



**RFI NO: RFI 2020001 Professional Employer Organization (PEO) Services**

**ISSUED: September 11, 2020**

**RESPONSES DUE: September 25, 2020, 11:59 PM (CST)**

This RFI is issued solely for information and planning purposes and does not constitute a solicitation or contract. All material submitted to Workforce Solutions Alamo (WSA) becomes public property and is subject to the Texas Open Records Act upon receipt. No information submitted in response to the RFI should contain proprietary and/or confidential information.

Responses to the RFI will not be returned. Accordingly, responses to this notice are not offers and cannot be accepted by WSA as such or to form or suggest a contract or commitment of any nature. Respondents are solely responsible for all expenses associated with responding to this RFI.

The purpose of this RFI is to gauge the level of interest and available sources in the vendor community that can provide PEO services as a total solution to employee management by replacing the majority of Human Resources. WSA is requesting responses to the questions outlined in this RFI for PEO Services. WSA's intent is to potentially issue a solicitation for this service. Any individual or firm who wishes to be included in the notification when/if a solicitation is released should respond to this RFI and include your company name, point of contact name, email address, and telephone number at the bottom of this cover page. Oral communications are not acceptable in response to this notice.

**SUBMISSION OF RESPONSES:** All comments are due by September 25, 2020 at 11:59 PM (CST). To be considered, all comments, questions, and suggestions must be submitted with this cover sheet via email to [Procurement@wsalamo.org](mailto:Procurement@wsalamo.org).

The undersigned (Respondent), by their signature, acknowledges that they are authorized to represent the organization below. The Respondent, by submitting and signing below, acknowledges that this request is not a solicitation and will not result in a contract award, and that the information provided may be utilized in possible future solicitations.

\_\_\_\_\_  
Signature of Person Authorized to Sign                      Signer's Name and Title (Please Print)

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_



Please review the questions below. You may provide your answers on another worksheet.

#### Basic Information

1. Company Name
2. Company Location
3. Contact Information
4. Company Description
5. Company History

#### Existing Operations

1. How many years has your PEO been in business?
  - a. Indicate if the PEO is a State of Texas based corporation and whether it has offices in WSA's service area.
  - b. Provide a copy of your State License.
  - c. Indicate your Federal Employer Identification Number and if the PEO has been certified as a Historically Underutilized Business (HUB) Enterprise for the purposes of doing business with state government, include a copy of HUB Certification.
2. Does your organization have membership in a National Association Organization to assure WSA that the PEO is current with industry developments?
3. Does your organization have membership in an Employer Services Assurance Corporation (ESAC)?
4. Does your organization have a Workers' Compensation Certification Program evidencing that the PEO's risk management program is meeting proven insurance industry risk management best practices to reduce work-related accidents and control losses?
5. Describe your organization's experience with administrative, human resources, and risk management services.

#### Potential Operations

1. Please describe your rate structure/components.
2. Do you require a set-up fee?
3. What concerns would you have about providing PEO services for WSA?