

The HealthCare Connection, Inc

REQUEST FOR PROPOSAL (RFP)

Audit, Tax, Cost Report

INDEPENDENT AUDIT
The HealthCare Connection, Inc
1401 Steffen Ave
Cincinnati, Ohio 45215
Phone: | Fax:

Prepared By: Jolene Joseph
Date: October 27, 2023

REQUEST FOR PROPOSAL
INDEPENDENT AUDIT
Cincinnati - Ohio

SUBMISSION DEADLINE: November 27, 2023, 5:00PM close of business
QUESTION SUBMISSION DEADLINE: November 8, 2023

Questions may be submitted in written form no later than November 8, 2023 to:

RFP Contact Name: Jolene Joseph
Contact Address: 1401 Steffen Ave
Cincinnati, Idaho 45215
Telephone Number: 513-483-3080
Email Address: Jolenej@healthcare-connection.org

INTRODUCTION

The HealthCare Connection, Inc invites and welcomes proposals for their Independent Audit project. Based on your previous work experience, your firm has been selected to receive this RFP and is invited to submit a proposal. Please take the time to carefully read and become familiar with the proposal requirements. All proposals submitted for consideration must be received by the time as specified above under the "SUBMISSION DEADLINE."

BIDDERS SHOULD NOTE THAT ANY AND ALL WORK INTENDED TO BE SUBCONTRACTED AS PART OF THE BID SUBMITTAL MUST BE ACCOMPANIED BY BACKGROUND MATERIALS AND REFERENCES FOR PROPOSED SUBCONTRACTOR(S) – NO EXCEPTIONS.

PROJECT AND LOCATION

The bid proposal is being requested for Independent Audit which is or shall be located at 1401 Steffen Ave, Cincinnati, Ohio 45215.

PROJECT OBJECTIVE

The objective and ultimate goal for this project is to obtain independent audit, tax and cost report service from a cpa firm..

PROJECT SCOPE AND SPECIFICATIONS

The Project Scope and Specification are:

Independent Audit
Annual Tax Filing
Cost Report

SCHEDULED TIMELINE

The following timeline has been established to ensure that our project objective is achieved; however, the following project timeline shall be subject to change when deemed necessary by management.

MILESTONE

DATE

Independent Annual Audit, Tax, Cost Report

April 30, 2024

PROPOSAL BIDDING REQUIREMENTS

PROJECT PROPOSAL EXPECTATIONS

The HealthCare Connection, Inc shall award the contract to the proposal that best accommodates the various project requirements. The HealthCare Connection, Inc reserves the right to award any contract prior to the proposal deadline stated within the "Scheduled Timeline" or prior to the receipt of all proposals, award the contract to more than one Bidder, and refuse any proposal or contract without obligation to either The HealthCare Connection, Inc or to any Bidder offering or submitting a proposal.

DEADLINE TO SUBMIT PROPOSAL

All proposals must be received by The HealthCare Connection, Inc no later than 5:00PM close of business on November 27, 2023 for consideration in the project proposal selection process.

PROPOSAL SELECTION CRITERIA

Only those proposals received by the stated deadline will be considered. All proposals, submitted by the deadline, will be reviewed and evaluated based upon information provided in the submitted proposal. In addition, consideration will be given to cost and performance projections. Furthermore, the following criteria will be given considerable weight in the proposal selection process:

- Proposals received by the stipulated deadline must be in the correct format.
- Bidder's alleged performance effectiveness of their proposal's solution regarding the Project Objective of The HealthCare Connection, Inc.
- Bidder's performance history and alleged ability to timely deliver proposed services.
- Bidder's ability to provide and deliver qualified personnel having the knowledge and skills required to effectively and efficiently execute proposed services.
- Overall cost effectiveness of the proposal.

The HealthCare Connection, Inc shall reserve the right to cancel, suspend, and/or discontinue any proposal at any time they deem necessary or fit without obligation or notice to the proposing bidder/contractor.

PROPOSAL SUBMISSION FORMAT

The following is a list of information that the Bidder should include in their proposal submission:

Summary of Bidder Background

- Bidder's Name(s)
- Bidder's Address
- Bidder's Contact Information (and preferred method of communication)
- Legal Form of Bidder (e.g. sole proprietor, partnership, corporation)
- Date Bidder's Company Formed
- Description of Bidder's company in terms of size, range and types of services offered and clientele.
- Bidder's principal officers (e.g. President, Chairman, Vice President(s), Secretary, Chief Operating Officer, Chief Financial Officer, General Managers) and length of time each officer has performed in his/her field of expertise.
- Bidder's Federal Employee Identification Number (FEIN)
- Evidence of legal authority to conduct business in Ohio (e.g. business license number).
- Evidence of established track record for providing services and/or deliverables that are the subject of this proposal.

Financial Information

- State whether the Bidder or its parent company (if any) has ever filed for bankruptcy or any form of Reorganization under the Bankruptcy Code.
- State whether the Bidder or its parent company (if any) has ever received any sanctions or is currently under investigation by any regulatory or governmental body.

Proposed Outcome

- Summary of timeline and work to be completed.

Equipment or Service

- List any and all equipment or services required for this proposed project and the number of each.
- Detailed estimated cost for each piece of equipment or service.
- List any accommodation, services, or space required from The HealthCare Connection, Inc, along with a brief explanation.

Cost Proposal Summary and Breakdown

- A detailed list of any and all expected costs or expenses related to the proposed project.
- Summary and explanation of any other contributing expenses to the total cost.
- Brief summary of the total cost of the proposal.