



New Jersey Schools Insurance Group
6000 Midlantic Drive, Suite 300 North
Mount Laurel, New Jersey 08054
www.njsig.org

Request for proposal: C-2023-0001

For: Workers' compensation
managed care services

Event	Date
Procurement posted:	3/24/2023
Questions regarding the procurement must be submitted:	4/7/2023
Answers regarding the procurement will be posted:	4/14/2023
Procurement proposals due:	5/5/2023
NJSIG Board of Trustees approval:	5/17/2023

Dates are subject to change. All changes will be reflected in addenda to the procurement posted on the NJSIG website.

Table of Contents

1	Information for proposers	4
1.1	Purpose and intent	4
1.2	Organizational background	4
1.3	Background for the requested proposal	5
1.4	Scope of work	7
1.5	HIPAA and BBA compliance.....	11
1.6	Questions regarding the requested proposal.....	11
1.7	Addenda.....	11
1.8	Proposer responsibility	12
1.9	Cost liability.....	12
1.10	Contents of proposal	12
1.11	Price alteration	13
1.12	Proposal errors.....	13
1.13	Joint venture.....	14
1.14	Definitions.....	14
1.14.1	General definitions	14
1.14.2	Contract specific definitions	15
2	Proposal preparation and submission.....	15
2.1	Method of submission of proposal	15
2.2	Effect of submission of proposal	16
2.3	Time for submission of proposal	16
2.4	Mandatory contents of proposal	16
2.4.1	Fee proposal.....	17
2.5	Technical proposal	18
2.5.1	Executive summary	18
2.5.2	General Information	19
2.5.3	Organization profile and experience.....	19
2.5.4	Qualifications and Experience	20
2.5.5	Compliance information and forms.....	21
2.5.5.1	Ownership disclosure form	21

2.5.5.2	Business Registration.....	22
2.5.5.3	Disclosure of Investment Activities in Iran, Russia, or Belarus	23
2.5.5.4	Mandatory Equal Employment Opportunity Language	23
2.5.5.5	Record retention	25
3	Special contractual terms and conditions	25
4	Proposal evaluation	31
4.1	Selection criteria for competitive contracting.....	31
4.2	Evaluation Committee	36
4.3	Interview	36
5	Contract award.....	37
6	Contract administration	37
7	Exhibits.....	37
7.1	Pricing List by CPT Code & Location.....	37
7.3	Nurse Case Manager Questionnaire.....	37
7.4	PPO Network Questionnaire.....	37
7.5	Ownership Disclosure Form.....	37
7.6	Business Registration Form.....	37
7.7	Disclosure of Investment Activities in Iran, Russia, or Belarus	37
7.8	Mandatory Equal Employment Opportunity form AA302.....	37
7.9	Sample Certificate of Employee Information Report (pursuant to N.J.A.C. 17:27-1.1 et seq.).....	37
7.10	Public Law 2005, Chapter 271 Vendor Certification and Disclosure Form	37

1 Information for proposers

1.1 Purpose and intent

The New Jersey Schools Insurance Group (“NJSIG”) is seeking proposals from proposers interested in providing workers’ compensation managed care services. Your organization is invited to submit a proposal.

This solicitation is conducted in a fair and open process in accordance with the requirements for competitive contracting under the Public School Contracts Law, N.J.S.A. 18A:18A-1, et seq. This solicitation is specifically seeking proposals from qualified organizations that desire to provide workers’ compensation managed care services for NJSIG, within the Scope of Work described below.

1.2 Organizational background

NJSIG is a public entity insurance group, also known as a government risk pool, established in accordance with P.L. 1983, c. 108, that provides insurance coverage and risk management services to member school districts.

The concept of pooling is one whereby public entities can join together to provide protection from risks on a group basis. As a school board insurance group, NJSIG is governed by a Board of Trustees which is comprised of school board members, superintendents and business administrators from NJSIG member districts.

By joining NJSIG, members collectively attain benefits not possible individually and pool their premiums into a common fund to be used for the benefit of all member districts. NJSIG is comprised of approximately four hundred boards of education and charter school districts, and offers members a cost-effective method of obtaining coverage for all property and casualty lines, including but not limited to: workers’ compensation, general liability, automobile liability, excess liability, property, error and omissions, crime, electronic data processing, environmental liability, equipment breakdown, and auto physical damage coverage. NJSIG provides claims administration, underwriting and loss control services for members.

1.3 Background for the requested proposal

NJSIG seeks to engage an organization to provide workers' compensation managed care services that can arrange for the provision of appropriate and high quality medical care for injured workers of member insureds. Currently, NJSIG manages its workers' compensation program using a hybrid outsourced model. Under this model, NJSIG performs the following functions:

- Provides primary program administration and oversight;
- Determines compensability;
- Manages disability and lost time payments;
- Manages litigation;
- Interfaces with members on return-to-work programs; and
- Manages a contract with a managed care organization ("MCO").

The managed care organization ("MCO") supports NJSIG's workers' compensation operations by providing:

- A team of professional nurse case managers dedicated to NJSIG workers' compensation claims;
- A contracted provider network with discounts on service fees;
- Medical claim management, including protocol-based utilization review;
- An interface with medical care providers on claimant return-to-work program components;
- Repricing, adjudication and payment of provider bills with NJSIG reimbursement of provider payments; and
- Electronic access by NJSIG to all provider-maintained employee claimant medical records.

The objective of this RFP is to identify a proposer that will provide a managed care program that:

- Is certified by the Department of Banking and Insurance as a workers' compensation managed care organization approved by DOBI in accordance with N.J.A.C. 11:61, et seq.
- Will provide a dedicated team of professional nurse case managers to handle NJSIG workers' compensation lost time claims;
- Has a DOBI certified provider network access for all compensable medical claims medical management of claims including a provider program to support claimant return to work;
- Medical bill repricing for all NJSIG workers' compensation medical only and lost time claims.

The following table illustrates the past levels of NJSIG workers' compensation claim activity in which managed care was utilized:

NJSIG Workers' Compensation Program Claim Activity 2018 to 2022		
Year	Reported Medical Only Claims with managed care	Reported Lost Time Claims with managed care
2018	3,500	736
2019	3,421	750
2020	1,442	314
2021	2,183	514

NJSIG Workers' Compensation Program Claim Activity 2018 to 2022		
Year	Reported Medical Only Claims with managed care	Reported Lost Time Claims with managed care
2022	3,096	660

1.4 Scope of work

The proposer shall provide workers' compensation managed care services to NJSIG insured's employees receiving benefits compensable under the State of New Jersey's Workers' Compensation Act.

The proposer shall provide the following services:

- 1) Obtain certification as a MCO in the State of New Jersey by the Department of Banking and Insurance;
- 2) Ensure capacity to provide managed care services for all NJSIG workers' compensation claims;
- 3) Provide managed care services for all workers' compensation claims reported on and after the effective date of this contract;
- 4) Loss intake and first report of injury for all NJSIG workers' compensation claims including:
 - a. 24/7-available 1-800 telephone number for reporting of claims; and
 - b. Directing claimants to an appropriate network provider if care is needed; and
 - c. Collecting all required claimant demographic information, including but not limited to: claimant name, address, phone number, work hours and email address; and

- d. Scheduling follow-up appointments for claimants treated at an emergency room.
 - e. Note: as outlined in the Fee Proposal, Section 2.4.1, proposers are also invited to provide alternate pricing that excludes this loss intake and first report of injury function.
- 5) Provide NJSIG direct access to a representative who will be available for consultation through phone and email;
 - 6) Ability to report loss intake information to NJSIG via electronic data interchange, facsimile transmission or secure electronic mail;
 - 7) Reprice and negotiate provider bills with NJSIG payment of the repriced provider bills for all medical only and lost time claims from the date the claim is opened until the closure of the claim. In repricing bills, proposers must also review the relevant medical notes in order to confirm that the billed treatment code is both consistent with the records and related to the work injury. The MCO must also respond to any inquiries for an explanation of benefits or payments;
 - 8) Regularly provide updated contact lists of all participating providers, which lists are continuously updated and reviewed for accuracy.
 - 9) Assign a professional nurse case manager to each lost time claim who will handle each lost time claim from the date the claim is opened until the closure of the claim;
 - a. Secure immediate, real-time access to the managed care treatment plan is required, including, but not limited to:
 - i. physician narrative reports;
 - ii. physician office notes;
 - iii. hospital treatment records;
 - iv. operative reports;
 - v. anesthesiology/pain management reports;
 - vi. diagnostic studies, including, but not limited to:

1. x-ray reports;
 2. magnetic resonance imaging (MRI) results;
 3. electromyography (EMG) results;
 4. electrocardiogram (EKG) and nerve conduction study results;
- vii. physiotherapy notes, psychiatric/psychological records, and any notes of the individual, assigned by the proposer, responsible for authorizing treatment, determining reasonableness of the treatment frequency of treatment, e.g.
- 10) On each lost time claim, the proposer shall provide a program for working with network providers on a claimant's return-to-work;
- 11) Proposers shall provide medical status updates for all medical appointments attended by claimants within forty-eight (48) hours of the appointment;
- 12) Proposers shall provide monthly updates regarding the status of all handled claims, including in-person meetings if necessary;
- 13) Should a proposer other than the current provider be successful, then that proposer must have the ability to migrate NJSIG's claim data from the current provider to their system, and must have the ability to handle all run-off claims;
- 14) All proposers must also detail their disaster recovery and continuity of service plans.
- 15) All proposers must provide a total of eight samples of redacted, repriced medical bills from the hospitals and in the amounts specified below:
- a. Capital Health Regional Medical Center, 750 Brunswick Avenue, Trenton, NJ 08638:
 - 1) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 2) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and

- b. AtlantiCare Regional Medical Center - Mainland Campus, Jimmie Leeds Road, Pomona, NJ 08240 or Atlantic City Campus, 1925 Pacific Avenue, Atlantic City, New Jersey 08401:
 - 3) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 4) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and
- c. Cooper Hospital UMC, One Cooper Plaza, Camden, NJ 08103:
 - 5) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 6) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and
- d. RWJ University Hospital, 1 RWJ Place, New Brunswick, NJ 08901:
 - 7) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 8) sample redacted, repriced medical bill where original medical bill was less than \$100,000.

By submitting a proposal and providing sample repriced and redacted medical bills, the proposer agrees to abide by all applicable laws and regulations governing the use of de-identified records, including, but not limited to the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and 45 C.F.R. 164.514.

- 16) Contract term: The term of the contract made pursuant to this RFP will be for no more than 60 months (five years). NJSIG does not guarantee any minimum or maximum volume activities. NJSIG reserves the right to hold any claims in-house.
- 17) All proposers must agree that their proposal conforms to the minimum requirements set forth above.

NOTE: The following forms are attached to this RFP as exhibits and must be completed for a proposal to be considered responsive:

- Exhibit 7.1 Pricing List by CPT Code & Location
- Exhibit 7.2 Sample Repriced, Redacted Medical Bills Checklist
- Exhibit 7.3 Nurse Case Manager Questionnaire
- Exhibit 7.4 PPO Network Questionnaire

1.5 HIPAA and BBA compliance

The proposer shall, at all times, in performance of this contract, ensure that it maintains compliance with the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Balanced Budget Act (BBA) of 1997 governing the protection of patient information. Such regulatory compliance shall include the secure transmission of all personal, confidential information, and the erasure and deletion of all personal, confidential information that may be contained on all personal computers and their drives prior to the disposal, or any other disposition that may be required, of such informational technology equipment as per requirements as set forth by the US Department of Defense (DoD) 5220.22-M Standard.

1.6 Questions regarding the requested proposal

NJSIG will accept questions and inquiries from all potential proposers electronically via its website. Questions should be directly tied to the RFP and asked in consecutive order, from beginning to end, following the organization of the RFP. Each question should begin by referencing the RFP page number and section number to which it relates. Proposers are not to contact NJSIG personnel directly, in person, by telephone or by email, concerning this RFP. The cut-off date for electronic questions and inquiries relating to this RFP is indicated on the cover sheet. Any questions received after that date will not be accepted. Answers to questions submitted regarding this RFP, if any, will be posted on the NJSIG website on the date on the cover sheet.

Any proposer that requires a custom questionnaire be completed by NJSIG before submitting a proposal should submit their questionnaire to rfp@njsig.org. The cut-off date for the submission of a questionnaire relating to this RFP is indicated on the cover sheet. Any questionnaires received after that date will not be accepted. Answers to questionnaires relating to this RFP, if any, will be returned to the proposer that submitted the questionnaire on the date indicated on the cover sheet.

1.7 Addenda

In the event that it becomes necessary to clarify or revise this RFP, such clarification or revision will be by addendum. Any addendum to this RFP will become part of this RFP and part of any contract awarded as a result of this RFP. All RFP addenda will be issued on the NJSIG web site, and notification will be published.

There are no designated dates for release of addenda. Therefore interested proposers should check the NJSIG website on a daily basis from time of RFP issuance through proposal opening. In the event that an addendum is published after the receipt of a proposal, the proposer will be notified via a method of delivery that provides certification of delivery.

1.8 Proposer responsibility

The proposer assumes sole responsibility for the complete effort required in submitting a proposal in response to this RFP. No special consideration will be given after proposals are opened because of a proposer's failure to be knowledgeable as to all of the requirements of this RFP.

1.9 Cost liability

NJSIG assumes no responsibility and bears no liability for costs incurred by a proposer in the preparation and submittal of a proposal in response to this RFP.

1.10 Contents of proposal

Subsequent to proposal opening, all information submitted by proposers in response to the proposal solicitation is considered public information, except as may be exempted from public disclosure by the Open Public Records Act, N.J.S.A. 47:1A-1, et seq., and the common law. Proposals will not be made public until the NJSIG Board of Trustees has awarded a contract.

A proposer may designate specific information as not subject to disclosure when the proposer has a good faith legal/factual basis for such assertion. NJSIG reserves the right to make the determination and will advise the proposer accordingly. The location in the proposal of any such designation should be clearly stated in a cover letter. NJSIG will not honor any attempt by a proposer either to designate its entire proposal as proprietary and/or to claim copyright protection for its entire proposal.

By submitting a proposal in response to this RFP, the proposer waives any claims of copyright protection set forth within the manufacturer's price list and/or catalogs.

1.11 Price alteration

Proposal prices must be typed or written in ink. Any price change must be initialed. Failure to initial price changes shall preclude a contract award from being made to the proposer.

1.12 Proposal errors

A proposer may request that its proposal be withdrawn prior to proposal opening. Such request must be made, in writing, to the Director. If the request is granted, the proposer may submit a revised proposal as long as the proposal is received prior to the announced date and time for proposal opening and at the place specified.

If, after proposal opening but before contract award, a proposer discovers an error in its proposal, the proposer may make written request to the Director for authorization to withdraw its proposal from consideration for award. Evidence of the proposer's good faith in making this request shall be used in making the determination. The factors that will be considered are that the mistake is so significant that to enforce the contract resulting from the proposal would be unconscionable; that the mistake relates to a material feature of the contract; that the mistake occurred notwithstanding the proposer's exercise of reasonable care; and that NJSIG will not be significantly prejudiced by granting the withdrawal of the proposal.

All proposal withdrawal requests must include the proposal identification number and the final proposal opening date and sent to the address listed under "Method of submission of proposal."

If during a proposal evaluation process, an obvious pricing error made by a potential contract awardee is found, the Director shall issue written notice to the proposer. The proposer will have five days after receipt of the notice to confirm its pricing. If the proposer fails to respond, its proposal shall be considered withdrawn, and no further consideration shall be given it. If it is discovered that there is an arithmetic disparity between the unit price and the total extended price, the unit price shall prevail. If there is any other ambiguity in the pricing other than a disparity between the unit price and extended price and the proposer's intention is not readily discernible from other parts of the proposal, the Director may seek clarification from the proposer to ascertain the true intent of the proposal.

1.13 Joint venture

If a joint venture is submitting a proposal, the agreement between the parties relating to such joint venture should be submitted with the joint venture's proposal. Authorized signatories from each party comprising the joint venture must sign the proposal. Separate compliance forms must be supplied for each party to a joint venture.

1.14 Definitions

1.14.1 General definitions

Addendum – Written clarification or revision to this RFP issued by NJSIG.

All-Inclusive Hourly Rate – An hourly rate comprised of all direct and indirect costs including, but not limited to: overhead, fee or profit, clerical support, travel expenses, per diem, safety equipment, materials, supplies, managerial support and all documents, forms, and reproductions thereof. This rate also includes portal-to-portal expenses as well as per diem expenses such as food.

Amendment – A change in the scope of work to be performed by the proposer. An amendment is not effective until it is signed by the Executive Director, or a Manager of, NJSIG.

Proposer – An individual or business entity submitting a proposal in response to this RFP.

Contract – This RFP, any addendum to this RFP, and the proposer's proposal submitted in response to this RFP, as accepted by NJSIG.

Director – Executive Director, NJSIG.

Committee – A committee established by the Director to review and evaluate proposals submitted in response to this RFP and to recommend a contract award to the Director.

Firm Fixed Price – A price that is all-inclusive of direct cost and indirect costs, including, but not limited to, direct labor costs, overhead, fee or profit, clerical support, equipment, materials, supplies, managerial (administrative) support, all documents, reports, forms, travel, reproduction and any other costs. No additional fees or costs shall be paid by NJSIG unless there is a change in the scope of work.

Joint Venture – A business undertaking by two or more entities to share risk and responsibility for a specific project.

May – Denotes that which is permissible, not mandatory.

Project – The undertaking or services that are the subject of this RFP.

Request for Proposal (“RFP”) – This document which establishes the proposal and contract requirements and solicits proposals to meet the purchase needs of NJSIG as identified herein.

Shall or Must – Denotes that which is a mandatory requirement. Failure to meet a mandatory requirement will result in the rejection of a proposal as materially non-responsive.

Should – Denotes that which is recommended, not mandatory.

1.14.2 Contract specific definitions

MCO – Managed care organization.

Nurse case manager – A professional that at a minimum is a licensed registered nurse experienced in managing workers’ compensation claims. Nurse case manager caseloads should be between 50 and 75, but shall not in any event exceed 100.

PPO – Preferred provider organization.

Run-off – Existing workers’ compensation claims that NJSIG has assumed responsibility for from an organization or program.

2 Proposal preparation and submission

2.1 Method of submission of proposal

Submit one paper copy, clearly marked as “COPY,” plus an original electronic copy, clearly marked as “ORIGINAL,” via NJSIG’s [website](#). Signatures must be official handwritten signatures in ink. The electronic copy of the proposal must be in portable document format (“.pdf”). The maximum file size for each .pdf is ten (10) megabytes. The maximum number of files in a submission is ten (10). The proposal must be addressed to:

Request for Proposal Number C-2023-0001
New Jersey Schools Insurance Group
6000 Midlantic Drive
Suite 300 North
Mount Laurel, NJ 08054

Proposals submitted via any other method, including facsimile or electronic mail will not be accepted.

2.2 Effect of submission of proposal

Submission of a proposal will not bind or otherwise obligate NJSIG to retain the proposer.

2.3 Time for submission of proposal

In order to be considered for award, the proposal must be received by NJSIG by the method outlined above and by the required time. Any proposal not received by the cutoff date on the cover page of this RFP may be rejected. Proposals must be received by 11:00 a.m. on the date indicated on the cover sheet.

Proposers using any delivery service should allow additional time for delivery, as the proposal must be received by the cutoff date and time.

Proposals will be opened at 5:00 p.m. on the cutoff date.

2.4 Mandatory contents of proposal

The proposal should be submitted in one volume and that volume divided into six (6) sections with tabs (separators), and the content of the material located behind each tab, as follows:

Section 1 – Fee Proposal (Section 2.4.1)

Section 2 – Executive summary (Section 2.5.1)

Section 3 – General Information (Section 2.5.2)

Section 4 – **Error! Reference source not found.** (Section 2.5.3**Error! Reference source not found.**)

Section 5 – Qualifications and Experience (Section 2.5.4)

Section 6 – Compliance information and forms (Section 2.5.5)

2.4.1 Fee proposal

- A fee proposal –Fee proposals are requested for the completion of this project based on a term of no more than 60 months (five years), and can be submitted for one or more of the following:

a. Including loss intake and first report of injury via a 24/7-available 1-800 telephone number, as well as direction to an appropriate network provider, if care is needed:

i. For purposes of accurate proposal comparison, and ease of administration, NJSIG requires that fee proposals be stated on the following basis:

ii. Flat fees.

Flat fee for a single medical only claim	Flat fee for a single lost time claim	Flat fee for a single “run-off” claim
\$	\$	\$

iii. Any additional fees.

b. Excluding loss intake, first report of injury, and direction to a care provider during intake;

i. For purposes of accurate proposal comparison, and ease of administration, NJSIG requires that fee proposals be stated on the following basis:

ii. Flat fees.

Flat fee for a single medical only claim	Flat fee for a single lost time claim	Flat fee for a single “run-off” claim
\$	\$	\$

iii. Any additional fees.

- c. In addition to the standard method required above, NJSIG invites proposers to assess the needs expressed and offer alternative pricing proposals. Before putting forth any alternatives, please confirm that such alternatives are permissible for school board insurance groups and public entities operating in the State of New Jersey.
- d. Proposers shall warrant that all negotiated prices for medical bills are valid for a minimum of thirty (30) days from the date the negotiated price is received by NJSIG.
- e. There shall be no fee or cost for re-opening a previously closed claim.

2.5 Technical proposal

In this Section, the proposer shall describe its approach and plans for accomplishing the work outlined in the Scope of Work Section. The proposer must set forth its understanding of the requirements of this RFP and its ability to successfully complete the contract. This Section of the proposal should contain at least the following information:

2.5.1 Executive summary

An executive summary of not more than three pages identifying and substantiating why the proposer is best qualified to provide the requested services.

2.5.2 General Information

The Response must detail the organization's experience, personnel, proposed scope and approach, and any other relevant information as set forth in greater detail below.

All portions of this RFP and the Response are considered to be part of the Professional Services Agreement and will be incorporated by reference therein.

All the requirements in the Mandatory Contents of Proposal, Section **Error! Reference source not found.**, must be complied with in order for the Response to be considered responsive to this RFP and complete.

A Response must evidence ability to protect NJSIG from errors and omissions. The Respondent(s) must present evidence of current insurance in the form of a Certificate of Insurance or a letter from its insurance broker that the specific Professional Liability Insurance required by this RFP can be obtained. The Response must include the requested evidence of insurance and financial capacity as indicated.

2.5.3 Organization profile and experience

As a minimum, it is preferred the proposer have ten years' experience with providing workers' compensation managed care services to public entities in the State of New Jersey. The proposer must demonstrate a high degree of knowledge of the operation of local governmental units in the State of New Jersey. The proposer must also:

- Indicate the date your organization was established.
- Describe the services provided by your organization.
- Identify the number of employees in your organization. Indicate any special training or experience members of your organization possess that may assist in providing the requested services.
- Describe the participation of women and minorities in your organization. Please note the number of women partners and associates and minority partners and associates and indicate the percentage of your organization that is owned by women and by minorities.
- Provide a description of your organization's presence in New Jersey. Note the location of each office, the number of employees resident in each office.

- Identify any public entities, boards of education, educational service commissions, charter schools, or other school entities to which your organization has provided services during the last ten (10) years, generally and specifically with respect to each specialty area where consideration is requested. For each matter, provide the name of the public entity, department or authority, a description of the matter, the dates of engagement and the name and contact information of the public entity employee responsible for overseeing the work of your organization on that matter.
- Indicate the amount of professional malpractice insurance coverage which you carry, the amount of any self-retention and the name of the carrier.
- Describe your organization's approach to maintaining responsive communication with NJSIG and keeping NJSIG informed of problems and progress.
- Provide a representative listing of your organization's major private and public sector clients.
- Provide the name, address, telephone number, email address, and facsimile number for the designated contact person in your organization.

2.5.4 Qualifications and Experience

- Please indicate what percentage of your organization's business is in providing workers' compensation managed care services to public entities in the State of New Jersey.
- Describe your organization's experience in providing workers' compensation managed care services to public entities in the State of New Jersey.
- State the qualifications and experience of the employees proposed to staff the work assigned. For each member of your organization that would be involved in handling the work detailed in this request for proposals, provide a detailed resume including information as to:
 - Education, including advanced degrees;

- Number of years engaged in the designated practice area;
- General work experience; and
- Area(s) of specialization.

2.5.5 Compliance information and forms

As a school board insurance group, NJSIG is subject to the Public School Contracts Law (“PSCL”), (N.J.S.A. 18A:18A-1 et seq.), N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43), as well as other statutes and regulations governing public contracting in the State of New Jersey. As such, the following compliance information must be included in any contract with NJSIG.

For a summary of the forms and documentation required to be submitted to NJSIG by the PROPOSER, see the “CHECKLIST OF REQUIRED DOCUMENTS AND FORMS” at the end of this section.

2.5.5.1 Ownership disclosure form

Pursuant to N.J.S.A. 52:25-24.2, “No corporation, partnership, or limited liability company shall be awarded any contract nor shall any agreement be entered into for the performance of any work or the furnishing of any materials or supplies, the cost of which is to be paid with or out of any public funds, by the State, or any county, municipality or school district, or any subsidiary or agency of the State, or of any county, municipality or school district, or by any authority, board, or commission which exercises governmental functions, unless prior to the receipt of the bid or accompanying the bid, of said corporation, said partnership, or said limited liability company there is submitted a statement setting forth the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. If one or more such stockholder or partner or member is itself a corporation or partnership or limited liability company, the stockholders holding 10 percent or more of that corporation’s stock, or the individual partners owning 10 percent or greater interest in that partnership, or the members owning 10 percent or greater interest in that limited liability company, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of

every noncorporate stockholder, and individual partner, and member, exceeding the 10 percent ownership criteria established in this act, has been listed.”

Thus, in the event the proposer is a corporation, partnership or limited liability company, the proposer must complete the attached Ownership Disclosure Form. A current completed Ownership Disclosure Form must be received prior to or accompany the proposal. Failure to do so will preclude the award of a contract. The Ownership Disclosure Form is attached.

2.5.5.2 Business Registration

Failure to submit a copy of the proposer’s business registration certificate (or interim registration) from the Division of Revenue with the proposal may be cause for rejection of the proposal.

The requirement is a precondition to entering into a NJSIG contract.

Pursuant to N.J.S.A. 52:32-44, NJSIG (“Contracting Agency”) is prohibited from entering into a contract with an entity unless the bidder/proposer/contractor, and each subcontractor that is required by law to be named in a bid/proposal/contract has a valid Business Registration Certificate on file with the Division of Revenue and Enterprise Services within the Department of the Treasury.

Prior to contract award or authorization, the contractor shall provide the Contracting Agency with its proof of business registration and that of any named subcontractor(s).

Subcontractors named in a bid or other proposal shall provide proof of business registration to the bidder, who in turn, shall provide it to the Contracting Agency prior to the time a contract, purchase order, or other contracting document is awarded or authorized.

During the course of contract performance:

- (1) the contractor shall not enter into a contract with a subcontractor unless the subcontractor first provides the contractor with a valid proof of business registration.
- (2) the contractor shall maintain and submit to the Contracting Agency a list of subcontractors and their addresses that may be updated from time to time.
- (3) the contractor and any subcontractor providing goods or performing services under the contract, and each of their affiliates, shall collect and

remit to the Director of the Division of Taxation in the Department of the Treasury, the use tax due pursuant to the Sales and Use Tax Act, (N.J.S.A. 54:32B-1 et seq.) on all sales of tangible personal property delivered into the State. Any questions in this regard can be directed to the Division of Taxation at (609)292-6400. Form NJ-REG can be filed online at <http://www.state.nj.us/treasury/revenue/busregcert.shtml>.

Before final payment is made under the contract, the contractor shall submit to the Contracting Agency a complete and accurate list of all subcontractors used and their addresses.

Pursuant to N.J.S.A. 54:49-4.1, a business organization that fails to provide a copy of a business registration as required, or that provides false business registration information, shall be liable for a penalty of \$25 for each day of violation, not to exceed \$50,000, for each proof of business registration not properly provided under a contract with a contracting agency.

2.5.5.3 Disclosure of Investment Activities in Iran, Russia, or Belarus

Pursuant to N.J.S.A. 52:32-58, N.J.S.A. 52:32-60.1, N.J.S.A. 18A:18A-49.5 and N.J.S.A. 18A:18A-49.4, the proposer must certify that neither the proposer, nor any of its parents, subsidiaries, and/or affiliates (as defined in N.J.S.A. 52:32-56(e) (3)), is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran or on the Entities Engaged in Prohibited Activities Under C.52:32-60.1 list. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. The C.52:32-60.1 list is found on the Division's website at <https://www.nj.gov/treasury/administration/pdf/RussiaBelarusEntityList.pdf>. The required form is attached. The requirement is a precondition to entering into a NJSIG contract.

2.5.5.4 Mandatory Equal Employment Opportunity Language

Pursuant to N.J.S.A. 10:5-31 et seq. (P.L. 1975, c. 127) and N.J.A.C. 17:27 (mandatory equal employment opportunity language for goods, professional service and general service contracts), during the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national

origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related

testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.

2.5.5.5 Record retention

Pursuant to N.J.A.C. 17:44-2., PROPOSER shall maintain all documentation related to the products, transactions or services under this contract for a period of five years from the date of final payment. Such records shall be made available to the New Jersey Office of the State Comptroller upon request.

3 Special contractual terms and conditions

The following language shall be included in all contracts with NJSIG. The following provisions are not negotiable, and by submitting a proposal SERVICE PROVIDER

consents to the inclusion of these terms in any contract between SERVICE PROVIDER and NJSIG:

SERVICE LEVEL AGREEMENT. SERVICE PROVIDER shall provide priority support and service to NJSIG including all items set forth in the scope of services for RFP C-2023-0001, which is incorporated by reference.

INDEMNIFICATION. SERVICE PROVIDER shall indemnify, defend and hold NJSIG, its Board of Trustees, appointed officials and member districts harmless from any and all claims or liabilities arising out of the activities of the SERVICE PROVIDER, its employees and agents in connection with all activities undertaken by the SERVICE PROVIDER, pursuant to this Agreement. It is the intention of the parties that any claim for relief of any type being asserted against NJSIG, its Board of Trustees, appointed officials and member districts, based upon any act or omission of the SERVICE PROVIDER, its affiliates and successors, shall be the responsibility of the SERVICE PROVIDER, and the SERVICE PROVIDER shall hold NJSIG harmless from same.

INSURANCE. SERVICE PROVIDER shall provide, at its own cost and expense, proof of the following minimum insurance written through A rated Carrier to NJSIG of Workers' compensation and employers' liability insurance, as follows:

- a. Statutory workers' compensation including occupational disease in accordance with the laws of the State of New Jersey covering all individuals assigned to work on this contract;
- b. Employers' liability insurance with minimum limits of \$1,000,000.00 each accident limit for bodily injury by accident, \$1,000,000.00 policy limit for bodily injury by disease;
- c. Commercial general liability insurance with limits of not less than \$1,000,000 each occurrence / \$2,000,000 aggregate, and errors and omissions (E&O) insurance with limits of \$1,000,000 per claim / \$5,000,000 aggregate, covering work performed by SERVICE PROVIDER and by SERVICE PROVIDER employees during the term of this Agreement;
- d. A crime policy protecting against employee dishonesty, theft, robbery, forgery and other dishonest acts on the part of SERVICE PROVIDER and its employees, with limits not less than \$1,000,000.00;

The insurance companies selected by SERVICE PROVIDER to provide the above coverages must be licensed, solvent and acceptable to NJSIG. SERVICE PROVIDER shall not take any action to cancel or materially change any of the above insurance required under this Agreement without the NJSIG's approval. Maintenance of

insurance under this Section shall not relieve SERVICE PROVIDER of any liability greater than the insurance coverage.

BOND: If required by the by-laws or pursuant to N.J.A.C. 11:15-2, et seq., The SERVICE PROVIDER shall be bonded in a form and amount acceptable to NJSIG's governing body. Failure by the SERVICE PROVIDER to supply written evidence of these coverages shall result in default.

CONFIDENTIALITY: All financial, statistical, personnel and/or technical data supplied by NJSIG to the SERVICE PROVIDER are confidential. The SERVICE PROVIDER is required to use reasonable care to protect the confidentiality of such data. Any use, sale or offering of this data in any form by the SERVICE PROVIDER, or any individual or entity in the SERVICE PROVIDER's charge or employ, will be considered a violation of this contract and may result in contract termination and the SERVICE PROVIDER's suspension or debarment from NJSIG contracting. Any attempt by another party to obtain this data must be immediately communicated to NJSIG and NJSIG will determine whether the documents are subject to release. No data may be released without consent of NJSIG.

TERMINATION: NJSIG may terminate this Agreement, at any time during the term thereof by the giving of ninety (90) days written notice. The SERVICE PROVIDER may terminate this Agreement, at any time during the term thereof, by the giving of ninety (90) days written notice.

OWNERSHIP OF RECORDS: All records and data of any kind relating to NJSIG shall belong to NJSIG, and shall be surrendered to NJSIG upon expiration or termination of this Agreement. At all times during the term of this Agreement and for a period of five (5) years from the date of final payment, NJSIG, its appointed officials and other designated representatives, as authorized by NJSIG, shall have access to records and files maintained by the SERVICE PROVIDER for NJSIG during normal business hours. Furthermore, such records, books, and files relating to the operation and business of NJSIG are the property of NJSIG, regardless of site stored. Information released to the SERVICE PROVIDER by NJSIG for the purpose of performing the services as outlined herein shall be used only in connection with the performance of said duties. In addition, records must be made available to the state office of comptroller upon request.

PAYMENT: Payment shall be made in monthly installments (unless otherwise specified), provided the SERVICE PROVIDER submits a duly authorized invoice at least 20 days prior to the next regularly scheduled meeting of NJSIG's governing body. Final Payment will be withheld until the proposer's continued service is determined. If the proposer's contract will not be renewed or is terminated – final payment will not be

made until all provisions of the contract have been satisfied. This payment schedule is subject to any rules and regulations promulgated by the Department of Banking & Insurance and the Department of Community Affairs.

INDEPENDENT CONTRACTOR STATUS: The SERVICE PROVIDER at all times shall be an independent contractor, and employees of SERVICE PROVIDER shall in no event be considered employees of NJSIG. No agency relationship between the parties, except as expressly provided for herein, shall exist either as a result of the execution of this Agreement or performance there under.

ENTIRE AGREEMENT: This instrument contains the entire Agreement of the parties hereto and may not be amended, modified, released or discharged, in whole or in part, except by an instrument in writing signed by the parties hereto.

NEW JERSEY LAW: This Agreement shall be governed by, and construed in accordance with, the laws of the State of New Jersey, without regard to conflict of laws. The parties agree to submit to the jurisdiction of the courts of the State of New Jersey.

BINDING ON SUCCESSORS AND ASSIGNS: Except as otherwise provided herein, all terms, provisions and conditions of this Agreement shall be binding on and inure to the benefit of the parties hereto, their respective personal representatives, successors and assigns.

NO ASSIGNMENT: The SERVICE PROVIDER shall not assign this Agreement without the specific written consent of NJSIG.

MODIFICATION: No modification of this Agreement shall be valid or binding unless the modification is in writing and executed by NJSIG and the SERVICE PROVIDER.

NO WAIVER: No waiver of any term, provision or condition contained in this Agreement, nor any breach of any such term, provision or condition shall constitute a waiver of any subsequent breach of any such term, provision or condition by either party, or justify or authorize the non-observance on any other occasion of the same or any other term, provision or condition of this Agreement by either party.

PARTIAL INVALIDITY: If any term, provision or condition contained in this Agreement, or the application thereof to any person or circumstances shall, at any time, or to any extent, be invalid or unenforceable, the remainder of this Agreement, or the application of such term or provision to persons or circumstances other than those as to which this Agreement is invalid or unenforceable, shall not be affected thereby, and each term, provision or condition contained in this Agreement shall be valid and enforced to the fullest extent permitted by the law provided, however, that no such

invalidity shall in any way reduce services to be performed by the SERVICE PROVIDER to NJSIG.

CAPTIONS: The captions or paragraph headings contained in this Agreement are solely for purpose of convenience and shall not be deemed part of this Agreement for the purpose of construing the meaning thereof or for any other purpose.

PROPRIETARY INFORMATION: The SERVICE PROVIDER shall not reveal to any third party any information that NJSIG has defined as proprietary without the express written consent of NJSIG. In addition, the SERVICE PROVIDER shall promptly advise NJSIG upon being interviewed or retained by a prospective new client operating in the field of casualty insurance involving public entities or public agencies in the State of New Jersey. Failure to comply with these requirements shall represent cause for termination of this agreement, in accordance with THE TERMINATION CLAUSE of this agreement.

ELECTRONIC MAIL: The SERVICE PROVIDER agrees that it shall maintain and utilize the electronic mail systems in order to communicate with other service providers of NJSIG and to meet reporting requirements of the Executive Director. The SERVICE PROVIDER agrees that all financial and agenda reports shall be submitted in electronic formats established by the NJSIG Finance Committee via electronic mail. The SERVICE PROVIDER further agrees that all personnel working under this contract shall direct access to the SERVICE PROVIDER's electronic mail system and shall have individual electronic mail addresses.

NEWS RELEASES: The SERVICE PROVIDER is not permitted to issue news releases pertaining to any aspect of the services being provided under this contract without the prior written consent of the Director.

ADVERTISING: The SERVICE PROVIDER shall not use NJSIG's name, logos, images, or any data or results arising from this contract as a part of any commercial advertising without first obtaining the prior written consent of the Director.

LICENSES AND PERMITS: The SERVICE PROVIDER shall obtain and maintain in full force and effect all required licenses, permits, and authorizations necessary to perform this contract. The SERVICE PROVIDER shall supply NJSIG with evidence of all such licenses, permits and authorizations. This evidence shall be submitted subsequent to the contract award. All costs associated with any such licenses, permits and authorizations must be considered by the proposer in its proposal.

NON-SOLICITATION: The SERVICE PROVIDER shall not solicit NJSIG's employees for the Term plus twelve months.

LICENSURE: The SERVICE PROVIDER, along with any relevant employees, shall be licensed as required by law, and shall maintain such licensure for the duration of the contract. NJSIG may terminate the contract if the SERVICE PROVIDER fails to obtain, or maintain, such licensure.

ETHICS: The SERVICE PROVIDER shall not provide any NJSIG employee, NJSIG employee family member, NJSIG Board of Trustee member, or NJSIG Board of Trustee family member any gift or thing of value that would be reasonably likely to create the perception that such a gift or thing of value would influence their decision making.

TIME FOR PAYMENT: The SERVICE PROVIDER shall warrant that all negotiated prices for medical bills are valid for a minimum of thirty (30) days from the date the negotiated price is received by NJSIG.

RE-OPENED CLAIMS: The SERVICE PROVIDER shall not charge any fee or cost for re-opening a previously closed claim.

CHECKLIST OF REQUIRED DOCUMENTS AND FORMS:

- 1) Required with the proposal:
 - Ownership Disclosure Form (in the event the SERVICE PROVIDER is a corporation, partnership or limited liability company) (form attached as Exhibit 7.5)
- 2) Required after request to bind, but prior to award:
 - SERVICE PROVIDER's W-9
 - SERVICE PROVIDER's State of New Jersey Business Registration Certificate (sample attached as Exhibit 7.6)
 - Public Law 2005, Chapter 271 Vendor Certification and Disclosure Form (form attached as Exhibit 7.10)
 - Disclosure of Investment Activities in Iran, Russia and Belarus Form (form attached as Exhibit 7.7)
- 3) Required after award, but prior to execution of the contract:

- Mandatory Equal Employment Opportunity Documentation (contractor shall submit one of the following three documents):
 - Letter of Federal Affirmative Action Plan Approval, or
 - Certificate of Employee Information Report (sample attached as Exhibit 7.9), or
 - Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance) (form attached as Exhibit 7.8)
- 4) In addition to the above compliance forms, the following forms are required to be completed by all proposers:
- Pricing List by CPT Code & Location (form attached as Exhibit 7.1)
 - Sample Repriced, Redacted Medical Bills Checklist (form attached as Exhibit 7.2)
 - Nurse Case Manager Questionnaire (form attached as Exhibit 7.3)
 - PPO Network Questionnaire (form attached as Exhibit 7.4)

4 Proposal evaluation

4.1 Selection criteria for competitive contracting

NJSIG will evaluate each proposal submitted and at its discretion. Award of the contract will be to the proposer or proposers that provide the proposal found to be the most advantageous to NJSIG, all things considered including price and costs. NJSIG also reserves the right to reject any or all proposals and to waive immaterial formalities. NJSIG reserves the right:

- To eliminate any proposer who submits an incomplete, inadequate proposals or is not responsive.

- To reject all proposals or any non-responsive proposals.
- To supplement, amend, or otherwise modify this RFP.
- To waive any technical, or other, non-conformance of the responses, whether material or otherwise.
- To change or alter the schedule for any events called for in this RFP.
- To conduct investigations of any or all of the proposer and their responses as is deemed necessary or convenient, to clarify the information provided as part of the Proposal, including discussions with contact persons of prior clients, regulatory agencies and visits to any facilities or projects referenced in its response, and to request additional information to support the information included in any response.
- To decline to award any contract for any purpose.
- To abandon this procurement process at NJSIG's convenience at any time for any reason.
- To accept the proposal that, in NJSIG's sole judgment, best serves the interest of and/or is most advantageous NJSIG based upon the criteria set forth in this proposal.
- To consider and to award a proposal to a public body under applicable law.
- To designate or consult with another agency, group, consultant, individual, or public body to act at any time during the term of this procurement process in its place or on its behalf.
- To award any contract subject to final adoption of all necessary authorizations.
- Any other right afforded NJSIG under the law.

The firms submitting proposals will be evaluated based on each individual proposal submitted based upon the criteria set forth below. Firms may be requested to make oral presentations to NJSIG. If requested to make a presentation, each firm's proposed project manager must take part in the presentation. However, NJSIG may award based

on the initial proposals received without discussion with the proposers. If oral presentations are required, they will be scheduled after the submission of proposals. Proposers will not be compensated for making the presentation.

Each Proposal must satisfy the objectives and requirements detailed in this RFP. The features of the proposal, considered together with its economic and other benefits, will form the basis for the evaluation process. The criteria for the evaluation process are weighted and are as follows:

Criteria	Weight, %
Technical Criteria	
1. Technical Criteria <ul style="list-style-type: none"> a. Does the proposer’s proposal demonstrate a clear understanding of the scope of work and related objectives? b. Is the proposer’s proposal complete and responsive to the specific RFP requirements? c. Has the past performance of the proposer’s proposed methodology been documented? d. Does the proposer’s proposal use innovative technology and techniques? e. Are sound environmental practices such as recycling, energy efficiency, and waste reduction used? 	40%
Management Criteria	
1. Project management: <ul style="list-style-type: none"> a. How well does the proposed scheduling timeline meet the contracting unit’s needs? b. Is there a project management plan? 	

Criteria	Weight, %
<p>2. History and experience in performing the work:</p> <ul style="list-style-type: none"> a. Does the proposer document a record of reliability of timely delivery and on-time and on-budget implementation? b. Does the proposer demonstrate a track record of service as evidenced by on-time, on-budget, and contract compliance performance? c. Does the proposer document industry or program experience? d. Does the proposer have a record of moral integrity? <p>3. Availability of personnel, facilities, equipment and other resources:</p> <ul style="list-style-type: none"> a. To what extent does the proposer rely on in-house resources vs. contracted resources? b. Are the availability of in-house and contract resources documented? <p>4. Qualification and experience of personnel:</p> <ul style="list-style-type: none"> a. Documentation of experience in performing similar work by employees and when appropriate, sub-contractors? b. Does the proposer make use of business capabilities or initiatives that involve women, the disadvantaged, small and/or minority owned business establishments? c. Does the proposer demonstrate cultural sensitivity in hiring and training staff? <p>5. PPO network criteria:</p>	<p>30%</p>

Criteria	Weight, %
<ul style="list-style-type: none"> a. Composition of network; b. Total providers by type in network; c. Ability to add additional providers in network; d. Percent of Workers' Compensation panel physicians are board certified in New Jersey; e. Time frame for treatment. <p>6. Nurse case manager criteria:</p> <ul style="list-style-type: none"> a. Nurse case manager licensure; b. Nurse case manager experience; c. Nurse case manager case load; d. Nurse case manager team-dedicated manager; e. Nurse case manager dedicated team. 	
Cost Criteria	
<ul style="list-style-type: none"> 1. Cost of goods to be provided or services to be performed: <ul style="list-style-type: none"> a. Relative cost: How does the cost compare to other similarly scored proposals? b. Full explanation. Is the price and its component charges, fees, etc. adequately explained or documented? 2. Assurances of performance: <ul style="list-style-type: none"> a. If required, are suitable bonds, warranties, or guarantees provided? b. Does the proposal include quality control and assurance programs? 	30%

Criteria	Weight, %
<p>3. Proposer’s financial stability and strength:</p> <ul style="list-style-type: none"> a. Does the proposer have sufficient financial resources to meet its obligations? <p>4. Bill review criteria:</p> <ul style="list-style-type: none"> a. Total UCR adjustments; b. Total PPO reductions; c. Total allowed charges; d. Total net savings. 	

4.2 Evaluation Committee

NJSIG will convene an evaluation committee to evaluate submissions, and the committee will evaluate proposals and make a recommendation to the NJSIG Board of Trustees. The final decision to award a contract to a proposer as a result of this solicitation resides with the NJSIG Board of Trustees.

4.3 Interview

NJSIG reserves the right to interview any or all of the applicants submitting a proposal. Although interviews may take place, the proposal must be comprehensive and complete on its face. NJSIG reserves the right to request clarifying information subsequent to submission of the proposal.

5 Contract award

NJSIG will select the proposer as detailed above. Contract award shall be made with reasonable promptness by written notice to that responsible proposer(s), whose proposal(s), responsive to this RFP, is selected.

6 Contract administration

The NJSIG Contract Manager is the NJSIG employee responsible for the overall management and administration of the contract. The NJSIG Manager for this contract will be identified at the time of execution of contract. At that time, the proposer will be provided with the NJSIG Manager's name, department, address, telephone number, fax phone number, and email address.

7 Exhibits

7.1 Pricing List by CPT Code & Location

7.2 Sample Repriced, Redacted Medical Bills Checklist

7.3 Nurse Case Manager Questionnaire

7.4 PPO Network Questionnaire

7.5 Ownership Disclosure Form

7.6 Business Registration Form

7.7 Disclosure of Investment Activities in Iran, Russia, or Belarus

7.8 Mandatory Equal Employment Opportunity form AA302

7.9 Sample Certificate of Employee Information Report (pursuant to N.J.A.C. 17:27-1.1 et seq.)

7.10 Public Law 2005, Chapter 271 Vendor Certification and Disclosure Form

Exhibit

7.1

New Jersey Schools Insurance Group
 EXHIBIT 7.1 - Pricing List by CPT Code & Location

NJSIG's Request for proposal: C-2023-0001

Proposer: _____

Service Date	CPT Code	Description	North Jersey Fee	Central Jersey Fee	South Jersey Fee
8/1/23	70450	CT head w/out contrast			
8/1/23	70490	CT neck w/out contrast			
8/1/23	70543	MRI neck w/out contrast			
8/1/23	70551	MRI brain w/out contrast			
8/1/23	71045	Chest X-ray 1 view			
8/1/23	71110	X-ray ribs			
8/1/23	71250	CT chest w/out contrast			
8/1/23	72020	X-ray lumbar spine			
8/1/23	72040	X-ray cervical spine			
8/1/23	72072	X-ray thoracic Spine			
8/1/23	72141	MRI cervical spine w/out contrast			
8/1/23	72146	MRI thoracic spine w/out contrast			
8/1/23	72148	MRI lumbar spine w/out contrast			
8/1/23	73218	MRI hand w/out contrast (L)			
8/1/23	73620	X-ray foot			

New Jersey Schools Insurance Group

EXHIBIT 7.1 - Pricing List by CPT Code & Location

Service Date	CPT Code	Description	North Jersey Fee	Central Jersey Fee	South Jersey Fee
8/1/23	76604	Ultrasound of chest			
8/1/23	76700	Ultrasound abdomen			
8/1/23	64479	Epidural steroid injection T12-L1			
8/1/23	62321	Cervical epidural steroid injection			
8/1/23	29823	Arthroscopy, shoulder, surgical			
8/1/23	92540	Basic vestibular evaluation			
8/1/23	97110	Therapeutic exercises			
8/1/23	97003	Occupational therapy evaluation			
8/1/23	97004	Occupational therapy Re-evaluation			
8/1/23	97124	Massage therapy - 15 minutes			
8/1/23	99201	Office visit - 10 minutes, new patient			
8/1/23	99205	Office visit - 60 Minutes, new patient			
8/1/23	99211	Office visit - 5 minutes, established patient			
8/1/23	99215	Office visit - 40 minutes, established patient			
8/1/23	97001	Physical therapy evaluation			
8/1/23	97002	Physical therapy re-evaluation			
8/1/23	97140	Manual therapy			
8/1/23	97129	Cognitive therapy			

New Jersey Schools Insurance Group

EXHIBIT 7.1 - Pricing List by CPT Code & Location

Service Date	CPT Code	Description	North Jersey Fee	Central Jersey Fee	South Jersey Fee
8/1/23	22612	Lumbar spine fusion			
8/1/23	22840 80	Posterior instrumentation			
8/1/23	22554	Cervical fusion			
8/1/23	22845	Insert spine fixation device			
8/1/23	29883	Medial meniscus repair			
8/1/23	64612	Nerve injection - botox			

Exhibit

7.2

New Jersey Schools Insurance Group

EXHIBIT 7.2 - Sample Repriced, Redacted Medical Bills Checklist

NJSIG's Request for proposal: C-2023-0001

Proposer: _____

All proposers must provide a total of eight samples of redacted, repriced medical bills from the following hospitals and in the amounts specifically outlined below (check all that have been provided):

- a. Capital Health Regional Medical Center, 750 Brunswick Avenue, Trenton, NJ 08638:
 - 1) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 2) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and

- b. AtlantiCare Regional Medical Center - Mainland Campus, Jimmie Leeds Road, Pomona, NJ 08240 or Atlantic City Campus, 1925 Pacific Avenue, Atlantic City, New Jersey 08401:
 - 3) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 4) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and

- c. Cooper Hospital UMC, One Cooper Plaza, Camden, NJ 08103:
 - 5) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 6) sample redacted, repriced medical bill where original medical bill was less than \$100,000; and

- d. RWJ University Hospital, 1 RWJ Place, New Brunswick, NJ 08901:
 - 7) sample redacted, repriced medical bill where original medical bill was \$100,000 or more; and
 - 8) sample redacted, repriced medical bill where original medical bill was less than \$100,000.

Exhibit

7.3

New Jersey Schools Insurance Group

Nurse Case Manager Questionnaire

RFP Number: _____

Proposer: _____

All proposers must complete the Nurse Case Manager Questionnaire.

1. Briefly describe your case management capabilities. Include:
 - a. location of personnel;
 - b. hours of operation;
 - c. number and types of professional staff;
 - d. information systems used, and;
 - e. the role of registered nurses and physicians in the utilization management process.
2. Describe the process for implementing your recommendations with both the medical provider and the claim staff.
3. Describe in detail how case status is reported back to the client; include time lines involved along with report samples.
4. What are the background and credentials of your nursing staff?
5. Provide representative sample resumes/CVs.

Exhibit

7.4

New Jersey Schools Insurance Group

EXHIBIT 7.4 - PPO Network Questionnaire

NJSIG's Request for proposal: C-2023-0001

Proposer: _____

All proposers must complete the PPO Network Questionnaire.

1. Please provide detail on the composition of your network. Please note that we are asking for this data for all counties in New Jersey.
2. What percent of Workers' Compensation panel physicians are board certified in New Jersey?
3. Comment on the availability of your physicians to see injured/ill workers. Are they available within a specific period after referral? i.e. 24/7
4. What is the time frame for specialists? How quickly can an appointment be obtained?
5. Are you able to add additional providers at a client's request?
6. Do any of the providers in your network provide care in Pennsylvania or another state besides New Jersey? If so, please provide the location(s) and provider type(s).
7. Total providers by type in your PPO Network:

Provider Type	Total Number of Providers in Network in the State of New Jersey
Urgent Care Providers (Include only GP's, Internists)	
Cardiology	
General Surgery	
Nephrology	

New Jersey Schools Insurance Group

EXHIBIT 7.4 - PPO Network Questionnaire

Provider Type	Total Number of Providers in Network in the State of New Jersey
Neurosurgery	
Ophthalmology	
Oral Surgery	
Dental Care	
Orthopedic Surgery	
Orthopedics	
Otolaryngology	
Plastic Surgery	
Psychiatry	
Urology	
Acute Care Hospitals	
Ancillary Providers (Therapists, Psychologists)	
Pharmaceutical Services	
DME Services	
Physical Therapy (centralized scheduling?)	
Acute Care Hospitals	
Urgent Care Centers/Clinics	
Surgery Centers	

New Jersey Schools Insurance Group

EXHIBIT 7.4 - PPO Network Questionnaire

Provider Type	Total Number of Providers in Network in the State of New Jersey
Diagnostic Imaging	
Rehab Facilities	

Exhibit

7.5

STATEMENT OF OWNERSHIP DISCLOSURE

N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

This statement shall be completed, certified to, and included with all bid and proposal submissions. Failure to submit the required information is cause for automatic rejection of the bid or proposal.

Name of Organization: _____

Organization Address: _____

Part I Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type) Limited Liability Company (LLC)
- Partnership Limited Partnership Limited Liability Partnership (LLP)
- Other (be specific): _____

Part II

The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. **(COMPLETE THE LIST BELOW IN THIS SECTION)**

OR

No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. **(SKIP TO PART IV)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

Part III DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. **Attach additional sheets if more space is needed.**

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II **other than for any publicly traded parent entities referenced above.** The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. **Attach additional sheets if more space is needed.**

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

Part IV Certification

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the **<name of contracting unit>** is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with **<type of contracting unit>** to notify the **<type of contracting unit>** in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the **<type of contracting unit>** to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):		Title:	
Signature:		Date:	

Exhibit

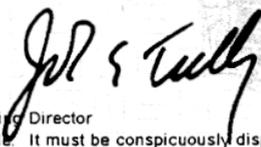
7.6

All businesses MUST provide a copy of their Business Registration Certificate (BRC) for their registration to be complete. Below are samples of a BRC Certificate. The Taxpayer Name on the BRC must be the same as the name on the Vendor Registration and the W9 form.

Non-profit Organizations must provide proof of 501(c)(3) exemption instead of the BRC.

Online BRC Look-up: https://www1.state.nj.us/TYTR_BRC/jsp/BRCLoginJsp.jsp

Information on BRC Requirements: <http://www.state.nj.us/treasury/revenue/busregcert.shtml>

STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE		DEPARTMENT OF TREASURY/ DIVISION OF REVENUE PO BOX 252 TRENTON, N J 08646-0252
TAXPAYER NAME:	TRADE NAME:	
TAXPAYER IDENTIFICATION#:	SEQUENCE NUMBER:	
ADDRESS:	ISSUANCE DATE:	
EFFECTIVE DATE:		
FORM-BRC(08-01)	Acting Director	This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.



STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name:	TAX REG TEST ACCOUNT
Trade Name:	
Address:	847 ROEBLING AVE TRENTON, NJ 08611
Certificate Number:	1093907
Date of Issuance:	October 14, 2004

For Office Use Only:

20041014112823533

Exhibit

7.7

New Jersey Schools Insurance Group
Disclosure of Investment Activities in Iran, Russia, or Belarus

Contract Name / Number: _____

Vendor: _____

1. PART ONE: Investment activities in Iran, Russia, or Belarus

1.1. Pursuant to N.J.S.A. 52:32-58, N.J.S.A. 52:32-60.1, N.J.S.A. 18A:18A-49.5 and N.J.S.A. 18A:18A-49.4, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete and submit, prior to award of the contract, the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran or on the Entities Engaged in Prohibited Activities Under C.52:32-60.1 list. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. The C.52:32-60.1 list is found on the Division's website at <https://www.nj.gov/treasury/administration/pdf/RussiaBelarusEntityList.pdf>.

Bidders must review this list prior to completing the below certification. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

1.2. PLEASE CHECK THE APPROPRIATE BOX:

- I certify, pursuant to N.J.S.A. 52:32-58, N.J.S.A. 52:32-60.1, N.J.S.A. 18A:18A-49.5 and N.J.S.A. 18A:18A-49.4, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be

New Jersey Schools Insurance Group
Disclosure of Investment Activities in Iran, Russia, or Belarus

engaged in prohibited activities in Iran, Russia or Belarus pursuant to N.J.S.A. 52:32-58, N.J.S.A. 52:32-60.1, N.J.S.A. 18A:18A-49.5 and N.J.S.A. 18A:18A-49.4. I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

- I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

2. PART TWO: Further information related to investment activities in Iran

You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the boxes below. Please provide thorough answers to each question. If you need to make additional entries, attach additional pages as needed.

2.1. Person or entity: _____

2.2. Relationship to bidder: _____

2.3. Description of activities: _____

2.4. Duration of Engagement: _____

2.5. Anticipated Cessation Date: _____

New Jersey Schools Insurance Group
Disclosure of Investment Activities in Iran, Russia, or Belarus

2.6. Bidder Contact Name: _____

2.7. Contact phone number: _____

3. PART THREE: Certification

3.1. I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder; that NJSIG is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with NJSIG to notify NJSIG in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with NJSIG, permitting NJSIG to declare any contract(s) resulting from this certification void and unenforceable.

3.1.1. Signed: _____

3.1.2. Print Name: _____

3.1.3. Title: _____

3.1.4. Date: _____

Exhibit

7.8

STATE OF NEW JERSEY
Division of Purchase & Property
Contract Compliance Audit Unit
EEO Monitoring Program

EMPLOYEE INFORMATION REPORT

IMPORTANT-READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM. FAILURE TO PROPERLY COMPLETE THE ENTIRE FORM AND TO SUBMIT THE REQUIRED \$150.00 FEE MAY DELAY ISSUANCE OF YOUR CERTIFICATE. DO NOT SUBMIT EEO-1 REPORT FOR SECTION B, ITEM 11. For Instructions on completing the form, go to: https://www.state.nj.us/treasury/contract_compliance/documents/pdf/forms/aa302ins.pdf

SECTION A - COMPANY IDENTIFICATION

1. FID. NO. OR SOCIAL SECURITY	2. TYPE OF BUSINESS <input type="checkbox"/> 1. MFG <input type="checkbox"/> 2. SERVICE <input type="checkbox"/> 3. WHOLESALE <input type="checkbox"/> 4. RETAIL <input type="checkbox"/> 5. OTHER	3. TOTAL NO. EMPLOYEES IN THE ENTIRE COMPANY
4. COMPANY NAME		
5. STREET	CITY	COUNTY STATE ZIP CODE
6. NAME OF PARENT OR AFFILIATED COMPANY (IF NONE, SO INDICATE) CITY STATE ZIP CODE		
7. CHECK ONE: IS THE COMPANY: <input type="checkbox"/> SINGLE-ESTABLISHMENT EMPLOYER <input type="checkbox"/> MULTI-ESTABLISHMENT EMPLOYER		
8. IF MULTI-ESTABLISHMENT EMPLOYER, STATE THE NUMBER OF ESTABLISHMENTS IN NJ		
9. TOTAL NUMBER OF EMPLOYEES AT ESTABLISHMENT WHICH HAS BEEN AWARDED THE CONTRACT		
10. PUBLIC AGENCY AWARDED CONTRACT CITY COUNTY STATE ZIP CODE		

Official Use Only	DATE RECEIVED	NAUG.DATE	ASSIGNED CERTIFICATION NUMBER

SECTION B - EMPLOYMENT DATA

11. Report all permanent, temporary and part-time employees ON YOUR OWN PAYROLL. Enter the appropriate figures on all lines and in all columns. Where there are no employees in a particular category, enter a zero. Include ALL employees, not just those in minority/non-minority categories, in columns 1, 2, & 3. **DO NOT SUBMIT AN EEO-1 REPORT.**

JOB CATEGORIES	ALL EMPLOYEES			PERMANENT MINORITY/NON-MINORITY EMPLOYEE BREAKDOWN									
	COL. 1 TOTAL (Cols.2 &3)	COL. 2 MALE	COL. 3 FEMALE	***** MALE*****					***** FEMALE*****				
				BLACK	HISPANIC	AMER. INDIAN	ASIAN	NON MIN.	BLACK	HISPANIC	AMER. INDIAN	ASIAN	NON MIN.
Officials/ Managers													
Professionals													
Technicians													
Sales Workers													
Office & Clerical													
Craftworkers (Skilled)													
Operatives (Semi-skilled)													
Laborers (Unskilled)													
Service Workers													
TOTAL													
Total employment From previous Report (if any)													
Temporary & Part-Time Employees	The data below shall NOT be included in the figures for the appropriate categories above.												

12. HOW WAS INFORMATION AS TO RACE OR ETHNIC GROUP IN SECTION B OBTAINED? <input type="checkbox"/> 1. Visual Survey <input type="checkbox"/> 2. Employment Record <input type="checkbox"/> 3. Other (Specify)	14. IS THIS THE FIRST Employee Information Report Submitted? 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/>	15. IF NO, DATE LAST REPORT SUBMITTED MO. DAY YEAR
13. DATES OF PAYROLL PERIOD USED From: _____ To: _____		

SECTION C - SIGNATURE AND IDENTIFICATION

16. NAME OF PERSON COMPLETING FORM (Print or Type)	SIGNATURE	TITLE	DATE MO DAY YEAR
17. ADDRESS NO. & STREET	CITY	COUNTY	STATE ZIP CODE PHONE (AREA CODE, NO., EXTENSION)

Exhibit

7.9

SAMPLE CERTIFICATE OF EMPLOYEE INFORMATION REPORT

Certification 111XX

CERTIFICATE OF EMPLOYEE INFORMATION REPORT

INITIAL

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of 15-DEC-20XX to 15-DEC-20XX

SAMPLE COMPANY, INC.
33 WEST STATE STREET
TRENTON, NJ 08625

VOID



State Treasurer

Exhibit

7.10

New Jersey Schools Insurance Group

Public Law 2005, Chapter 271 Vendor Certification and Disclosure Form

Contract Name / Number: _____

Vendor: _____

At least ten (10) days prior to entering into the above-referenced contract, the Vendor must complete this Certification and Disclosure Form, in accordance with the directions below and submit it to the NJSIG contact for such contract.

A vendor's failure to fully, accurately and truthfully complete this form and submit it to NJSIG may result in the imposition of fines by the New Jersey Election Law Enforcement Commission.

Disclosure

Following is the required Vendor disclosure of all Reportable Contributions made in the twelve (12) months prior to and including the date of signing of this Certification and Disclosure to: (i) any State, county, or municipal committee of a political party, legislative leadership committee, candidate committee of a candidate for, or holder of, a State elective office, or (ii) any entity that is also defined as a "continuing political committee" under N.J.S.A. 19:44A-3(n) and N.J.A.C. 19:25-1.

The Vendor is required to disclose Reportable Contributions by: the Vendor itself; all persons or other business entities owning or controlling more than 10% of the profits of the Vendor or more than 10% of the stock of the Vendor, if the Vendor is a corporation for profit; a spouse or child living with a natural person that is a Vendor; all of the principals, partners, officers or directors of the Vendor and all of their spouses; any subsidiaries directly or indirectly controlled by the Vendor; and any political organization organized under section 527 of the Internal Revenue Code that is directly or indirectly controlled by the Vendor, other than a candidate committee, election fund, or political party committee.

"Reportable Contributions" are those contributions that are required to be reported by the recipient under the "New Jersey Campaign Contributions and Expenditures Reporting Act," P.L. 1973, c. 83 (N.J.S.A. 19:44A-1, et seq.), and implementing

New Jersey Schools Insurance Group

Public Law 2005, Chapter 271 Vendor Certification and Disclosure Form

regulations set forth at N.J.A.C. 19:25-10.1, et seq. As of January 1, 2005, contributions in excess of \$300 during a reporting period are deemed “reportable.”

Certification

Name and Address of Committee to Which Contribution Was Made	Date of Contribution	Amount of Contribution	Contributor's Name
Indicate “none” if no Reportable Contributions were made. Attach Additional Pages As Needed.			

I certify as an officer or authorized representative of the Vendor that, to the best of my knowledge and belief, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

Name of Vendor: _____

Signed: _____

Print Name: _____

Title: _____

Date: _____