: Table of Contents**

A table of contents identifying, at a minimum, all sections below and page numbers

#### **Tab 2: Cover Letter**

A cover letter, not to exceed two pages in length, signed by an authorized representative of the Respondent that confirms the Respondent's understanding of the scope, opportunities, preliminary approach and the Respondent team's experience and unique expertise to perform and complete the engagement.

#### **Tab 3: Respondent Team, Experience and Qualifications**

Provide a narrative of the Respondent team including but not limited to the following:

- Descriptions of the members (firms and key individuals) of the Respondent team, identification of the individuals from each firm that will have project responsibility, their years of experience, their experience on similar engagements and their pertinent qualifications. Include current resumes for the team members of each firm that will have project responsibility. Please identify Respondent's key contact personnel for communicating with IMD on all engagement related matters. Respondent should list the ownership structure of each the Respondent entity, its principal owners and its officers and executive management.
- Please provide a listing and description of at least five (5) engagements completed by Respondent in the last three (3) years that demonstrate the Respondent's experience in providing services similar to the Services for entities similar to IMD. Please include references for these engagements. Any particular experience with representing units of local government in Illinois, innovation districts, or healthcare service providers should be included.

Disclose any contractual or employee relationship which requires registering under the Lobbyist Registration Act.

#### **Tab 4: Engagement Approach and Strategy**

Respondent shall provide a detailed description of Respondent's plan for achieving the IMD objectives and fulfilling the scope of work described in this RFP.

**Tab 5: Financial, Bonding and Insurance Capacity**

Respondents must submit evidence of their financial capacity and insurance coverage to perform the Services. Respondent shall provide certificates of insurance evidencing Respondent's coverage for commercial, general and professional liability.

**Tab 6: Legal Actions, Inquiries, and Investigations**

Please list case numbers for and provide a brief description of all legal actions, and final disposition if applicable, of any matters within the past ten (10) years wherein any of the following entities or people were involved:

- the applicant
- any officer or director of the applicant
- any entity that owns more than 7.5% of the applicant
- any senior project manager who the applicant has designated to work on the project
- any person that can be attributed with an ownership interest of more than 7.5% of the applicant (including any person holding a beneficial interest in an entity that holds an ownership interest in the applicant) is or has been within the past ten (10) years:
  - in default on any loan or financing agreement at any time
  - debtor in bankruptcy at any time
  - defendant in any foreclosure action at any time
  - defendant in any lawsuit or administrative action, including, specifically any action for deficient performance under a contract
  - defendant in any criminal action at any time
  - defendant in any action at any time relating to financial matters or deficient contractual performance
- the subject of any government agency inquiry, investigation, or legal enforcement action or are currently subject to:
  - any liens
  - any unpaid judgments
  - payments under any order, decree or agreement with any federal, state or local entity.

By submitting a Response, if selected, you agree to permit the IMD to perform such background checks as the IMD deems reasonable at your sole cost and expense.

**Tab 7: Special Considerations**

This section is for the Respondent to describe any special situations, conditions and/ or circumstances that would be relevant to the proposed engagement, or to the financial condition of the Respondent or the Respondent's management team or leadership but has not been included in the Proposal so far because it did not fall under any category or respond to any language above under the Proposal Contents section of this RFP.

**Tab 8: Responsibility Forms**

The IMD has identified various information required to determine Respondents' eligibility to contract with the IMD and be considered a "Responsible" Vendor. Review each of the Responsibility forms in Exhibit A, fill in all relevant blanks and provide any requested information. Respondents must include all completed forms as part of your Proposal, including signatures where requested, or risk disqualification:

- A1: Respondent Contact
- A2: Business and Directory Information
- A3: Disclosures and Conflicts of Interest
- A4: Taxpayer Identification Form

### **3.4 PRICING/FEE PROPOSAL CONTENTS**

The Pricing Proposal shall include Respondent's proposed fees associated with the provision of the relevant Services. The IMD invites Respondents to provide innovative fee structures and possible alternative fee arrangements, including, but not limited to flat fee and incentive based structures in the place of traditional rates. The IMD reserves the right to negotiate pricing with any Respondent at any point during the RFP review and selection process and to obtain from Respondents revised and best and final offers.

## **SECTION 4 EVALUATION OF OFFERS**

### **4.1 EVALUATION COMMITTEE**

An Evaluation Committee ("EC") of no less than three (3) persons including assigned IMD staff, will review and evaluate the Proposals. The IMD reserves the right to enlist independent consultants to assist with the evaluation of all or any portion of a Proposal, as it deems necessary. The EC will first assess the Respondent's compliance with and adherence to the requirements of the solicitation. Any Proposal which is incomplete, missing key components necessary to fully evaluate the response, or which fails to meet the stated requirements, may be rejected from further consideration due to non-responsiveness. The IMD reserves the right to seek clarification of any information that is submitted by any Respondent in any portion of its Proposal or to request additional information at any time during the evaluation process. Any material misrepresentation made by a Respondent may void the Proposal and eliminate the Respondent from further consideration.

### **4.2 RFP RESPONSE EVALUATION CRITERIA**

The IMD will consider the following in evaluating Proposals:

#### **Team:**

- Respondent team composition, depth and qualifications
- Key personnel to be assigned to this project, their experience and the related roles and responsibilities to be assumed for the project
- Respondent team's overall diversity and M/WBE participation

#### **Related Experience and References:**

- General experience, history and performance of Respondent team
- Respondent's firm or team experience working with similarly-situated clients, particularly in the health care, health care services, biotechnology and health care integrated technology sectors
- References from prior engagements

**Approach and Strategy:** Respondent's plan for fulfilling the RFP Scope of Services

#### **Pricing**

Deficient Proposals may receive reduced evaluation scores or may be rejected in their entirety.

### **4.3 SHORTLIST PROCESS AND PRESENTATIONS**

The EC, after completing its review of the RFP responses, may develop a "shortlist" of Respondents who will be invited to deliver oral, in-person presentations to the EC. The shortlisted Respondents will be advised of the content and format of the presentations at the appropriate time.

#### **4.4 FINAL APPROVAL**

The IMD, in its sole and absolute discretion, may select the shortlisted Respondent(s) whose Proposals are considered the best of those submitted and with whom the IMD is able to negotiate fair and reasonable terms. Please note that the IMD may select one or any combination of the Respondents to perform any or any component of the Services. The IMD, may, accordingly, negotiate and enter into different agreements with different Respondents for different components of the Scope of Work. The IMD may also not select any of the Respondent to perform the Services.

The IMD will attempt to negotiate fair and reasonable agreements with the selected Respondents. If the IMD cannot negotiate fair and reasonable agreements with the selected Respondents, the IMD may either issue a new request for proposal or enter into discussions with other Respondents or take any other action deemed fair and reasonable by the IMD. The IMD also reserves the right to make no selection as a result of this solicitation. IMD will determine the award by considering the Offer, the Respondent's qualifications and other relevant factors in the sole discretion of the IMD.

#### **4.5 SELECTION SCHEDULE**

Time is of the essence and the IMD will work diligently to ensure a timely selection process. The IMD reserves the right to adjust the timeframes and selection schedule to accommodate any possible deviations while ensuring a comprehensive and fair process.

**EXHIBIT A**

**A1: Respondent Contact**

Government Affairs and Legislative Advisory Professional Services: IMD 18-001

The undersigned authorized representative of the identified Respondent does hereby submit this Proposal to perform in full compliance with the subject solicitation. By completing and signing this Form, we are making an offer to the IMD that the IMD may accept. We are also certifying to compliance with the various requirements of the solicitation and the documents contained in the solicitation.

Respondent hereby certifies that no person or entity representing their Proposal has retained a person or entity to attempt to influence the outcome of a procurement decision made by the IMD pursuant to the IMD Procurement Policy for compensation contingent in whole or in part upon the decision or procurement.

**Respondent Contact Person:** The contact person for purposes of responding to any questions the IMD may have is:

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

\_\_\_\_\_  
(Respondent name and DBA)

\_\_\_\_\_  
(Signature of party authorized to bind the named Respondent)

\_\_\_\_\_  
Printed Name \_\_\_\_\_ Title \_\_\_\_\_

\_\_\_\_\_  
Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

## **A:2 Business and Directory Information**

- (a) Name of Business (Official Name and D/B/A)
- (b) Business Headquarters (include Address, Telephone and Facsimile)
- (c) If a Division or Subsidiary of another organization provide the name and address of the parent
- (d) Billing Address
- (e) Name of Chief Executive Officer
- (f) Customer Contact (include Name, Title, Address, Telephone, Toll-Free Number, Facsimile and E-mail)
- (g) Company website
- (h) Type of Organization (i.e., Sole Proprietor, Corporation, Partnership, etc. -- should be the same as on the Taxpayer ID form below)
- (i) Length of Time in Business
- (j) Annual Sales (for most recently completed Fiscal Year)
- (k) Number of Full-Time Employees (average from most recent Fiscal Year)
- (l) Type of and description of business
- (m) State of incorporation, state of formation or state of organization
- (n) Identify and specify the location(s) and telephone numbers of the major offices and other facilities that relate to the Respondent's performance under the terms of this solicitation.



### A:3 DISCLOSURES AND CONFLICTS OF INTEREST

**Instructions:** Respondent shall disclose financial interests, potential conflicts of interest and contract information identified in Sections 1, 2 and 3 below as a condition of receiving an award or contract (30 ILCS 500/50-13 and 50-35). Failure to fully disclose shall render the contract, bid, proposal, subcontract, or relationship voidable by the chief procurement officer if s/he deems it in the best interest of the IMD and may be cause for barring from future contracts, bids, proposals, subcontracts, or relationships with the IMD.

A publicly traded entity may submit its 10K disclosure in satisfaction of the disclosure requirements set forth in Section 1 below. HOWEVER, if a Respondent submits a 10K, they still must complete Sections 2, 3, 4, 5 and 6 and submit the disclosure form.

If the Respondent is a wholly owned subsidiary of a parent organization, separate disclosures must be made by the Respondent and the parent. For purposes of this form, a parent organization is any entity that owns 100% of the Respondent.

This disclosure information is submitted on behalf of (show official name of Respondent, and if applicable, D/B/A and parent):

Name of Respondent: \_\_\_\_\_

D/B/A (if used): \_\_\_\_\_

Name of any Parent Organization: \_\_\_\_\_

#### **Section 1: Section 50-35 Disclosure of Financial Interest in the Respondent.** (All Respondent must complete this section)

Respondent must complete subsection (a), (b) or (c) below. Please read the following subsections and complete the information requested.

a. If Respondent is a Publicly traded corporation subject to SEC reporting requirements

i. Respondent shall submit their 10K disclosure (include proxy if referenced in 10k) in satisfaction of the financial and conflict of interest disclosure requirements set forth in subsections 50-35 (a) and (b) of the Procurement Code. The SEC 20f or 40f, supplemented with the names of those owning in excess of 5% and up to the ownership percentages disclosed in those submissions, may be accepted as being substantially equivalent to 10K.

Check here if submitting a 10k , 20f , or 40f .

**OR**

b. If Respondent is a privately held corporation with more than 400 shareholders

i. These Respondent may submit the information identified in 17 CFR 229.401 and list the names of any person or entity holding any ownership share in excess of 5% in satisfaction of the financial and conflict of interest disclosure requirements set forth in subsections 50-35 a and b of the Illinois Procurement Code.

**OR**

c. If Respondent is an individual, sole proprietorship, partnership or any other not qualified to use subsections (A) or (B), complete (i) and (ii) below as appropriate.

i. For **each individual** having any of the following financial interests in the Respondent (or its parent), please mark

each that apply and show the applicable name and address. Use a separate form for each individual.

1. Do you have an ownership share of greater than 5% of the offering entity or parent entity?

Yes  No

2. Do you have an ownership share of less than 5%, but which has a value greater than \$106,447.20?

Yes  No

3. If you responded yes to any of questions 1 – 4 above, please provide either the percentage or dollar amount of your ownership or distributive share of income: 100%. For partnerships with more than 50 partners, the percentage share of ownership of each individual identified above may be shown in the following ranges (dollar value fields must also be completed when applicable):

0.5% or less \_\_\_\_\_ >0.5 to 1.0% \_\_\_\_\_ >1.0 to 2.0% \_\_\_\_\_ >2.0 to 3.0 % \_\_\_\_\_ > 3.0 to 4.0% \_\_\_\_\_ % >4.0 to 5.0% \_\_\_\_\_ and in additional 1% increments as appropriate \_\_\_\_\_ %

4. If you responded yes to any of the questions 1-4 above, please check the appropriate type of ownership/distributable income share:

Sole Proprietorship       Stock       Partnership       Other (explain) \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Section 2: Debarment/Legal Proceeding Disclosure** *(All Respondent must complete this section).*

Each of the persons identified in Sections 1, 2 and 3 must each identify any of the following that occurred within the previous 10 years:

Debarment from contracting with any governmental entity	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Professional licensure discipline	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Bankruptcies	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Adverse civil judgments and administrative findings	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Criminal felony convictions	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If any of the above is checked yes, please identify with descriptive information the nature of the debarment and legal proceeding. The IMD reserves the right to request more information, should the information need further clarification.

**Section 3: Current and Pending Contracts** *(All Respondent must complete this section).*

Does the Respondent have any contracts pending contracts, bids, proposals or other ongoing procurement relationships with units of State of Illinois government? Yes  No

If yes, please identify each contract, pending contract, bid, proposal and other ongoing procurement relationship it has with units of State of Illinois government by showing agency name and other descriptive information such as bid number, project title, purchase order number or contract reference number.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 4: Representative Lobbyist/Other Agent** (All Respondent must complete this section).

Is the Respondent represented by or employing a lobbyist required to register under the Lobbyist Registration Act or other agent who is not identified under Sections 1 and 2 and who has communicated, is communicating, or may communicate with any State officer or employee concerning the bid, offer or contract?

Yes  No

If yes, please identify each agent / lobbyist, including name and address.

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Costs/Fees/Compensation/Reimbursements related to assistance to obtain contract (describe):

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Respondent certifies that none of these costs will be billed to the IMD in the event of contract award.

This Disclosure information is submitted on behalf of: \_\_\_\_\_  
(Respondent/Subcontractor Name)

Name of Authorized Representative: \_\_\_\_\_  
Title of Authorized Representative: \_\_\_\_\_  
Signature of Authorized Representative: \_\_\_\_\_  
Date: \_\_\_\_\_

**A4: TAXPAYER IDENTIFICATION NUMBER**

I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).
  - If you are an individual, enter your name and SSN as it appears on your Social Security Card.
  - If you are a sole proprietor, enter the owner's name on the name line followed by the name of the business and the owner's SSN or EIN.
  - If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's name on the name line and the d/b/a on the business name line and enter the owner's SSN or EIN.
  - If the LLC is a corporation or partnership, enter the entity's business name and EIN and for corporations, attach IRS acceptance letter (CP261 or CP277).
  - For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.

**Name:** \_\_\_\_\_

**Business Name:** \_\_\_\_\_

**Taxpayer Identification Number:** \_\_\_\_\_

Or Social Security Number \_\_\_\_\_

**Legal Status** (check one):

- |  |   |
|--|---|
| <input type="checkbox"/> Individual  | <input type="checkbox"/> Governmental   |
| <input type="checkbox"/> Sole Proprietor   | <input type="checkbox"/> Nonresident alien  |
| <input type="checkbox"/> Partnership   | <input type="checkbox"/> Estate or trust  |
| <input type="checkbox"/> Legal Services Corporation  | <input type="checkbox"/> Pharmacy (Non-Corp.)   |
| <input type="checkbox"/> Tax-exempt  | <input type="checkbox"/> Pharmacy/Funeral Home/Cemetery (Corp.)                           |
| <input type="checkbox"/> Corporation providing or billing medical and/or healthcare services     | <input type="checkbox"/> Limited Liability Company (select applicable tax classification) |
| <input type="checkbox"/> Corporation NOT providing or billing medical and/or healthcare services | <input type="checkbox"/> D = disregarded entity   |
|  | <input type="checkbox"/> C = corporation  |
|  | <input type="checkbox"/> P = partnership  |

**How did you learn about this RFP?**

- IMD website
- Search Engine
- Word of mouth
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Other

Signature: \_\_\_\_\_

Date: \_\_\_\_\_