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# Tahoe Forest Hospital District Request for Proposal

## Insurance Lines of Coverage



March 10, 2023

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# Table of Contents

<b>BACKGROUND.....</b>	<b>4</b>
INTRODUCTION AND PURPOSE.....	4
HOSPITAL OVERVIEW .....	4
RFP EVALUATION CRITERIA .....	5
EVALUATION TIMELINE.....	5
<b>VENDOR RESPONSE INSTRUCTIONS.....</b>	<b>7</b>
QUESTIONS AND INQUIRIES.....	7
RESPONSE DOCUMENT FORMAT .....	7
IDENTIFICATION OF RESPONDENT.....	8
<b>RFP RESPONSE QUESTIONNAIRE.....</b>	<b>10</b>
FUNCTIONAL AND BACKGROUND QUALIFICATIONS.....	10
<b>ESSENTIAL COVERAGES .....</b>	<b>12</b>

# Background

# Background

## Introduction and Purpose

Tahoe Forest Hospital District (“TFHD”) is presently initiating a process to evaluate, select, and implement new brokers and insurance carriers for all lines of insurance except professional and general liability coverage.

## Hospital Overview

The vision of Tahoe Forest Health District is simple: To Be the Best Mountain Community Health System in the Nation and Regional Provider of Choice. Founded by the citizens of Truckee and North Lake Tahoe, TFHD is a local governmental, progressive, patient-centered health system located in Truckee, CA. With a focus on agility, quality and performance excellence, TFHD serves a diverse and growing community with changing healthcare needs.

Our facilities include two rural critical access hospitals, Tahoe Forest Hospital (25 acute beds, 36 skilled) and Incline Village Community Hospital (4 beds), and a diverse range of outpatient services including: home health, skilled nursing/extended care center, occupational health, children’s center, health clinic, hospice, medical fitness center, retail pharmacy, cancer center, rehab/physical therapy services and physician multi-specialty clinics spanning across four integrated companies.

Medical specialties available include at least asthma/allergy, cardiology, dermatology, ENT, emergency medicine, family, GI, general and vascular surgery, internal medicine, OB/GYN, orthopedics, oral surgery, pediatrics, plastic surgery, podiatry, pulmonology, radiology, and sleep disorders.

TFHD is proud to be recognized for high quality rural health care delivery. Partnerships and recognitions with UC Davis Health System include designation as a UC Davis Rural Center of Excellence and an affiliation with the UC Davis Rural PRIME (medical education) program. Tahoe Forest Cancer Center is an affiliate of the UC Davis Cancer Care Network, providing local cancer patients access to clinical trials and virtual tumor boards with other network sites. The Hospital was also recently recognized by the California Council for Excellence as a Gold level recipient for its California Awards for Performance Excellence, California’s version of the Malcolm Baldrige National Quality Award, recognizing the health system for its world class service and performance excellence.

With the expansion of services in recent years, TFHD now employs 1300 employees. TFHD offers a generous health and welfare benefit plan to our 1100 benefited employees.

## RFP Evaluation Criteria

This RFP has been designed to elicit responses from insurance brokers to conduct a qualitative evaluation, costing comparison, and functional fit to the hospital’s requirements. Respondents will be evaluated based on the following criteria:

- Quality and outcomes of response to this RFP
- Demonstration scores based on prescribed scripts
- Requirements score (and solution gaps)
- Integrated solution offering
- Ongoing support capabilities
- Cost
- Vendor reputation

The RFP outcomes and final vendor selection is subject to approval by the hospital Board of Directors. Any project commencement or approval-to-proceed decision will be dependent on Board approval. This approval is expected to occur prior to the project start timeline documented below.

## Evaluation Timeline

The following table reflects the desired timing of the Project Proposal process. TFHD reserves the right to change the dates below at any time. TFHD will notify Respondents of such changes should they occur.

<b>Issue RFP to Vendors</b>	April 18, 2023
<b>Written response to RFP due</b>	May 12, 2023 5 pm p.s.t.
<b>Reference Checks</b>	May 15, 2023
<b>Final Evaluation and Selection</b>	May 2023
<b>Contract Negotiations</b>	May - June 2023
<b>Contract Signed</b>	June 30, 2023

# **Vendor Response Instructions**

## Vendor Response Instructions

This section represents instructions for replying to this RFP. Questions and categories are grouped and numbered below. Vendors are asked to respond to each section by referencing the number and title of the section in their response document. The overall response document must be produced as a separate RFP document using MS Word with no changes made to the RFP as issued by TFHD.

Responders are welcome to insert PDF pages in their response where the content of those pages represent diagrams into the final submitted MS Word document. The final document can also be submitted as in a PDF file format; however a MS Word document must also be submitted with the final response. Where noted, other products to support responses may be used (e.g. MS Project, Visio) as relevant to the deliverable. Addendums to this document that have been included separately as MS Excel documents and referenced within this RFP must be updated directly inside of those files. Copies of the enclosed Excel files will not be accepted.

### Questions and Inquiries

TFHD will accept requests for information or clarification regarding this RFP please address these to:

Theresa Crowe  
Risk Manager  
Tahoe Forest Health System  
10121 Pine Ave.  
Truckee, CA 96161  
Desk Phone: (530) 582-6637  
Email: [tcrowe@tfhd.com](mailto:tcrowe@tfhd.com)

No verbal agreement or conversation made or had at any time with any officer, agent or employee of TFHD, nor any oral representation by such officer, agent or employee, shall add to, detract from, affect or modify the terms of the Request for Proposal or be relied upon in any way whatsoever, unless specifically incorporated in a written addendum issued by TFHD.

### Response Document Format

Vendor responses should include a cover sheet with vendor name and document title. A second page representing a Table of Contents should be inserted that correctly represents sectional responses. An appendix section may be added where it is appropriate to include other supporting documentation. All appendix documentation must be referenced within the body of the response and not separately attached in the appendix. Completed Excel workbooks must be delivered as separate files from the Word RFP response document.

## Identification of Respondent

The proposal must include the following respondent / vendor information:

- Name and address of company
- Name of contact person
- Telephone number of contact person
- Email address of contact person
- Signature of authorized signatory
- Name (printed) of authorized signatory
- Title of authorized signatory

Where a Responder is replying with a joint partner / subcontractor, include the contact information of that subcontractor as follows:

- Name and address of company
- Name of contact person
- Telephone number of contact person
- Email address of contact person



# **RFP Response Questionnaire**

# RFP Response Questionnaire

## Functional and Background Qualifications

### 1. Respondent Qualifications

- 1.1. Provide a brief overview of your company including number of years in business, number of employees, nature of business, and description of clients.
- 1.2. Identify any parent corporation and/or subsidiaries, if appropriate.
- 1.3. Provide a brief description of the evolution of your Insurance solution including all lines of coverage and amounts of coverage, limits, exclusions and deductibles.
- 1.4. List certification body and certification status.
- 1.5. Indicate the total number of client gained in the last 3 years.
- 1.6. Provide two rural references that you currently serve.

### 2. Respondent's Services Agreement

Respondents shall include their standard Services Agreement which will be reviewed and assessed for commercial reasonableness. This assessment will form part of the selection criteria.

### 3. Response Deliverables

Vendors shall provide final responses as follows:

- 3.1. Three (3) printed and bound copies of final proposal.
- 3.2. Three (3) electronic copies of final Proposal response, costing spreadsheets, requirements response workbooks, and MS Project schedule (s) should be included in electronic format and not in PDF format.
- 3.3. Deliverables should be mailed for arrival by May 12, 2023 to:  

Theresa Crowe  
Tahoe Forest Hospital  
10121 Pine Avenue  
Truckee, CA 96160
- 3.4. In addition to the paper sets of proposals, an electronic copy shall be submitted via email to [tcrowe@tfhd.com](mailto:tcrowe@tfhd.com)
- 3.5. Faxed proposals will not be accepted.

- 3.6. All information in this Request for Proposal is confidential and should not be disclosed by the Respondent except by written agreement with TFHD.
- 3.7. Costs associated with preparing proposals in response to this Request for Proposal are the sole responsibility of Respondent.
- 3.8. TFHD shall not, under any circumstances owe a duty of care or duty of fairness to any Respondent or, be responsible for any costs incurred by any Respondent in the preparation of its proposal or for any damages whatsoever arising out of or related to the rejection of any proposal.
- 3.9. Notwithstanding any other provision of the Request for Proposal, it is a fundamental condition of this call for Proposals and the receipt and consideration of proposals by TFHD that TFHD and its employees, contractors, consultants and agents will not and shall not under any circumstances whatsoever, including without limitation whether pursuant to contract, tort, statutory duty, law, equity or otherwise, and including but not limited to any actual or implied duty of fairness, be responsible or liable for any costs, expenses, claims, losses, damages or liabilities (collectively and individually "Claims") incurred or suffered by Respondents as a result of, arising out of, or related to any of the Request for Proposal, any addenda, the preparation, negotiation, acceptance or rejection of any conforming or non-conforming proposal, the rejection of any Respondent, the cancellation, suspension or termination of the selection process, or the postponement, suspension or cancellation of the Work, and by submitting a proposal each Respondent shall be conclusively deemed to waive and release TFHD and its employees, contractors, consultants and agents from and against any and all such claims. Respondents shall indemnify and hold harmless TFHD and its employees, contractors, consultants and agents against any and all claims brought by third parties against TFHD or any of its employees, contractors, consultants and agents which arise out of or are related to any one or more of the preparation, submission and negotiation of any proposal by the Respondent. Without limiting the generality of the foregoing, TFHD shall not be under any obligation whatsoever to award the work to the Respondent or anyone else and may cancel the Request for Proposal and reject any or all proposals received at any time for whatsoever reasons TFHD in its sole, absolute and unfettered discretion considers to be its best interest.

## Essential Coverages Required

1. **TYPE:** APIP – All Risk Property Program All Risk Property Total Insurable Values: \$375,457,253  
**LIMITS:** \$400,000,000 Per Occurrence for all Perils, Coverages and all Named Insureds combined. Not Covered: Flood Not Covered: Earthquake Shock.  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$25,000 All Risk Deductible, except \$1,000,000 for Wildfires Per Occurrence
2. **TYPE:** APIP – Boiler & Machinery Total Insurable Values: \$375,457,253  
**LIMITS:** \$100,000,000 Boiler Explosion and Machinery. Breakdown as respects Combined Property Damage and Business Interruption/ Extra Expense  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$10,000
3. **TYPE:** APIP – Pollution  
**LIMITS:** \$25,000,000 Policy Program Aggregate \$2,000,000 Per Pollution Incident \$2,000,000 Per Named Insured Aggregate  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$50,000 Each Pollution Incident After July 1, 2021 \$500,000 Each Pollution Incident Prior to July 1, 2021
4. **TYPE:** APIP – Cyber Total Insurable Values: \$375,457,253  
**LIMITS:** \$2,000,000 Annual Aggregate Per Member \$45,000,000 Annual Policy & Program Aggregate for all members combined  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$100,000 Per Claim 8 Hour waiting period for Dependent/Business Interruption Loss
5. **TYPE:** Cyber Liability (APIP), Retention Buy Down  
**LIMITS:** Same as APIP Cyber Policy  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$5,000
6. **TYPE:** Cyber Liability (APIP), BBR  
**LIMITS:** 50,000 Notified Individuals for Breach Response \$500,000 Legal, Forensic & Public Relations / Crisis Management \$2,000,000 Additional Breach Response Limit per Member / Insured  
**DEDUCTIBLE/SELF-INSURED RETENTION:** 100 Notified Individuals \$10,000 Legal, Forensic & Public Relations / Crisis Management but only \$5,000 for Legal.
7. **TYPE:** HARPP Crime-CHIP I  
**LIMITS:** \$500,000 All Lines of Coverage: • Employee Theft Including Faithful Performance of Duty • Forgery or Alteration • Inside Premises Theft of Money and Securities • Inside Premises Robbery and Safe Burglary Other Property • Outside the Premises • Computer Fraud • Funds Transfer Fraud • Money Orders and Counterfeit Paper Currency • Client's Property  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$15,000 All Lines of Coverage
8. **TYPE:** Fiduciary Liability  
**LIMITS:** \$2,000,000 Each Claim & Aggregate \$2,000,000 Settlor Coverage \$500,000 Trustee Claims Expenses Coverage / Defense of Non-Fiduciary Claims \$250,000

Voluntary Compliance Program Expenditures \$250,000 Reinstatement of Voluntary Compliance Program Expenditures \$1,500,000 HIPAA & HITECH Fines and Penalties \$250,000 PPACA Fines and Penalties \$250,000 ERISA Section 502(c) Civil Penalties \$250,000 IRC Section 4975 Penalties \$250,000 Coverage for Claims of Equitable Relief and Surcharges \$1,000,000 Death Master File Penalties (Section 203 of the Budget Act of 2013) \$100,000 Miscellaneous/Other Penalties \$100,000 Benefit Overpayments  
**DEDUCTIBLE/SELF-INSURED RETENTION:** \$25,000 Retention

9. **TYPE:** Pollution Liability

**LIMITS:** \$1,000,000 Policy Aggregate \$1,000,000 Covered Location Pollution Liability \$1,000,000 Miscellaneous Pollution Liability \$1,000,000 Emergency and Crisis Management Costs \$1,000,000 Business Income and Extra Expense

**DEDUCTIBLE/SELF-INSURED RETENTION:** \$25,000 72 Hour Waiting Period

10. **TYPE:** Deadly Weapons Response Program

**LIMITS:** \$500,000 Each and Every Deadly Weapon Event Including Claim Expense \$500,000 In the Annual Aggregate \$250,000 Each and Every Deadly Weapon Event For • Counselling Services • Funeral Expenses • Business Interruption • Demolition, Clearance, Memorialization • Extra Expense • Threat \$25,000 Per Person and \$500,000 Annual Aggregate for Medical Expenses \$50,000 Per Person and \$500,000 Annual Aggregate for Accidental Death and Dismemberment \$500,000 Each and Every Deadly Weapon Event for 1st Party Property Damage \$250,000 each and every Deadly Weapon Event and \$500,000 in the annual aggregate for Conveyance in Transit

**DEDUCTIBLE/SELF-INSURED RETENTION:** \$10,000 each and every Deadly Weapon event including Claim Expenses

11. **TYPE:** Health & Welfare Benefit Plan

Self-Insured bundled benefit plan offering Medical, Dental, Vision & Prescription, Anthem/Blue Cross PPO Network, Diversified Dental Provider Network, Express Scripts PBM, Vision Services Plan, TPA Services • COBRA Administration • FSA Administration • Dental Claims Administration •

**DEDUCTIBLE/SELF-INSURED RETENTION:** \$375,000 Aggregate Specific \$100,000

12. **TYPE:** California Worker's Compensation

**LIMITS:** \$500,000 Retained Limit of Liability –Each Accident, \$500,000 Retained Limit of Liability –Disease, Each Employee, Estimated Annual Remuneration \$105,000,000

13. **TYPE:** Nevada Worker's Compensation

**LIMITS:** \$1,000,000 Retained Limit of Liability –Each Accident, \$1,000,000 Retained Limit of Liability –Disease, Each Employee, Estimated Annual Remuneration \$1,075,000