



Rural Community Assistance Corporation (RCAC)

Request for Proposal Professional Employer Organization (PEO) RFP # SO-2022.1

1. Background

Since 1978, Rural Community Assistance Corporation (RCAC) has been a critical partner to low-income rural and indigenous communities in 13 western states, including Alaska and Hawaii. Over the last 44 years, the organization has grown programmatically, and in terms of visibility, relevance and scope of services. From an initial staff of eight to our current team of 180, RCAC's growth trajectory has been particularly intense over the past five years with the addition of 53 new staff.

RCAC's environmental, housing, economic development and lending programming pillars provide the foundation for the health and wellness of the rural populations we serve. Our programmatic complement - safe water and wastewater, affordable housing, job creation and retention, and access to capital for essential community facilities - all contribute to community health and well-being.

For more information about RCAC please visit our website at www.RCAC.org.

2. Objective

The objective of this Request for Proposal (RFP) is to select a suitable PEO to enter into a joint employment relationship, to provide services including, but not limited to payroll, benefits, and leave administration, workers' compensation, as well as other human resource services, throughout our thirteen state footprint.

RCAC is a non-profit agency, funded by Federal, State, institutional and private funding. For this reason, potential vendors are requested to propose the best and most cost-effective solution to meet the RCAC requirements, while ensuring the highest quality of service.

3. Purpose

The purpose of this Request for Proposal (RPF) is to provide RCAC employees with a selection of affordable benefit and wellness options as well as provide excellent service and support to the Staff Operations (Human Resources) staff.

4. Instructions

Proposals should be submitted via email to pwuborges@rcac.org.

Proposals should be on Company letterhead, be concise and include all attachments.

Deadline for submission: Proposals must be received no later than 5 pm PDT, June 9, 2022.

Questions: All questions related to this RFP should be directed to Tricia Wu-Borges. Questions should be submitted no later than 5 pm PDT, June 1, 2022

The contact for this RFP is:

Tricia Wu Borges, Staff Operations Assistant Director

Staff Operations

Telephone: 916-956-2245

Email: pwuborges@rcac.org

5. Scope of Work

- Human Resource services including but not limited to:
 - Benefits administration that includes a variety of affordable health options for employees and wellness program
 - Payroll administration
 - Unemployment administration
 - Workers' compensation administration
 - Compliance assistance
 - Federal and state leave administration

6. Items to be included with your Proposal

Please note that failure to provide any information, certification or document requested in the RFP may cause your submission not to be scored.

General Information

Provide a description of your firm, including but not limited to the following:

Name of the principal(s)

Name, telephone number and email of the representative of the firm authorized to discuss your proposal

Address

Number of employees

Consultant Characteristics

Consultant should provide an overview of experience and resources in each of the topic areas included in the Scope of Work and any additional area that RCAC would benefit.

- Examples of relevant current or past clients

- Professional background of team member(s) who will be providing consulting and analysis services
- Any specialty services and/or work done with Rural, regional non-profit and/or CDFI organizations.
- Detailed list of references, including contact information for organizations for whom you have performed similar work
- Describe how your firm will handle actual or potential conflicts of interest
- Provide detailed description of the approach you would use to complete the Scope of work

Fee Structure

The cost of services is one of the determining factors to be considered in awarding this contract. The information requested in this section is required to support the reasonableness of your fee proposal.

1. Provide a proposal for providing the Scope of Work.
2. Provide an itemized breakdown of billing rates and hourly costs, including key personnel and their hourly rates and other reimbursable expenses for any services that may be requested in addition to the services previously described.
3. Provide any other fee information applicable to the engagement that has not previously been covered that you wish to disclose.

Certifications

RCAC requires that Consultant provide a Self-Certification related to:

- Conflict of interest (attachment A)
- Minority or Women owned business enterprise certification (attachment B).

Evaluation and Selection

The Staff Operations (SO) Assistant Director, COO and CEO will review all proposals based on the following:

- Professional qualifications
- Approach to providing requested services to both the employees and to the Staff Operations team
- Proposed fee structure
- Experience working with nonprofit and/or CDFI organizations
- Recommendations from references provided
- Other pertinent information submitted

RCAC may invite one or more finalists to make presentations. The SO Assistant Director, COO and CEO will make the final decision.

- This RFP is not an offer to contract. Issuance of this RFP and the receipt of responses by RCAC does not commit RCAC to award a contract to any bidder.
- Proposals shall be submitted no later than the time and date indicated in the RFP.
- Late submittals will not be accepted.
- All submittals, whether accepted or rejected, will become property of RCAC and will not be returned.
- RCAC reserves the right to waive defects and/or irregularities in proposals and will be the sole judge of the materiality of any such defect or irregularity.
- All costs associated with proposal preparation will be borne by the proposer.

7. Response

Response must include all required submittal (see below).

List of Attachments	Required Submittal Items
Exhibit A – Scope of Work Exhibit B – Price Sheet Attachment A Conflict of Interest Attachment B MBE/WBE Certification	General Information Consultant Characteristics Exhibit B – Price Sheet Attachment A Conflict of Interest Attachment B MBE/WBE Certification

**Exhibit A
RFP Professional Employer Organization
Scope of Work**

- **Human Resource services including but not limited to:**
 - Benefits administration that include a variety of affordable health options for employees and wellness program
 - Payroll administration
 - Unemployment administration
 - Workers’ compensation administration
 - Compliance assistance
 - Federal and state leave administration

Exhibit B
RFP Professional Employer Organization
Title: Salary and Benefit Consulting Analysts

Price Sheet

This Price Sheet must be submitted with your quote.

Name of Contractor/Consultant: _____

Provide your TOTAL COST for Consultant Service, meeting the Scope of work . Your TOTAL COST must be fully burdened to include all costs associated with providing service meeting the required minimum specifications in Scope of Work.

TOTAL COST for Consultant Services: \$ _____

Please provide a breakdown of fully burdened hourly rates for staff, anticipated travel and any other costs associated with this service.

Company Name: _____

Contact Name/Phone: _____

Contact E-mail: _____

ATTACHMENT A

Conflict of Interest



Rural Community Assistance Corporation

Conflict of Interest Consultant Self-Certification

The consultant, _____ hereby certifies that, to the best of its knowledge and belief, there are no present or currently planned interests (financial, contractual, organizational, or otherwise) relating to the work to be performed under the contract or task order resulting from Request for Proposal No. _SO-2022.1_____ that would create any actual or potential conflict of interest (or apparent conflicts of interest) (including conflicts of interest for immediate family members: spouses, parents, children) that would impinge on its ability to render impartial, technically sound, and objective assistance or advice or result in it being given an unfair competitive advantage. In this clause, the term "potential conflict" means reasonably foreseeable conflict of interest. The offeror further certifies that it has and will continue to exercise due diligence in identifying and removing or mitigating, to the satisfaction of RCAC, such conflict of interest (or apparent conflict of interest).

Consultant Name _____

RFP/Contract No. _____

Signature _____

Title _____

Date _____

ATTACHMENT B

Vendor Self-Certification Forms

RURAL COMMUNITY ASSISTANCE CORPORATION

VENDOR SELF-CERTIFICATION FORM

SELF-CERTIFICATION TYPE REQUESTED (Check Applicable Type)

Company Name: _____ Telephone () _____

DBA: _____ Email address: _____

Mailing Address: _____ Fax: () _____

City: _____ State: _____ Zip Code: _____ Tax I.D. No. _____

Contact Person(s) Name & Title: _____

Type of Organization (check one): _____ Individual _____ Partnership _____ Corporation

Business/Contractor License (if applicable): _____

I hereby certify that the above information is true and correct to the best of knowledge. I further certify that I am not related to (or am not an immediate family member by marriage) or employed, by RCAC, their employees, or the RCAC Board of Directors.

Signed: _____

Small Disadvantaged Business (SDB) Concerns

Women Owned Small Business (WOSB) Concerns

HUBZone Small Business (HUBZone)

Veteran-Owned Small Business (VOSB) Concerns

Service-Disabled Veteran-Owned Small Business (SDVOSB) Concerns

Certified: Yes _____ No _____ If yes, certification #: _____

None of the Above

Please check applicable criteria which best describes and qualifies your business as a small, disadvantaged, minority or women owned enterprise.

_____ At least 51% Ownership _____ Less than 50 Employees _____ More than 51 Employees
_____ Under \$1 Million AGR _____ \$2-3 Million AGR _____ Over \$3 Million AGR (Annual Gross Receipts)

SELF-CERTIFICATION CATEGORIES

For the Contractor and each Subcontractor indicated on the Report of Subcontractor information, the following must be completed.

The size standards are for the most part expressed in either millions of dollars or number of employees. A size standard is the largest that a concern can be and still qualify as a small business for Federal Government programs. For the most part, size standards are the average annual receipts or the average employment of a firm. For more information on these size standards, please visit <http://www.sba.gov/size>.

Indicate all Business category (ies) that apply by initialing next to the applicable category (ies):

_____ SMALL BUSINESS CONCERNS (SBC): an independently owned and operated concern, certified, or certifiable by Standard Industrial Classification codes required by the Federal Acquisition Regulations, Section 19.102, may be found at www.sba.gov/size.

_____ SMALL DISADVANTAGED BUSINESS (SDB): is a small business that is at least 51 percent owned by one or more individuals who are both socially, economically disadvantaged. Business owners who certify that they are members of name groups (Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Asian-Indian Americans) are considered socially and economically disadvantaged. This can include a publicly owned business that has at least 51 percent of its stock unconditionally owned by one or more socially and economically disadvantaged individuals and whose management and daily business is controlled by one or more such individuals.

_____ WOMEN OWNED SMALL BUSINESS (WOSB): A small business concern that is at least owned by one or more women. This can include a publicly owned business that has at least 51 percent of its stock unconditionally owned by one or more such individuals and whose management and daily business is controlled by one or more women.

_____ HUBZONE SMALL BUSINESS (HUBZone): A small business concern which operated in Historically Underutilized Business Zones. Through the HUBZone Empowerment Contracting program, federal contracting opportunities are provided for qualified small businesses located in distressed areas.

_____ VETERAN OWNED SMALL BUSINESS (VOSB): A small business that (i) is at least 51% unconditionally owned by one or more veterans; or in the case of any publicly owned business, at least 51% of the stock of which is unconditionally owned by one or more veterans, and (ii) whose management and daily business operations are controlled by one or more veterans.

_____ SERVICE DISABLE VETERAN OWNED SMALL BUSINESS (SDVOSB): A small business that : (i) is at least 51% unconditionally owned by one or more service-disabled veterans with a disability that is service connected, or in the case of any publicly owned business, at least 51% of the stock of which is unconditionally owned by one or more service-disabled veterans; and (ii) whose management and daily business operations are controlled by one or more service-disabled veterans or, in the case of a veteran with permanent and severe disability, the spouse or permanent caregiver of such veteran.

_____ NONE OF THE ABOVE CATEGORIES APPLY.