

**ATTACHMENT A**  
**MINORITY & WOMEN'S BUSINESS ENTERPRISES RFP SUBCONTRACTOR COMMITMENT FORM**

In accordance with IC 4-13-16.5 and 25 IAC 5, it has been determined that there is a reasonable expectation of Minority and/or Women Business Enterprise subcontracting opportunities on a contract awarded under this RFP. The MWBE Subcontractor Commitment form is **Attachment A**. The MWBE Subcontractor Commitment Form is to be submitted as a part of the Respondent's proposal. In order for the subcontractor commitment to result in evaluation points for the Respondent, the entity must be on the State of Indiana Certified M/W/IVOSB list at <https://www.in.gov/idoa/mwbe>.

If participation is met through use of respondents who supply products and/or services directly to the Respondent, the Respondent must provide a description of products and/or services provided that are directly related to this proposal and the cost of direct supplies for this proposal. Respondents must complete the Subcontractor Commitment Form in its entirety. All Respondents must utilize \$150,000 for their "Total Bid Amount". This "Total Bid Amount" is not intended to be a guarantee or reflection of actual contract value but rather is included for evaluation purposes. The Contractor will be held to their commitment percentage(s) rather than the estimated dollar amount(s). The MBE and/or WBE subcontractor amount and subcontractor percentage is based on the initial term of the contract for scoring purposes only. The subcontractor commitment shall apply to the life of the contract including any time after the initial term.

Failure to meet these goals will affect the evaluation of your Proposal. The Department reserves the right to verify all information included on the MBE/WBE Subcontractor Commitment Form.

**Prime Contractors must ensure that the proposed subcontractors meet the following criteria:**

- Must be on the State of Indiana Certified M/W/IVOSB list at <https://www.in.gov/idoa/mwbe>, **on or before** the proposal due date
- Prime Contractor must include with their proposal the subcontractor's M/WBE Certification Letter provided by IDOA, to show current status of certification.
- Each firm may only serve as one classification – MBE, WBE, or IVOSB (see section 1.22)
- A Prime Contractor who is an MBE or WBE must meet subcontractor goals by using other listed certified firms. Certified Prime Contractors cannot count their own workforce or companies to meet this requirement (see 25 IAC 5-6-2(d))
- **Must serve a Valuable Scope Contribution (VSC). The firm must serve a value-added purpose on the engagement, as confirmed by the State.**
- Must provide goods or services only in the industry area for which it is certified.
- Must be used to provide the goods or services specific to the contract.
- National Diversity Plans are generally not acceptable

**MINORITY & WOMEN'S BUSINESS ENTERPRISES RFP SUBCONTRACTOR LETTER OF COMMITMENT (MWBE)**

A signed letter(s), on company letterhead, from the MBE(s) and/or WBE(s) must accompany the MWBE Subcontractor Commitment Form. Each letter shall state and will serve as acknowledgement from the MBE and/or WBE of its subcontract amount, a description of products and/or services to be provided on this project, and approximate date the subcontractor will perform work on this contract. The MBE and/or WBE subcontractor amount and subcontractor percentage is based on the initial term of the contract for scoring purposes only. The subcontractor commitment shall apply to the life of the contract including any time after the initial term.

The State may deny evaluation points if the letter(s) is/are not attached, not on company letterhead, not signed and/or does not reference and match the subcontract amount, subcontract amount as a percentage of the "**TOTAL BID AMOUNT**" and the anticipated period that the Subcontractor will perform work for this solicitation.

By submission of the Proposal, the Respondent acknowledges and agrees to be bound the rules and requirements of the State's M/WBE Program. Questions involving the regulations governing the MWBE Subcontractor Commitment Form should be directed to: Division of Supplier Diversity at (317) 232-3061 or the Supplier Diversity website at <https://www.in.gov/idoa/mwbe>.

**STATE OF INDIANA MBE/WBE SUBCONTRACTOR COMMITMENT FORM**

RFP#: 22-71589

**TOTAL BID AMOUNT: \$150,000**

<input type="checkbox"/> MBE Firm	<input checked="" type="checkbox"/> WBE Firm	
Company Name: Axon Advisors LLC		Contact Person: Emily Brammer
Address: 333 N. Alabama St., Ste. 350 Indianapolis, IN 46204 USA		E-mail: emily.brammer@axonadvisors.com
Sub-Contract Amount: \$17,250		Telephone Number: (317) 800 - 7962
Sub-Contract Percentage of Total Bid: 11.5%		Fax Number: ( )
		Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> Provision of clinical staffing.
Provide approximate dates when Sub-Contractor will perform on this project: December 2022-December 2024		

<input checked="" type="checkbox"/> MBE Firm	<input type="checkbox"/> WBE Firm	
Company Name: Virag dba CPS Clinical Services		Contact Person: Saumiin Calcuttawala, PharmD
Address: 1001 W. Main Street Carmel, IN 46032		E-mail: carmelprescriptions@gmail.com
Sub-Contract Amount: \$12,750		Telephone Number: (317) 688-7050
Sub-Contract Percentage of Total Bid: 8.5%		Fax Number: (317) 575-1094
		Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u> CPS Clinical Services will closely work with Syra Health and provide trainers, care coordinators, SMEs, and other necessary personnel for the implementation of the competency attainment services.
Provide approximate dates when Sub-Contractor will perform on this project: December 2022-December 2024		

Syra Health  
 Respondent Firm  
 1119 Keystone Way N Suite #201  
 Address  
 Carmel, IN 46032  
 City/State/Zip Code  
 Deepika Vuppalachchi, PhD  
 Representa ve  
 9/19/2022

219-237-8808  
 Telephone Number  
 Fax Number  
 deepikav@syrahealth.com  
 Email Address  
  
 Authorizing Signature  
 Deepika Vuppalachchi, CEO

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Date

Printed Name and Title

Please check if additional forms are attached.

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**FORM MUST BE COMPLETED IN ITS ENTIRETY WITH COMPLETED LETTERS OF COMMITMENT.**