



22-70877 BUSINESS PROPOSAL ATTACHMENT E

Business Proposal

- 2.3.1** General (optional) - Please introduce or summarize any information the Respondent deems relevant or important to the State's successful acquisition of the products and/or services requested in this RFP.

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- 2.3.2** Respondent's Company Structure - Please include in this section the legal form of the Respondent's business organization, the state in which formed (accompanied by a certificate of authority), the types of business ventures in which the organization is involved, and a chart of the organization. If the organization includes more than one (1) product division, the division responsible for the development and marketing of the requested products and/or services in the United States must be described in more detail than other components of the organization. Please enter your response below and indicate if any attachments are included.





[Redacted]

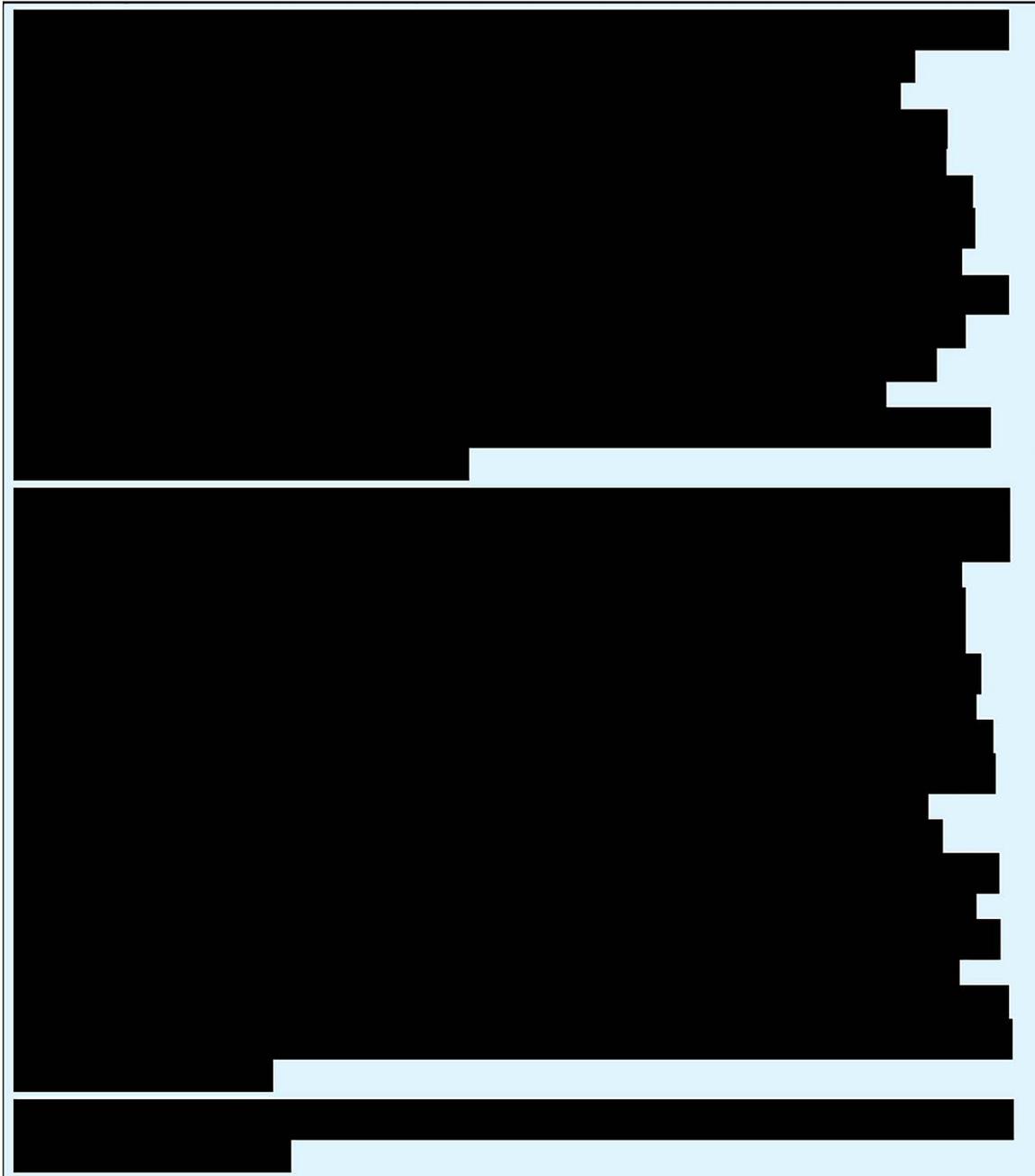
2.3.3 Respondent's Diversity, Equity and Inclusion Information - With the Cabinet appointment of a Chief Equity, Inclusion and Opportunity Officer, on February 1, 2021, the State of Indiana sought to highlight the importance of this issue to the state. Please share leadership plans or efforts to measure and prioritize diversity, equity, and inclusion. Also, what is the demographic compositions of Respondents' Executive Staff and Board Members, if applicable.

[Redacted]

2.3.4 Company Financial Information - This section must include documents to demonstrate the Respondent's financial stability. Examples of acceptable documents include most recent Dunn & Bradstreet Business Report (preferred) or audited financial statements for the two (2) most recently completed fiscal years. If neither of these can be provided, explain why, and include an income statement and balance sheet, for each of the two most recently completed fiscal years.



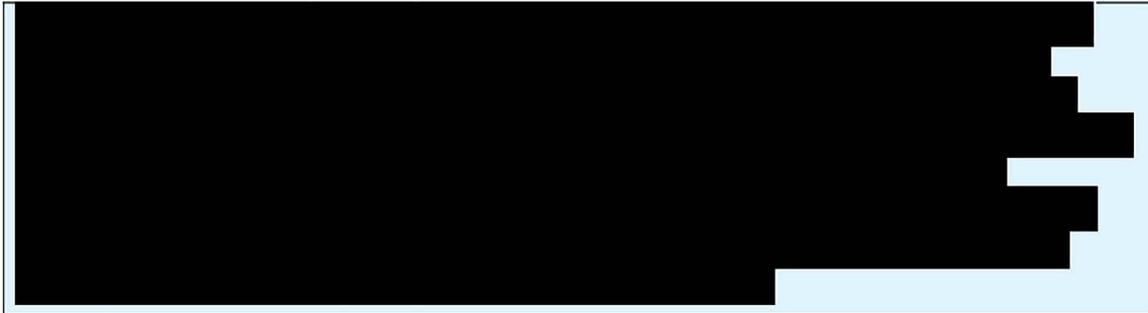
If the documents being provided by the Respondent are those of a parent or holding company, additional information should be provided for the entity/organization directly responding to this RFP. That additional information should explain the business relationship between the entities and demonstrate the financial stability of the entity/organization which is directly responding to this RFP.



2.3.5 Integrity of Company Structure and Financial Reporting - This section must include a statement indicating that the CEO and/or CFO, of the responding



entity/organization, has taken personal responsibility for the thoroughness and correctness of any/all financial information supplied with this proposal. The areas of interest to the State in considering corporate responsibility include the following items: separation of audit functions from corporate boards and board members, if any, the manner in which the organization assures board integrity, and the separation of audit functions and consulting services. The State will consider the information offered in this section to determine the responsibility of the Respondent under IC 5-22-16-1(d).



2.3.6 Contract Terms/Clauses - Please provide the requested information in RFP Section 2.3.6. Additional rows may be added if necessary.

Contract Term Identifier and Header	Suggested Language Change	Rationale for suggested change
Insurance	<p>The Contractor and its subcontractors (if any) shall secure and keep in force during the term of this Contract the following insurance coverages (if applicable) covering the Contractor for claims of nature which may in any manner arise out of or result from Contractor's performance under this Contract:</p> <ol style="list-style-type: none"> Commercial general liability, including contractual coverage, and products or completed operations coverage (if applicable), with minimum liability limits not -\$5,000,000 per occurrence unless additional coverage is required by the State. The State is to be included as an additional insured on a primary, non-contributory basis for any liability 	Changes requested to align with industry standards and ICF policies.



	<p>arising directly or indirectly under or in connection with this Contract.</p> <p>2. Business Automobile liability for owned, non-owned and hired autos with minimum liability limits not \$5,000,000 per occurrence. The State is to be included as an additional insured on a primary, non-contributory basis.</p> <p>3. Professional Liability/Errors and Omissions liability with minimum liability limits of \$1,000,000 per claim and in the aggregate. Coverage for the benefit of the State shall continue for a period of two (2) years after the date of service provided under this Contract.</p> <p>4. Fiduciary liability if the Contractor is responsible for the management and oversight of various employee benefit plans and programs such as pensions, profit sharing and savings, among others with limits no less than \$700,000 per cause of action and \$5,000,000 in the aggregate.</p> <p>5. Valuable Papers coverage, if applicable, with an Inland Marine Policy Insurance with limits sufficient to pay for the recreation and reconstruction of such records.</p> <p>6. Surety or Fidelity Bond(s) if required by statute or by the agency.</p> <p>7. Cyber Liability addressing risks associated with electronic transmissions, the internet, networks and informational assets, and having limits of no less than \$700,000 per claim/event and \$5,000,000 in</p>	
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	<p>the aggregate. The Contractor shall provide proof of such insurance coverage by tendering to the undersigned State representative an insurance industry standard ACORD form certificate of insurance prior to the commencement of this Contract and proof of workers' compensation coverage meeting all statutory requirements of IC § 22-3-2. In addition, proof of an "all states endorsement" covering claims occurring outside the State is required if any of the services provided under this Contract involve work outside of Indiana.</p> <p>B. The Contractor's insurance coverage must meet the following additional requirements:</p> <ol style="list-style-type: none">1. The insurer must have a certificate of authority or other appropriate authorization to operate in the state in which the policy was issued.2. Any deductible or self-insured retention amount or other similar obligation under the insurance policies shall be the sole obligation of the Contractor.3. The State will be defended, indemnified and held harmless to the full extent of any coverage actually secured by the Contractor in excess of the minimum requirements set forth above. The duty to indemnify the State under this Contract shall not be limited by the insurance required in this	
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	<p>Contract.</p> <p>4. The insurance required in this Contract, through a policy or endorsement(s), that all insurance policies and the Certificate of Insurance shall indicate, that should the policy be cancelled before the expiration date thereof, written notice of said cancellation will be delivered in accordance with the policy provisions, which shall not be less than thirty (30) days' notice of cancellation except for non-payment of premium which shall not be less than ten (10) days' notice of cancellation. shall include a provision that the policy and endorsements may not be canceled or modified without thirty (30) days' prior written notice to the undersigned State agency.</p> <p>5. Where permitted by law, The Contractor waives and agrees to require their insurer to waive their rights of subrogation against the State of Indiana.</p> <p>6. The limits of insurance required herein may be satisfied by a combination of primary and umbrella and/or excess insurance policies at the discretion of Contractor, so long as the total amount of insurance coverage provided is equal to or greater than the amount specified herein.</p> <p>C. Failure to provide insurance as required in this Contract may be deemed a material breach of</p>	
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Subcontractor (IVOSB), explain process followed to engage with potential MBE, WBE and IVOSB owned, Indiana certified businesses listed on Division of Supplier Diversity site. List the businesses invited to discuss the opportunity for potential partnership.



b. If not proposing each MBE, WBE or IVOSB subcontractor partnership, explain the rationale for declining to do so. Complete this for each category not proposed.

N/A See above

2.3.11 Evidence of Financial Responsibility – Removed at the request of the agency.

2.3.12 General Information - Each Respondent must enter your company's general information including contact information.

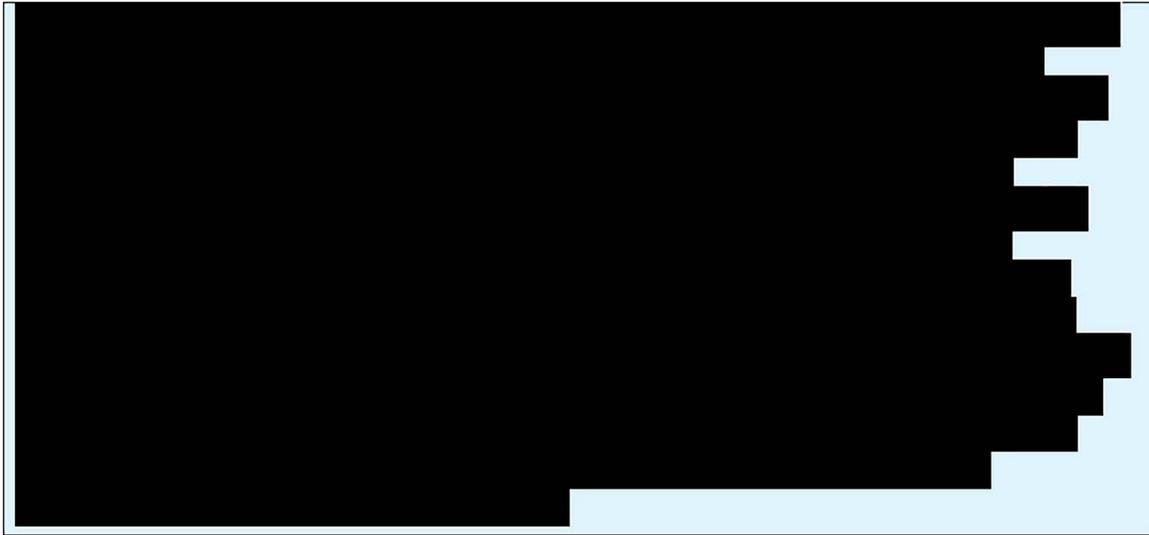
Business Information	
Legal Name of Company	ICF Macro, Inc
Contact Name	[Redacted]
Contact Title	[Redacted]
Contact E-mail Address	[Redacted]
Company Mailing Address	9300 Lee Highway
Company City, State, Zip	Fairfax VA 22031
Company Telephone Number	703-934-3000
Company Fax Number	703-934-3740
Company Website Address	www.icf.com



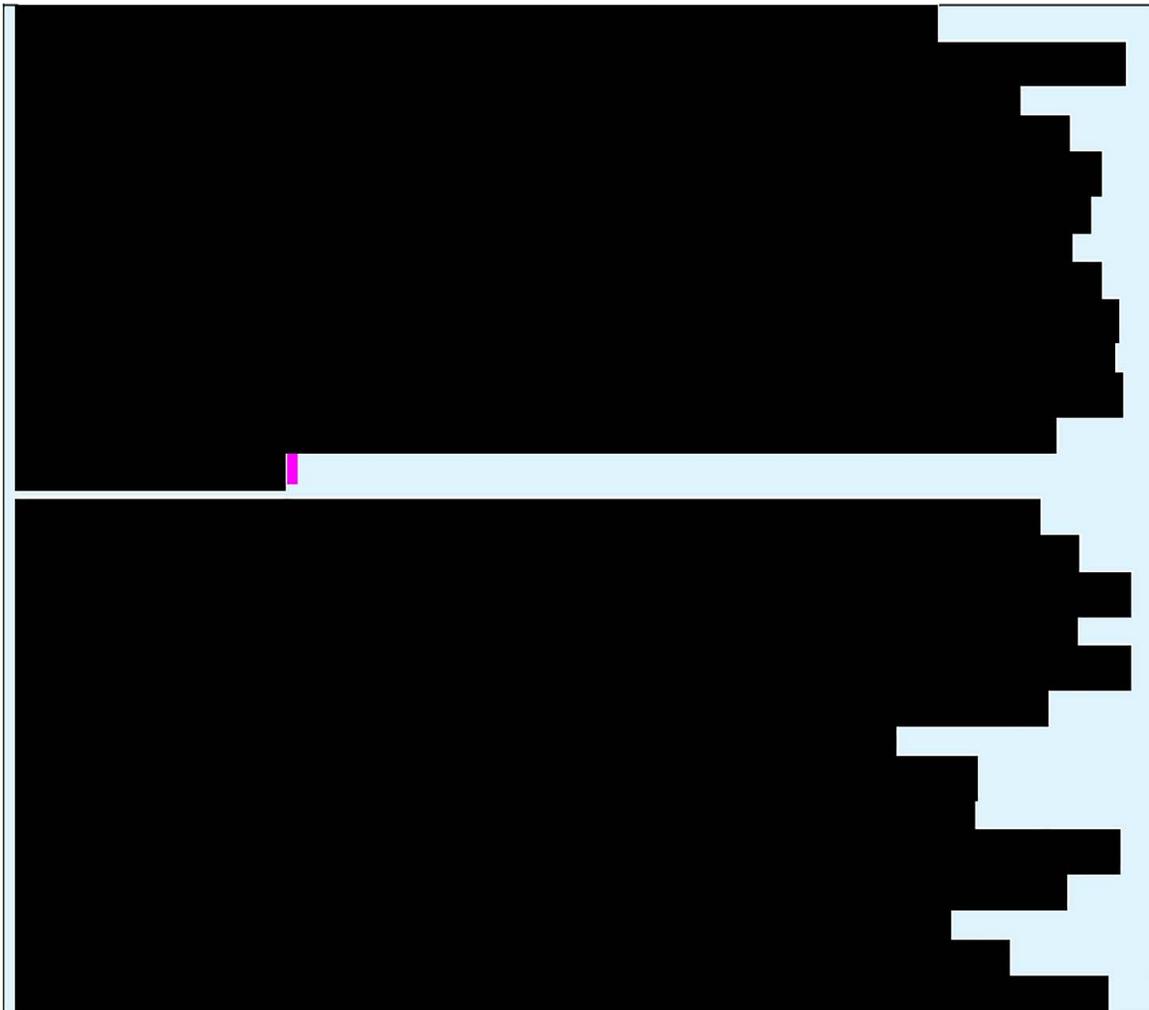
Federal Tax Identification Number (FTIN)	[REDACTED]
Number of Employees (company)	398 employees- ICF Macro; more than 7,000 employees for ICF Consulting Group Inc
Years of Experience	32 years for BRFSS contracts
Number of U.S. Offices	53
Year Indiana Office Established (if applicable)	January 2018
Parent Company (if applicable)	ICF Consulting Group, Inc
Revenues (\$MM, previous year)	[REDACTED]
Revenues (\$MM, 2 years prior)	[REDACTED]
% Of Revenue from Indiana customers	[REDACTED]

- a. Does your Company have a formal disaster recovery plan? Please provide a yes/no response. If no, please provide an explanation of any alternative solution your company has to offer. If yes, please note and include as an attachment.

[REDACTED]



b. What is your company's technology and process for securing any State information that is maintained within your company?





2.3.13 Experience Serving State Governments - Please provide a brief description of your company's experience in serving state governments and/or quasi-governmental accounts.







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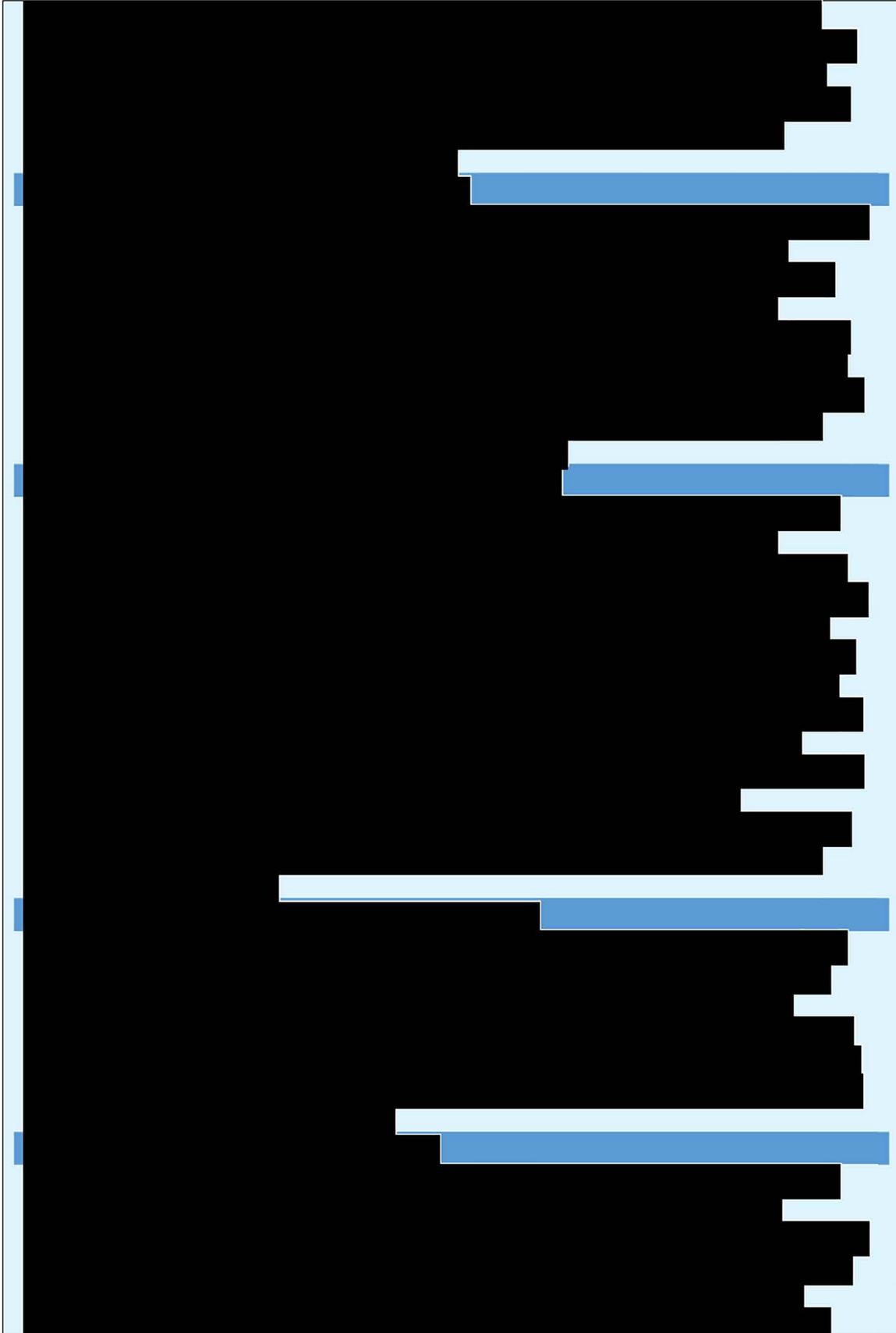
2.3.14 Experience Serving Similar Clients - Please describe your company's experience in serving customers of a similar size to the State with similar scope. Please provide specific clients and detailed examples.

[Redacted text block]





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2.3.15 Payment – Removed at the request of the agency.

2.3.16 Extending Pricing to Other Governmental Bodies – Removed at the request of the agency.