

MAILING ADDRESS:

Amendment 1

Solicitation Number: USC-RFP-3620-CH

Date Issued: July 1, 2020

Procurement Officer: Caleisha Hayes

PHYSICAL ADDRESS:

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Columbia, SC 29208

DESCRIPTION: Provide Medical & Accidental Insurance for UofSC Students, Faculty and Staff during UofSC-Approved Travel Abroad

USING GOVERNMENTAL UNIT: UNIVERSITY OF SOUTH CAROLINA

SUBMIT YOUR SEALED OFFER TO EITHER OF THE FOLLOWING ADDRESSES:

The Term "Offer" Means Your "Bid" or "Proposal". Your offer must be submitted in a sealed package. Solicitation Number & Opening Date must appear on package exterior. See "Submitting Your Paper Offer or Modification" provision.

University of South Carolina – Purch 1600 Hampton Street, Suite 606, Att Columbia SC 29208		University of South Carolina – Purchasing Dept 1600 Hampton Street, Suite 606, Attention: Bid Clerks Columbia SC 29208						
Solicitation openings and closings will be limited to teleconference only: Telephone 800-753-1965/Access code 777 7162 SUBMIT OFFER BY (Opening Date/Time): Tuesday, July 7, 2020 at 11:00 AM (EST) (See "Deadline For Submission Of Offer" provision)								
QUESTIONS MUST BE RECEIVED BY: June 26, 2020 at 11:00 AM (EST) (See "Questions From Offerors" provision)								
NUMBER OF COPIES TO BE SUBM	3 (Three) USB Drives 1 (One) USB Drive w	s with Digi rith Digital	ital version of Technical Proposal; version of Price Proposal; and version of redacted Technical & Price proposal					
CONFERENCE TYPE: Not Applica	able		LOCATION: Not Applicable					
DATE & TIME: (As appropriate, see "Conferences - Pre-Bid/Proposa	I" & "Site Visit" previsions)							
(As appropriate, see Conferences - Fre-Did/Froposa	i & Site visit provisions)							
	will be posted on 7/15/2020. Ts will be posted at the following		this solicitation, any amendments, and any related ess: http://purchasing.sc.edu					
		lar days aft	gree to be bound by the terms of the Solicitation. You ter the Opening Date. (See "Signing Your Offer" provision.)					
NAME OF OFFEROR			Any award issued will be issued to, and the contract will be formed with, the entity identified as the Offeror. The entity named as the Offeror must be a single and distinct legal entity. Do not use the name of a branch office or a division of a larger entity if the branch or division is not a separate legal entity, i.e., a separate corporation, partnership, sole proprietorship, etc.					
(full legal name of business submitting the offer)			entity, i.e., a separate corporation, partnership, sole proprietorship, etc.					
AUTHORIZED SIGNATURE		DATE	DATE SIGNED					
(Person must be authorized to submit binding offer to	contract on behalf of Offeror.)							
TITLE		STAT	STATE VENDOR NO.					
(business title of person signing above)		(Register	(Register to Obtain S.C. Vendor No. at www.procurement.sc.gov)					
PRINTED NAME		STAT	STATE OF INCORPORATION					
(printed name of person signing above)		(If you a	re a corporation, identify the state of incorporation.)					
OFFEROR'S TYPE OF ENTITY: (C	Check one)		(See "Signing Your Offer" provision.)					
Sole Proprietorship Partnership			other					
Corporate entity (not tax-exempt)	Corporation (tax-exempt)	G	overnment entity (federal, state, or local)					
COVER PAGE – PAPER ONLY (MAR	2015)							

PAGE TWO (Return Page Two with Your Offer

			(Retur	n Page Two	o wi	th Your Offe	r)			
HOME OFFICE ADDRESS (Address for Offeror's home office / principal place of business)					NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See "Notice" clause)					
						Area Code	- Number - Exte	ension		Facsimile
								_		
						E-mail Addr	ress			
PAYMENT ADDRESS (See "Payment" clause)	(Address	to whi	ch payments w	ill be sent.)	be		ESS (Address to turchase Orders an			
Payment Address sa				only one)	_	Order Address same as Home Office Address Order Address same as Notice Address (check only one)				
ACKNOWLEDGMEN	T OF AM	END	MENTS							
Offerors acknowledges re Solicitation" Provision)	eceipt of a	mendi	ments by indica	iting amend	lmen	nt number and	its date of issue. ((See "A	Amendmo	ents to
Amendment No.	Amendi Issue D		Amendment No.	Amendmo Issue Da						Amendment Issue Date
DISCOUNT FOR PRO PAYMENT (See "Discount for Prompt F clause)		10 (Calendar Days (%	6) 20 Ca	lend	ar Days (%)	30 Calendar Days	s (%)	Ca	alendar Days (%)
PREFERENCES - A NOTI preferences available to in-s Section 11-35-1524 of the SALL THE PREFERENCE BY ITEM OR LOT. VE PREFERENCES. THE I CERTIFYING THAT YOU PREFERENCE CAN HAVE	state vendor South Caro S MUST B ENDORS REQUIRE DUR OFFF VE SERIO	rs, vend lina Co RE CLA ARE MENT ER QU OUS CO	dors using in-state ode of Laws. A state of Laws. The control of La	te subcontractsummary of the RE APPLIED TO CAREI FY HAVE THE PRIME THE PRIME SECTION 1985	ttors, the note by FUL CHA FER 24(E	and vendors se ew preferences LINE ITEM, LY REVEL CED. IF EXCE YOU'V ()(4)&(6)]	Illing in-state or US is available at www.reconvoluess of The STATUTH OU REQUEST IE CLAIMED. IM	end pr w.procu F WHE E BEF A PRI IPROP	oducts. The rement see THER AVIORE CIEFEREN PERLY R	nis law appears in s.gov/preferences. WARD IS MADE LAIMING ANY CE, YOU ARE EQUESTING A
PREFERENCES - ADDRE space provided below. An Contractor Preference (11-3 required, but can be benefic	in-state co 35-1524(C)	(1)(iii))	necessary to claim). Accordingly, yo	m either the ou must prov	Res	ident Vendor P this information	reference (11-35-1) to qualify for the p	524(C)	(1)(i)&(ii)) or the Resident
In-State Office Addres				ck only one)						

QUESTIONS FROM OFFERORS - AMENDMENT (JUN 2017) The solicitation is amended as provided herein. Information or changes resulting from questions will be shown in a question-and-answer format. All questions received have been reprinted below. The "state's response" should be read without reference to the questions. The questions are included solely to provide a cross-reference to the potential offeror that submitted the question. Questions do not form a part of the contract; the "state's response" does. Any restatement of part or all of an existing provision of the solicitation in an answer does not modify the original provision except as follows: underlined text is added to the original provision. Stricken text is deleted. [02-2A097-1]

THE FOLLOWING QUESTIONS WERE RECEIVED FROM VENDOR A:

1. Can the University please provide historical claims and premium experience for the last three years?

ANSWER: The University has asked the incumbent for claims information, but has not received it at this time.

2. Can the University please provide a list, or summary, of travel destinations?

ANSWER: The following is a list of countries where we support recurring programming:

Argentina, Aruba, Australia, Austria, Belgium, Bolivia, Brazil, Chile, China, Colombia, Costa Rica, Cuba, Cyprus, Czech Republic, Denmark, Dominican Republic, Ecuador, Egypt, Finland, France, Germany, Ghana, Hong Kong, Iceland, India, Ireland, Israel, Italy, Japan, Jordan, Kenya, Latvia, Macau, Madagascar, Mexico, Morocco, Nepal, Netherlands, New Zealand, Nicaragua, Norway, Panama, Peru, Portugal, Poland, Russia, Rwanda, Senegal, Singapore, South Africa, South Korea, Spain, Sweden, Swaziland, Switzerland, Taiwan, Tanzania, Thailand, Turkey, Uganda, United Arab Emirates, United Kingdom, Uruguay, Vietnam.

Students may visit other countries with less frequency for research or other study programs.

3. Can the University please provide the daily, weekly, or monthly rate charged to the travelers?

ANSWER: The premium for students and faculty/staff traveling in support of study abroad programming has been \$29-\$30 per month for the last three years. The premium for faculty/staff who are traveling not in connection with study abroad has been \$15.75 per week.

THE FOLLOWING QUESTIONS WERE RECEIVED FROM VENDOR B:

4. In order to provide appropriate and the most cost-effective pricing, additional travel information needs to be obtained. Please provide the details using best estimates:

ANSWER: See below.

Note: Our application database does not track travel days as some others do. So, the estimates in the table were calculated with the following estimates based on our AY18-19 data. For the purpose of this estimate, we calculate the average semester experience as 150 days, the average

Spring Break or Winter Break experience as 8 days, the average Maymester experience as 20 days, and the average summer experience as 30 days.

- 28 academic year travelers X 300 8,400 days
- 200 fall semester travelers X 150 30,000 days
- 221 spring break/winter break travelers X 8 1,768
- 646 spring semester travelers X 150 96,900 days
- 541 Maymester travelers X 20 10,820 days
- 277 summer travelers X 30 8,310 days
- 180 graduate students X 30 5,400 days
- Faculty/staff 14 days

TRAVEL DATA

Type of Traveler (students, faculty, staff, employees, alumni, etc)	# Of Travelers Annually	Average Travel Days Per Person	Annual Travel Days
Students	2093	77	161,598
Faculty/Staff	150	14	2,100
Do you want to include accompanying spouses, partners?	# Of Dependent Travelers Annually	Average Travel Days Per Dependent	Annual Travel Days
No	N/A	N/A	N/A
	Total Travelers		Total Travel Days
	2243		163,698

Note the number of travelers or approximate percentage of total travel for each that apply							
International travel Inbound to the USA International Travel Outbound from the USA		International Travel Outbound from non-US locations to non- US destinations	Domestic (USA) Travel 100 miles from home	Other, please explain			
0%	99%	1%	0%				

	Top five travel destinations (note Zone A section below is also required for indemnified quotes)					
1.	Italy					
2.	Spain					
3.	Costa Rica					
4.	Germany					
5.	France					

EXPATRIATE INFORMATION

# of Expatriates	# of Expatriate Dependents	# of travel days per Expatriate*	Total Expat Days	
0	0	N/A	N/A	

CLAIMS HISTORY (3 years)

Claim History Evacuation, repatriation or repatriation of remains

Please refer to Question #1.

Claim History, Security

Please refer to Question #1.

Claim History, Medical Expenses

Please refer to Question #1.

ZONE A COUNTRY LIST

Destination	# of travelers	Total # of days	# of expats*	# of expat deps
Afghanistan	0	0	N/A	N/A
Cabo Verde	0	0	N/A	N/A
Democratic Republic of the Congo	0	0	N/A	N/A
Equatorial Guinea	0	0	N/A	N/A
Gambia	0	0	N/A	N/A
Gaza Strip & West Bank (We do not support programming in Gaza or the West Bank, but some of our students would visit the West Bank for personal travel over the weekends when they are based in Jerusalem or Tel Aviv)	2*	10*	N/A	N/A
Guinea Conakry	0	0	N/A	N/A
Iran	0	0	N/A	N/A
Iraq	0	0	N/A	N/A
Israel	18	420	N/A	N/A
Ivory Coast	0	0	N/A	N/A
Lebanon	0	0	N/A	N/A

^{*}Loss run reports redacted of PHI or PMI can be provided in lieu of above

Libya	0	0	N/A	N/A
Mali	0	0	N/A	N/A
Nepal	3	90	N/A	N/A
Nigeria	1	30	N/A	N/A
North Korea	0	0	N/A	N/A
Russia- Dagestan and Chechnya	0	0	N/A	N/A
only	U	U		
Senegal	0	0	N/A	N/A
Somalia	0	0	N/A	N/A
South Sudan	0	0	N/A	N/A
Sudan	0	0	N/A	N/A
Syria	0	0	N/A	N/A
Ukraine	3	60	N/A	N/A
Yemen	0	0	N/A	N/A

(Please note: It is important to provide separate Zone A travel data for transient travelers vs. expatriates)

5. PHYSICAL MANUAL WORK - Do you have any programs that include activities that would fall under our definition for Physical Manual Work? If so, will you please declare the specific activities and approximate number of travelers and travel days associated with these activities?

Our definition is as follows: "Physical Manual Work: Any work involving physical labor such as but not limited to building, butchery, construction, farming, fishing, forestry, meat packing, mining, maintenance or involving the use of power tools or hazardous equipment such as explosives."

ANSWER: No.

6. Hazardous & Winter Activities – UofSC has requested "coverage as any other condition for illness/injury/death as a result of participation in non-professional sports."

<u>Hazardous Activities and Sports:</u> Bamboo Boat Rafting, Black Water Rafting, Bouldering, Bungee Jumping*(more than 2 jumps in all during Your Trip) Canyoning, Cave Tubing, Caving, Cycle Touring, Dog Sleighing, Hang Gliding, Horse Trekking, Ice Climbing, Flying in a Helicopter (as a passenger only) Jet Boating/Shotover Jet, Micro Lighting, Mountaineering (with ropes), Off-Road Mountain Biking, Potholing/Caving (as part of a group), Parachuting, Paragliding, Parapenting, Parasailing (behind a boat), Parapenting (behind a motorised vehicle), Polo,River Kayaking, Rock Climbing (with ropes), Sea Kayaking, Shark Cage Diving, Skydiving, Show-jumping, Spelunking or White Water Rafting (grade 4-5).

<u>Winter Sports:</u> Big Foot Skiing, Bobsleigh/Skeleton/Luge, Curling, Glacier Crossing/Hiking, Heliskiing/Boarding, Ice skating (other than on an indoor rink), Kite Skiing, Mono Skiing, Skiing (including off piste with a guide), Ski Bobbing, Skiing Cross Country, Snow Blading (on piste only), Snowboarding (including off piste with a guide), Snow Kiting, Snow Mobiles/Skidoos, Snow Shoeing, Tobogganing.

a) Are there any activities you would like to remove completely from the following listed exclusions?

ANSWER: The University would like bicycle touring to be removed from the exclusion list, as that is occasionally on our faculty-led program itineraries and many of our students use bicycles in certain locations.

b) Are there any activities you would like to allow only if a "University-sponsored activity?" If so, please declare the approximate number of travelers and international travel days associated with each activity.

ANSWER: Possibly white water rafting. Although our faculty-led program itineraries never include rafting in classes above III, the University's concern is that the claims process would be delayed if needed to prove an injury occurred in a Class II or III.

7. AGE LIMITATIONS – Our current language is as follows: "At the time of purchasing or extending this Policy and during the Coverage Period You must be under the age of 40 if you are a student or 81 if you are staff or faculty"

Please disclose approximate number of travelers' travel days and days associated with students over 40 and faculty/staff over 81.

ANSWER: Estimate we have less than 5 students over 40 annual and 2 faculty over 81.

8. We understand that for the school year ending June 30, 2020, the University of South Carolina had a total of approximately 2,000 international travelers. Considering the recent and potential future travel changes and restrictions of COVID-19, what is the anticipated travel projection for the upcoming school year (August 10, 2020 through August 9, 2021)? Please provide an approximate percentage of normal travel that UofSC expects to take place (we just ask for your best estimate).

ANSWER: The University hopes to be able to support limited spring and summer travel. An estimate would be 1000 travelers probably in fewer locations than we generally support. This would be 50% of our usual capacity. While we have already cancelled fall travel, that is always our least busy semester for student travel, so that does not have a large impact on our annual number.

9. Please provide additional information about tele-psychiatric support. Are you seeking psychiatrists who can prescribe medication versus standard mental health counseling sessions?

ANSWER: Mental health counseling sessions would be sufficient.

10. The RFP explains that the program is to include security assistance including location briefs, itinerary reviews, and emergency notifications for enrollees. Is UofSC seeking only emergency notifications or is it seeking a full traveler tracking solution?

ANSWER: Currently we largely have an emergency only notification product that also includes itinerary reviews. The University is open to other options and would consider a more comprehensive solution if available.

11. It is understood that UofSC's current Medical and Accidental Insurance program carries a renewal date of August 10, 2020. Most programs of this nature include a requirement to provide advance notice of cancellation to the vendor. If UofSC chooses to partner with a new vendor effective August 10, 2020, is the institution able to terminate its current program/policy?

ANSWER: The current contract had a maximum 5-year contract term which expires on August 10, 2020.

*** END OF AMENDMENT ***