

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. The amount entered in "**TOTAL BID AMOUNT**" should match the amount entered in the **Attachment D**, Cost Proposal Template. 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 IVOBS (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#: 22-70307

DUE DATE: February 2, 2022

TOTAL BID AMOUNT: \$1,028,975.00

☐ MBE Firm ☒ WBE Firm			
Company Name: JB Graphics, Inc	Contact Person: Jane Berry		
Address: 650 East Carmel Dr. Suite 240 Carmel, Indiana 46032	E-mail: jane@jbgraphicsinc.com		
Sub-Contract Amount: \$15,000.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Telephone Number: (317) 819-0008</td> <td style="width: 50%;">Fax Number: (317) 819-0010</td> </tr> </table>	Telephone Number: (317) 819-0008	Fax Number: (317) 819-0010
Telephone Number: (317) 819-0008	Fax Number: (317) 819-0010		
Sub-Contract Percentage of Total Bid: 1.5%	Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract: JB Graphics, Inc. is pleased to have the opportunity to participate with Choices in providing marketing services as part of the potential contract to provide Mobile Crisis Services.		
Provide approximate dates when Sub-Contractor will perform on this project: Twelve-month contract period			

☐ MBE Firm ☐ WBE Firm			
Company Name:	Contact Person:		
Address:	E-mail:		
Sub-Contract Amount:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Telephone Number: ()</td> <td style="width: 50%;">Fax Number: ()</td> </tr> </table>	Telephone Number: ()	Fax Number: ()
Telephone Number: ()	Fax Number: ()		
Sub-Contract Percentage of Total Bid:	Describe service/product to be provided and how this is a Valuable Scope Contribution of the Contract:		
Provide approximate dates when Sub-Contractor will perform on this project:			

Choices Coordinated Care Solutions

Respondent Firm

7941 Castleway Drive

Address

Indianapolis, IN 46250

City/State/Zip Code

Michael Goldberg, Chief Executive Officer

Representative

02/18/2022

Date

(317) 726-2121

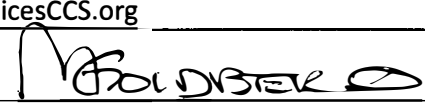
Telephone Number

(866) 849-3866

Fax Number

MGGoldberg@ChoicesCCS.org

Email Address



Authorizing Signature

Michael Goldberg, CEO

Printed Name and Title

☐ Please check if additional forms are attached.

Page _____ of _____

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