



MCNEESE STATE UNIVERSITY

LAKE CHARLES, LOUISIANA 70609

AN EQUAL OPPORTUNITY INSTITUTION

PHONE: (337) 475-5087

FAX: (337) 475-5082

REQUEST FOR BID

DATE	BID NUMBER
06/29/22	D2300007

PURCHASING CONTACT	PHONE	REQUEST NO.	DEPARTMENT	VENDOR I.D. NO.
Debet Hebert	337-475-5083	R2300052	Sports Medicine	000029655

SEE STANDARD TERMS & CONDITIONS TO BIDDERS.

VENDOR MUST SIGN AND RETURN BID FORM TITLED "STANDARD TERMS & CONDITIONS TO BIDDERS" WITH BID RESPONSE TO BE CONSIDERED FOR BID AWARD.

VENDOR:

Return this bid to McNeese State University
 Purchasing Department, Smith Hall room 120.
 150 Lawton Dr., Lake Charles, LA 70605
 or MSU Box 92415, Lake Charles LA 70609

RESPONSE DUE 08/02/22 2:00 PM

No.	Quantity	Description	Unit	Unit Price	Extension
		Request for Sealed Bid (SB)			
<p>*****</p> <p>THIS BID MUST BE RETURNED IN A SEALED ENVELOPE/ PACKAGE. WRITE THE BID NUMBER AND DUE DATE ON THE ENVELOPE/PACKAGE. RETURN TO ONE OF THE ADDRESSES LISTED ABOVE.</p> <p>*****</p> <p>McNEESE PURCHASING OFFICE IS NOT RESPONSIBLE FOR ANY DELAYS CAUSED BY THE CHOSEN MEANS OF SEALED BID DELIVERY (U.S. POSTAL SERVICE, FedEX, UPS, etc.). THE BIDDER IS SOLELY RESPONSIBLE FOR THE TIMELY DELIVERY OF ITS BID. FAILURE TO MEET THE BID OPENING DATE AND TIME SHALL RESULT IN REJECTION OF THE BID.</p> <p>*****</p> <p>THIS IS A BID PROPOSAL FOR A CONTRACT TO PROVIDE PRIMARY HEALTH INSURANCE WITH ATHLETIC SPORTS</p>					

Bid must be signed below. I hereby certify that the above bid prices will remain in effect until the goods are delivered if the order is placed within 30 days after bid opening date. Validity of this bid is dependent on the following information:

Delivery _____ days ARO/TERMS _____

Phone () _____

All bids include prepaid delivery, F.O.B. to McNeese State University

THIS IS NOT A PURCHASE ORDER

TOTAL

CONTINUED

Signature _____ Date _____



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VENDOR:

RESPONSE DUE 08/02/22

No.	Quantity	Description	Unit	Unit Price	Extension
1		<p>Request for Sealed Bid (SB) (Continued...) BENEFIT FOR INTERNATIONAL STUDENT ATHLETES REGISTERED AND ENROLLED AT McNEESE STATE UNIVERSITY LOCATED IN LAKE CHARLES, LOUISIANA. ***** BIDDERS MUST READ AND UNDERSTAND THE REQUEST FOR BID AND ALL ATTACHMENTS. BID ONLY COVERAGE/SERVICES THAT ARE IN COMPLIANCE WITH THE REQUIREMENTS SET FORTH. McNEESE RESERVES THE RIGHT TO SELECT THE INSURANCE DEDUCTIBLE AND COPAY DEEMED TO BE MOST ADVANTAGEOUS TO THE UNIVERSITY. ONLY BIDS MEETING SPECIFICATIONS WILL BE CONSIDERED FOR AWARD. ***** THIS CONTRACT/POLICY WILL BE EFFECTIVE BEGINNING AUGUST 20, 2022 THROUGH JULY 31, 2023 FOR THE FIRST YEAR. BASED UPON MUTUAL AGREEMENT BETWEEN ALL PARTIES INVOLVED, THIS CONTRACT MAY BE EXTENDED FOR TWO (2) ADDITIONAL ONE YEAR TERMS AT THE SAME PRICES, TERMS AND CONDITIONS WHICH WILL RUN FROM JULY 1 TO JUNE 30. BOTH PARTIES MUST</p>			

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Delivery _____ days ARO/TERMS _____

Phone () _____

All bids include prepaid delivery, F.O.B. to McNeese State University

THIS IS NOT A PURCHASE ORDER

TOTAL CONTINUED

Signature _____ Date _____



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SEE STANDARD TERMS & CONDITIONS TO BIDDERS.
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VENDOR:

.
 .
 . XX ..

RESPONSE DUE 08/02/22

No.	Quantity	Description	Unit	Unit Price	Extension
1		<p>Request for Sealed Bid (SB) (Continued...) AGREE TO THE EXTENSION. ***** THIS ORIGINAL "REQUEST FOR BID" AND THE "STANDARD TERMS AND CONDITIONS" MUST BE SIGNED AND RETURNED WITH YOUR PROPOSED POLICY SUMMARY AND SERVICES. *****AN ORIGINAL AND ONE COPY OF YOUR BID RESPONSE AND ALL SIGNED ADDENDUMS ARE REQUIRED. ***** ANY INQUIRIES/QUESTIONS MUST BE MADE IN WRITING TO debet@mcneese.edu BY <u>JULY 13, 2022.</u></p>			
1	1.00	<p>PROVIDE PREMIUM RATES WITH DEDUCTIBLE AND ,IF APPLICABLE, COPAY OPTIONS FOR PRIMARY HEALTH INSURANCE FOR REGISTERED AND ENROLLED INTERNATIONAL STUDENT ATHLETES AT McEese State University. PREMIUM AMOUNTS FOR DIFFERENT AGE GROUPS MAY BE SUBMITTED. - SEE THE ATTACHED MINIMUM INSURANCE REQUIREMENTS.</p>	YRS		

Bid must be signed below. I hereby certify that the above bid prices will remain in effect until the goods are delivered if the order is placed within 30 days after bid opening date. Validity of this bid is dependent on the following information:
 Delivery _____ days ARO/TERMS _____
 Phone () _____
 All bids include prepaid delivery, F.O.B. to McNeese State University

THIS IS NOT A PURCHASE ORDER

TOTAL

Signature _____ Date _____

STANDARD TERMS & CONDITIONS TO BIDDERS
FAX #337-475-5082

PROPOSALS: The proposal must be received by the Purchasing Department, McNeese State University, before the time set for receiving bids. Bids received after the time set will not be considered. Bidder shall assume full responsibility for timely delivery at location designated for receipt of bids. Prices must be clear and be written in ink or typewritten, and the ITB AND Terms & Conditions must be signed in ink. Be sure bid number and due date are clearly shown on outside of package or envelope. Please see return address on the face of the bid form.

STANDARDS OF QUALITY AND ANY ALTERNATE: Any product or service bid shall conform to all applicable Federal and State Laws and Regulations and the specifications contained in the solicitation. Unless otherwise specified in the solicitation, any manufacturer's name, trade name, brand name, or catalog number used in the specification is for the purpose of describing the standard of quality, performance, and characteristics desired and is not intended to limit or restrict competition. Bidder must specify the brand and model number of the product offered in his bid. Bids not specifying brand and model number shall be considered as offering the exact products specified in the solicitation.

When a Pre-Bid Conference is scheduled, no alternative will be considered unless the above conditions are complied with and the "Request for Approval of Alternate" form is completed and returned. This form will be attached when applicable. Only alternates which are approved and acknowledged by addendum following the Pre-Bid Conference will be considered for award at the bid opening. **DO NOT SUBMIT BIDS ON UNAPPROVED ALTERNATES.**

The burden of proof of the merit of the proposed substitute is upon the proposer. The Purchasing Director's decision of approval or rejection of a proposed substitute shall be final.

SAMPLES/DESCRIPTIVE LITERATURE: The envelope/package containing samples and/or descriptive literature submitted by mail for consideration at the Pre-Bid Conference must be labeled in accordance with the instructions given on the "Request for Approval of Alternate" form.

When requested, samples submitted will be returned at bidder's risk and expense provided they have not been made useless through tests.

PRICES: Unless otherwise specified by McNeese in the solicitation, bid prices must be complete, including transportation prepaid by bidder to destination and firm for acceptance for a minimum of 30 days. If accepted, prices must be firm for the contractual period. Bids other than F.O.B. destination may be rejected. Prices should be quoted in the unit (each, box, case, etc.) as specified in the solicitation.

BID OPENING: Bidders may attend the bid opening, but no information or opinions concerning the ultimate contract award will be given at the bid opening or during the evaluation process. Bids may be examined within 72 hours after bid opening. Information pertaining to completed files may be secured by visiting McNeese during normal working hours. Written bid tabulations will not be furnished.

AWARD OF BIDS: McNeese State University reserves the right to award items separately, grouped, or on an all-or-none basis, and to reject any or all bids and waive any informalities incident thereto.

DELIVERY FAILURE: If the vendor fails to make delivery within the time specified on bid documents or within a reasonable time if no delivery time is specified McNeese reserves the right to cancel the item and to purchase it elsewhere. Any increase in price and/or cost of handling will be charged to the vendor making the original unsatisfactory delivery. Consistent unsatisfactory deliveries will be considered just cause for deleting a vendor from bid lists.

TERMINATION OF THIS AGREEMENT FOR CAUSE/CONVENIENCE: McNeese may terminate this agreement for cause based upon the failure of Contractor to comply with the terms and/or conditions of the Agreement, or failure to fulfill its performance obligations pursuant to this agreement, provided that McNeese shall give the Contractor written notice specifying the Contractor's failure. If within thirty (30) days after receipt of such notice, the Contractor shall not have corrected such failure or, in the case of failure which cannot be corrected in thirty (30) days, begun in good faith to correct such failure and thereafter proceeded diligently to complete such correction, then McNeese may, at its option, place the Contractor in default and the Agreement shall terminate on the date specified in such notice.

The Contractor may exercise any rights available to it under Louisiana law to terminate for cause upon the failure of McNeese to comply with the terms and conditions of this agreement, provided the Contractor shall give McNeese written notice specifying McNeese's failure and a reasonable opportunity for McNeese to cure the defect.

McNeese may terminate the Contract at any time by giving thirty (30) days written notice to the Contractor of such termination or negotiating with the Contractor an effective date.

SOLICITATIONS FOR (MOST) GOODS, NOT SERVICES, INCLUDE THE LOUISIANA PRODUCT PREFERENCE AS STATED BELOW:

IN ACCORDANCE WITH LOUISIANA REVISED STATUTES 39:1604, A PREFERENCE MAY BE ALLOWED FOR PRODUCTS MANUFACTURED, PRODUCED, GROWN, OR ASSEMBLED IN LOUISIANA OF EQUAL QUALITY.

PREFERENCES SHALL NOT APPLY TO SERVICE CONTRACTS.

Do you claim this Preference? YES _____ NO _____

Specify Line Number(s): _____

Specify location within Louisiana where this product is manufactured, produced, grown or assembled: _____
NOTE: If more space is required, include on separate

sheet.)

Do you have a Louisiana business workforce? YES _____ NO _____

If so, do you certify that at least fifty percent (50%) of your Louisiana business workforce is comprised of Louisiana residents? YES _____ NO _____

IN ACCORDANCE WITH L.R.S. 39:1594 (ACT 121), THE PERSON SIGNING THE BID MUST BE:

1. A current corporate officer, partnership member or other individual specifically authorized to submit a bid as reflected in the appropriate records on file with the Secretary of State; or
2. An individual authorized to bind the vendor as reflected by a corporate resolution, certificate or affidavit; or
3. Other documents indicating authority which are acceptable to the public entity.

By signing and returning this document (along with bid), you are certifying compliance with all Terms and Conditions set forth.

Signature & Company Name

Date

BID D230007

PRIMARY HEALTH INSURANCE FOR INTERNATIONAL STUDENT-ATHLETES

MINIMUM INSURANCE REQUIREMENTS

1. Accepted by over 90% of doctors, specialists, and hospitals in Lake Charles, Louisiana and surrounding areas.
2. ACA (Affordable Care Act) comparable plan.
3. \$10,000.00 annual maximum per insured person per period of coverage. Injuries from participation in intramural sports are to be covered as any other injury.
4. Deductible waived for preventative care services.
5. No waiting period for preventative care services.
6. No inside limits (i.e. no maximum on inpatient, outpatient, preventative care) – all covered to policy maximum.
7. Registered and enrolled students must be covered for all athletic sports injuries resulting from supervised and sponsored practice and play of all Intercollegiate or Interscholastic or club sports and hazardous activities, which includes the following:

Men's: Baseball, Basketball, Football, Track and Field, Golf.

Women's: Basketball, Soccer, Softball, Tennis, Track and Field, Volleyball, Golf.
8. Worldwide coverage (excluding home country).
9. Unlimited medical maximum.

10. Waiting period for pre-existing conditions waived with proof of credible coverage.

11. Coverage to include physician office visits (including preventative care), hospitalization, surgery, diagnostic care, physical therapy, mental health, substance abuse, prescription drugs, medical evacuation and repatriation of remains, and accidental death and dismemberment.

ESTIMATED NUMBER OF ATHLETES TO BE COVERED

40 athletes.

Actual amount may be more or less.

ADDITIONAL INFORMATION

Previous athletic insurance coverage was through ISO Student Health Insurance and underwritten by Crum & Forster SPC, part of Crum & Forster Group Companies from August 20, 2020 to August 19, 2022.

Enrollment, claims and premium data for the last three years are provided in the attachment. Claims data reported is through 5/31/2022. The policy is still in effect until 8/19/2022. Be advised there may still some pending claims.

Premium rates are to be presented for partial year enrollment the first year, and annual enrollment for the two subsequent years.

Invoices are to be provided after all enrollments for the designated semester/period have been processed and any reconciliation has been completed.

Primary Health Insurance Coverage for International Intercollegiate Student-Athletes at McNeese State University (estimate of 40 athletes) for a partial year for the first year (8/20/2022 – 6/30/2023) and 12-month period (7/1 – 6/30) for subsequent years, as per bid specifications, terms and conditions.

SUBMIT PLANS FOR THE FOLLOWING DEDUCTIBLE OPTIONS:

- A. \$0
- B. \$50
- C. \$100
- D. \$250

SUBMIT PREMIUMS FOR THE FOLLOWING AGE GROUPS:

- A. 12 to 24
- B. 25 to 29
- C. 30 to 40
- D. 41-50
- E. 51-64

McNeese Intl Student Athletes

Claims Paid Totals upto 5/31/2022

Year	Claim Total
2019 - 2020	\$31,724
2020 - 2021	\$71,985
2021 - 2022	\$58,332**

** 2021 - 2022 pending claims \$160,000 approx

Top Claims Paid Details

Service Code/Description	2019 - 2020	2020 - 2021	2021 - 2022
OTHER SURGICAL EXPENSE			\$8,958
COVID-19 TEST		\$32,673	\$7,686
EMERGENCY ROOM	\$4,186	\$13,681	\$7,176
HIGH COST PROCEDURES			\$6,624
SURGERY		\$647	\$5,684
SURGICAL FACILITY			\$4,564
ANESTHESIOLOGIST'S FEES			\$3,438
DURABLE MEDICAL EQUIPMENT			\$3,373
LAB/X-RAY	\$841	\$5,002	\$2,725
OUT OF NETWORK NEGOTIATED FEES	\$1,238	\$2,131	\$2,301
ANCILLARY HOSPITAL CHARGES		\$11,506	\$2,183
DOCTOR'S OFFICE VISITS	\$152	\$988	\$1,295
IMMUNIZATION THERAPY		\$469	\$1,004
OBSERVATION CARE			\$649
HOSPITAL ROOM AND BOARD			\$224
INFUSION THERAPY		\$58	\$196
CHIROPRACTIC TREATMENT		\$354	
INTERCOLLEGIATE SPORTS	\$24,324	\$3,829	
PHYSICAL THERAPY	\$948	\$274	

Enrollment and Premium per year

Year	Insured Students per term	Premium
2019 - 2020	45	\$63,819
2020 - 2021	47	\$57,120
2021 - 2022	54	\$75,560

This content is from the eCFR and is authoritative but unofficial.

Title 22 - Foreign Relations

Chapter I - Department of State

Subchapter G - Public Diplomacy and Exchanges

Part 62 - Exchange Visitor Program

Authority: 8 U.S.C. 1101(a)(15)(J), 1182, 1184, 1258; 22 U.S.C. 1431 *et seq.*; 22 U.S.C. 2451 *et seq.*; 22 U.S.C. 2651(a); Pub. L. 105-277, Div. G, 112 Stat. 2681 *et seq.*; Reorganization Plan No. 2 of 1977, 3 CFR, 1977 Comp. p. 200; E.O. 12048 of March 27, 1978; 3 CFR, 1978 Comp. p. 168; Pub. L. 104-208, Div. C, 110 Stat. 3009-546, as amended; Pub. L. 107-56, 416, 115 Stat. 354; and Pub. L. 107-173, 116 Stat. 543.

Source: 58 FR 15196, Mar. 19, 1993, unless otherwise noted. Redesignated at 64 FR 54539, Oct. 7, 1999.

Subpart A - General Provisions

Editorial Note: Nomenclature changes to part 62 appear at 64 FR 54539, Oct. 7, 1999, and 67 FR 17612, 17613, Apr. 11, 2002.

§ 62.14 Insurance.

- (a) Sponsors must require that all exchange visitors have insurance in effect that covers the exchange visitors for sickness or accidents during the period of time that they participate in the sponsor's exchange visitor program. In addition, sponsors must require that accompanying spouses and dependents of exchange visitors have insurance for sickness and accidents. Sponsors must inform all exchange visitors that they, and any accompanying spouse and dependent(s), also may be subject to the requirements of the Affordable Care Act.
- (b) The period of required coverage is the actual duration of the exchange visitor's participation in the sponsor's exchange visitor program as recorded in SEVIS in the "Program Begin Date," and as applicable, the "Program End Date," "Effective Program End Date," or "Effective Date of Termination" fields. Sponsors are not authorized to charge fees to their sponsored exchange visitors for the provision of insurance coverage beyond any demonstrable and justifiable staff time. Sponsors are not required to, but may, offer supplemental "entry to exit" coverage (*i.e.*, coverage from the time the exchange visitor departs his or her home country until he or she returns). If the sponsor provides health insurance, or arranges for health insurance to be offered the exchange visitor, via payroll deduction at the host organization, the exchange visitor must voluntarily authorize this action in writing and also be given the opportunity to make other arrangements to obtain insurance. These authorizations must be kept on file by the sponsor. Minimum coverage must provide:
 - (1) Medical benefits of at least \$100,000 per accident or illness;
 - (2) Repatriation of remains in the amount of \$25,000;
 - (3) Expenses associated with the medical evacuation of exchange visitors to his or her home country in the amount of \$50,000; and
 - (4) Deductibles not to exceed \$500 per accident or illness.
- (c) Insurance policies secured to fulfill the requirements of this section:
 - (1) May require a waiting period for pre-existing conditions that is reasonable as determined by current industry standards;

- (2) May include provisions for co-insurance under the terms of which the exchange visitor may be required to pay up to 25% of the covered benefits per accident or illness; and
 - (3) Must not unreasonably exclude coverage for perils inherent to the activities of the exchange program in which the exchange visitor participates.
- (d) Any policy, plan, or contract secured to fill the above requirements must, at a minimum, be:
- (1) Underwritten by an insurance corporation having an A.M. Best rating of "A-" or above; a McGraw Hill Financial/Standard & Poor's Claims-paying Ability rating of "A-" or above; a Weiss Research, Inc. rating of "B + " or above; a Fitch Ratings, Inc. rating of "A-" or above; a Moody's Investor Services rating of "A3" or above; or such other rating as the Department of State may from time to time specify; or
 - (2) Backed by the full faith and credit of the government of the exchange visitor's home country; or
 - (3) Part of a health benefits program offered on a group basis to employees or enrolled students by a designated sponsor; or
 - (4) Offered through or underwritten by a federally qualified Health Maintenance Organization or eligible Competitive Medical Plan as determined by the Centers for Medicare and Medicaid Services of the U.S. Department of Health and Human Services.
- (e) Federal, state or local government agencies; state colleges and universities; and public community colleges may, if permitted by law, self-insure any or all of the above-required insurance coverage.
- (f) At the request of a non-governmental sponsor of an exchange visitor program, and upon a showing that such sponsor has funds readily available and under its control sufficient to meet the requirements of this section, the Department of State may permit the sponsor to self-insure or to accept full financial responsibility for such requirements.
- (g) The Department of State may, in its sole discretion, condition its approval of self-insurance or the acceptance of full financial responsibility by the non-governmental sponsor by requiring such sponsor to secure a payment bond in favor of the Department of State guaranteeing the sponsor's obligations hereunder.
- (h) Accompanying spouses and dependents are required to be covered by insurance in the amounts set forth in paragraph (b) of this section. Sponsors must inform exchange visitors of this requirement, in writing, in advance of the exchange visitor's arrival in the United States.
- (i) Exchange visitors who willfully fail to maintain the insurance coverage set forth above while a participant in an exchange visitor program or who make material misrepresentations to the sponsor concerning such coverage will be deemed to be in violation of these regulations and will be subject to termination as an exchange visitor.
- (j) Sponsors must terminate an exchange visitor's participation in their program if the sponsor determines that the exchange visitor or any accompanying spouse or dependent willfully fails to remain in compliance with this section.

[79 FR 60307, Oct. 6, 2014]