

INVITATION FOR BID (IFB) ADDENDUM

Addendum No. 1

Date of Addendum: 10/25/2024

IFB #2024-WORK COMP INS

Agency: South Central IL MTD

Due Date, Time: November 14, 2024, 10:00 a.m. CST

SCOPE OF ADDENDUM

This addendum details additions to the RFP based on questions received. Following are questions asked and the corresponding answers.

Questions	Answers
What is your expiring premium?	\$279,287
Can you provide detail on claims over \$50k?	Detail Below:
What are the addresses of all of your locations? What is the highest floor of each address?	All buildings are ground level. 1616 E McCord St, Centralia, IL 62801 100 North Locust, Centralia, IL 62801 15193 North Illinois Hwy 37, Suite B, Mt. Vernon, IL 62864 709 North Bryan St. West Frankfort, IL 62896 12778 Drivein Road, Breese, IL 62230 854 E. Olive Street, Du Quoin, IL 62832 403 N. Main St, Ina, IL 62846 200 A Westgate Ave, Salem, IL 62881 915 West Highway 50, O'fallon, IL 62269
Do you use any subcontractors? If so, what percentage of work is subcontracted?	No
Is any work sublet without certificates of insurance?	No
Are there any employees over the age of 60?	Yes
Are there any employees with physical handicaps?	No
Are there any seasonal employees?	No

Do you lease any employees from other employers?	No
Do employees travel out of state for work? If so, how often and where?	No
Are employee health plans provided?	Yes
Do any employees predominately work from home? If so, how many?	No
Has there been any tax liens or bankruptcy in the last five years?	No
Have you been non-renewed or had coverage canceled in the last three years?	No
Is there any undisputed and unpaid workers compensation premium due from you or any commonly owned enterprises?	No
Would you like to include any type of deductible? Either for Medical or Indemnity?	No
Who should I put down as the contact information for the following: Inspection: (Name, Phone Number, Email) Accounting Record: (Name, Phone Number, Email) Claims Info: (Name, Phone Number, Email)	Inspection/Claims: Cindy Holmes; cholmes@southcentraltransit.org Accounting Record: Jordan Niepoetter; jniapoetter@southcentraltransit.org
Who is the owner?	No owner, we are a transit authority.
Do you provide a written application?	Yes
Do you provide a written job description?	Yes
Do you provide background/reference checks?	Yes

Do you provide pre-hire drug testing?	Yes
Do you provide pre-hire physical fitness tests?	No
Do you have a formal Injury & Illness Prevention Plan?	Yes
Do you have a formal Return to Work Plan?	Yes
Do you have Quarterly (or more) Safety Meetings?	Yes
Do you have Quarterly (or more) Safety Training?	Yes
Do you have a Safety Incentive Plan?	Yes
Is the ownership active in day to day operations?	N/A
Is there a full time risk/safety manager?	Yes
Is there a formal and random drug testing program in place?	Yes
Is there a formal post accident drug testing program in place for workplace injuries?	Yes
Upon termination are personnel files documented for any potential workplace injuries?	Yes
Is there a formal accident investigation and claims reporting process?	Yes
Do more than 50% of employees receive group health through you that is 50% or more employer paid?	Yes
Is 100% of your work done for municipal bus?	Yes
What is the radius of your operation?	Marion County, Clinton County, Washington County, Perry County, Franklin County, St. Clair County, Jefferson County

Are all of your vehicles bus's?	No
What percentage (if any) of your trips involve handling any luggage?	0
What percentage (if any) of your trips involve helping to lift, lower passengers into, out of the vehicle?	0
What percentage (if any) of your trips involve multiple employees per vehicle at a time?	0
What percentage (if any) of your trips require an employee to be away from home for one or more nights?	0
Is all of your maintenance (preventative maintenance and tires) done by an employee?	Yes, onsite maintenance department.
Any roadside repairs completed?	No
Do you have any non-owned equipment that your employees work on?	Yes, maintenance works on outside vehicles owned by not-for-profit and/or governmental agencies.
Do you subcontract out any work?	No

Claims over \$50k

DOL: 8/27/2020

Employee was pre-tripping bus, when she opened doors to wheelchair lift, Lift free fell due to hydraulic system “bleeding off.” Natural reaction, she put her hands up in an attempt to catch the door injuring both hands. This claim is currently in litigation. They are waiting for a settlement demand from claimant’s attorney. Looks like if they do not receive a settlement demand they are going to proceed with trying the case. Claimant no longer works for us.

DOL: 9/23/20 Employee was rear ended. Other party was at fault. This claim is also in litigation. Looks like it is getting close to settling soon. Hopefully subrogation will apply against the at fault party. Claimant no longer works for us.

DOL: 10/29/22 Employee was in training. She stepped out of bus injuring her left foot. This claim is also in litigation. Claimant no longer works for us.

DOL: 11/7/22 Employee was working on bus, stepped out of bus onto alignment rack injuring left ankle. Employee is working full duty with no restrictions. No attorney representation. Claim is still open. He has had 1 surgery, 1 doctor says he needs another surgery. IME doctor disagrees.

DOL: 7/14/23 Claimant was lowering wheelchair lift. He went to walk around lift, tripping over the lift. He fell, hitting head on concrete pole, injuring knee, neck, and abdomen. This claim is in litigation. Claimant's attorney is non-responsive. Work comp planning to file motion for hearing 10/17/24. Claimant no longer works for us.

DOL: 9/1/2023 Employee was putting client's groceries on the wheelchair lift of bus and then co-worker was taking the packages off lift. Co-worker started lowering the lift without employee's knowledge and she fell between the lift and bus. Employee is attorney represented. She is currently off work. Claim is in litigation and still open.