

Notice of Intent to Award

Solicitation Number	357263	Award Date	10/18/2023 3:28 PM CDT
Solicitation Title	Cost Accounting Services		
Buyer Name	Daniel Drumwright	Buyer Email	Daniel.Drumwright2@nashville.gov
BAO Rep	Angie Martin	BAO Email	Angie.Martin@nashville.gov

Awarded Supplier(s)

In reference to the above solicitation and contingent upon successful contract negotiation, it is the intent of the Metropolitan Government of Nashville and Davidson County to award to the following supplier(s):

Metropolitan Gover	rnment of Nashville and Davidson Co	unty to a	award to the	following suppl	ier(s):
Company Name	Maximus US Services	Compa	ny Contact	Anastasia Navar	ro
Street Address	1600 Tysons Blvd. Suite 1400				
City	McLean	State	VA	Zipcode	22102
Company Name		Compa	ny Contact		
Street Address					
City		State		Zipcode	
Company Name		Compa	ny Contact		
Street Address					
City		State		Zipcode	
Certificate of Insurance The awarded supplier(s) must submit a certificate of insurance (COI) indicating all applicable coverage required by the referenced solicitation. The COI should be emailed to the referenced buyer no more than 15 days after the referenced award date.					
Equal Business Opportunity Program					

Where applicable, the awarded supplier(s) must submit a signed copy of the letter of intent to perform for any and all minority-owned (MBE) or woman-owned (WBE) subcontractors included in the solicitation response. The letter(s) should be emailed to the referenced business assistance office (BAO) rep no more than two business days after the referenced award date.

Yes, the EBO Program is applicable.	No, the EBO Program is not applicable.
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Monthly Reporting

Where applicable, the awarded supplier(s) will be required monthly to submit evidence of participation and payment to all small (SBE), minority-owned (MBE), women-owned (WBE), LGBT-owned (LGBTBE), and service disabled veteran owned (SDV) subcontractors. Sufficient evidence may include, but is not necessarily limited to copies of subcontracts, purchase orders, applications for payment, invoices, and cancelled checks.

Questions related to contract compliance may be directed to the referenced BAO rep.

Yes, monthly reporting is applicable.

No, monthly reporting is not applicable.

Public Information and Records Retention

Solicitation and award documentation are available upon request. Please email the referenced buyer to arrange.

A copy of this notice will be placed in the solicitation file and sent to all offerors.

Right to Protest

Per MCL 4.36.010 – any actual or prospective bidder, offeror, or contractor who is aggrieved in connection with the solicitation or award of a contract may protest to the purchasing agent. The protest shall be submitted in writing within ten (10) days after such aggrieved person knows or should have known of the facts giving rise thereto.

Supervisor (Initial)

Miduelle d. Hernander Lane

Michelle A. Hernandez Lane

Purchasing Agent & Chief Procurement Officer

1	RFQ 357263 Cost Accounting Services Evaluation Team/Review Board Score Sheet				
Offeror	Cherry Bekaert Advisory LLC	Maximus US Services	MGT of America Consulting, LLC		
Contract Acceptance	Yes	Yes	Yes		
Referenced Projects (20 Points) Qualifications and Experience (25 Points)	13.00	20.00	17.00		
Business Plan (10 Points)	10.00	10.00	8.00		
Small and Minority Business Participation and Inclusion/ Diversity Practices (15 Points)	6.00	8.00	5.00		
Cost (40 Points) Total Evaluation Scores	29.51 73.51	22.27 85.27	30.00 83.00		

Evaluation Comments

Cherry Bekaert Advisory LLC

Strengths

Provided detailed information for referenced projects. Provided detailed information and experience on Metro Projects over the past (5) five years. Clearly defined Firm's financial capacity to perform work. Provided detailed information on firm's related project experience. Provided Certified Public Accountant license(s). Clearly defined project team's organizational structure and responsities of all key team members. Organizational Chart demonstrated relevant experience. Included resumes of key individuals. Detailed team members' past performances on past projects. Provided detailed information on subcontractors'/sub-consultants' qualifications to produce the required outcomes. Provided a detailed business plan covering the firm's ability, roles of each member of the proposed team, proposed service quality program, and approach to work. Provided detailed information on how the requirements and provisions of the scope of work will be implemented. Described in detail the project management methodology that will be utilized. Described in detail firm's approach to managing the referenced project. Project Management Plan clearly defined project management process, tasks and deliverables. Proposed project management approach provided insight into the proposer's capability to manage the project, respond to day-to-day problems, manage issues, provide regular status reports, coordinate staff, manage project resources, project documentation, and configuration controls. Detailed process controls to be put in place to ensure the scope of services are performed in a timely and accurate manner. Identified risks, challenges, and concerns the firm may have in performing the scope of work and explain your firm's approach in mitigating those concerns.

Weaknesses

Two of three referenced projects not of a similar size, scope, and complexity of Metro. Project dates for referenced projects do not align with information included in Qualifications and Experience. Involved in past. Itigations where the firm was a defendant. Lack of clarity pertaining to firm's involvement in litigation where the firm was a defendant. Failed to provide details pertaining to proposed cost allocation software. Lack of manpowe capacity dedicated to meet Metro's needs. Limited cost allocation experience (services provided only within two jurisdictions).

Maximus US Services

Strengths

All referenced projects of a similar size, scope, and complexity as Metro. Provided all requested information for referenced projects. Provided detailed information and experience on Metro Projects over the past (5) five years. Clearly defined Firm's financial and manpower capacity to perform work. Clearly defined Firm's experience and licensing agreement of Cost Allocation Software. Provided clarity on firm's current outstanding litigation(s) related to cost services. Provided detailed information on firm's related project experience. Provided Certified Public Accountant license(s). Clearly defined project team's organizational structure and responsibilities of all key team. Organizational Chart demonstrated extensive relevant experience Included resumes of key individuals. Detailed team members' past performances on projects of a similar size, scope, and complexity. Provided detailed information on subcontractors'/sub-consultants' qualifications to produce the required outcomes. Provided a detailed business plan covering the firm's ability, roles of each member of the proposed team, proposed service quality program, and approach to work. Provided detailed information on how the requirements and provisions of the scope of work will be implemented. Described in detail the project management methodology that will be utilized. Described in detail firm's approach to managing the referenced project. Project Management Plan clearly defined project management process, tasks and deliverables. Proposed project management approach provided insight into the proposer's capability to manage the project, respond to day-to-day problems, manage issues, provide regular status reports, coordinate staff, manage project resources, project documentation, and configuration controls. Detailed process controls to be put in place to ensure the scope of services are performed in a timely and accurate manner. Identified risks, challenges, and concerns the firm may have in performing the scope of work and approach in mitigating those con

Weaknesses

MGT of America Consulting, LLC

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Weaknesse

Failed to include the dates and timelines for completing the services for their referenced projects. Failed to include the cost for their referenced projects. Proposed subcontractor(s) lacked experience providing cost allocation services. Did not include project timeline for Business Plan.

Solicitation Title & Number			RFP Cost Points	RFP SBE/SDV Points	Total Cost Points
RFQ 357263 Cost Accounting Services			24	6	30
		SBE/SDV Participation	RFP Cost	RFP SBE/SDV	Total Cost
Offeror's Name	Total Bid Amount	Amount	Points	Points	Points
MGT of America Consulting, LLC	\$167,768.69	\$6,710.75	24.00	6.00	30.00
Cherry Bekaert Advisory LLC	\$171,294.57	\$6,851.78	23.51	6.00	29.51
Maximus US Services	\$247,500.00	\$9,900.00	16.27	6.00	22.27

metropolitan government of nashville & davidson county



for diversity, equity, and inclusion practices

Solicitation Number:	357263	Questions?
Project Title:	Cost Accounting Services	Email BAO@Nashville.gov
Date:	10/3/2023	

submit completed evaluation form to BAO@Nashville.gov.

Vendor: Cherry Bekaert Contact Person: Aurpon Bhattacharya Email: aurpon.bhattacharya@cbh.com Phone: 703-581-2492 Address: 222 2nd Ave S Ste 1240, Nashville, TN 37201 Other:	Vendor De	etails
Address: 222 2nd Ave S Ste 1240, Nashville, TN 37201	Vendor:	Cherry Bekaert Contact Person: Aurpon Bhattacharya
	Email:	aurpon.bhattacharya@cbh.com Phone: 703-581-2492
Other:	Address:	222 2nd Ave S Ste 1240, Nashville, TN 37201
	Other:	

Programatic Review

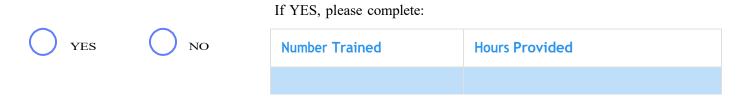
Do you have a specific program to promote the use of black and brown owned, women-owned, LGBT-owned, service-disabled veteran-owned, or small businesses?			
	f NO, p <u>roceed to page 3.</u> I form of a policy manual or	_	
Do you have measurable goals non-government projects?	for the utilization of tl	nese types of bu	usinesses on
YES NO	Firm Type	Goal	Actual
	Minority Owned		
If YES, please provide both the goal and actual achievement	Woman Owned		
for your most recently	LGBT Owned		
completed fiscal year>	Service Disabled Veteran Owned		
	Small Business		
Do you have an employee dediction this program?	cated, in whole or in p	art, to the admi	inistration of
YES NO	Program	Staff	
ICVEC along 11	Name		
If YES, please provide>	% of time spent on program		
	Email/Phone		

Mentorship

Do you participate in any government - sponsored mentorship programs assisting black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?

YES O	NO	Government Sponsor	Business Mentored
If YES, please list them:			

Do you provide industry specific training to black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?



Briefly, is there anything else about your diversity, equity, and inclusion practices that we should know?

BELOW TO BE COMPLETED BY METRO STAFF

Total Score: 6 Initial: AM

QUESTION	Score	Comment
1	1	
2	0	Overall plan for Diversity, Equity and
3	3	Inclusion Practices lacked detail. Weak Programmatic Review.
4	1	Trogrammatic Neview.
5	1	

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Date:	10/3/2023	

submit completed evaluation form to BAO@Nashville.gov.

Vendor D	Details
Vendor:	Maximus US Services, Inc. Contact Person: Anastasia Navarro
Email:	rfpinfo3@maximus.com Phone: 703-251-8500
Address:	1600 Tysons Blvd Suite 1400, McLean, VA 22102
Other:	

Programatic Review

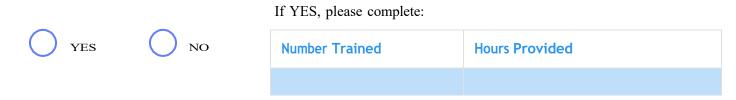
Do you have a specific program to promote the use of black and brown owned, women-owned, LGBT-owned, service-disabled veteran-owned, or small businesses?								
YES NO If NO, proceed to page 3. If yes, upload documentation in the form of a policy manual or similar document.								
Do you have measurable goals for the utilization of these types of businesses on non-government projects?								
YES NO	Firm Type	Goal	Actual					
	Minority Owned							
If YES, please provide both the goal and actual achievement	Woman Owned							
for your most recently	LGBT Owned							
completed fiscal year>	Service Disabled Veteran Owned							
	Small Business							
Do you have an employee dedicated, in whole or in part, to the administration of this program?								
YES NO	Program	Staff						
ICVEC along 11	Name							
If YES, please provide>	% of time spent on program							
	Email/Phone							

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Do you provide industry specific training to black and brown owned, women owned, LGBT owned, service disabled veteran owned, or small businesses?



Briefly, is there anything else about your diversity, equity, and inclusion practices that we should know?

BELOW TO BE COMPLETED BY METRO STAFF

Total Score: 8 Initial: AM

QUESTION Score Comment

QUESTION	Score	Comment
1	3	Overall plan for Diversity, Equity and
2	2	Inclusion Practices lacked detail. Strong
3	3	programmatic review. Mentorship lacked detail.
4	0	
5	0	

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Date:	10/3/2023	

submit completed evaluation form to BAO@Nashville.gov.

Vendor D	Details
Vendor:	MGT of America Consulting, LLC Contact Person: Allen Malony
Email:	rcvrfp@mgtconsulting.com Phone: 888-302-0899
Address:	4320 W Kennedy Blvd Suite 200, Tampa, FL 33609
Other:	

Programatic Review

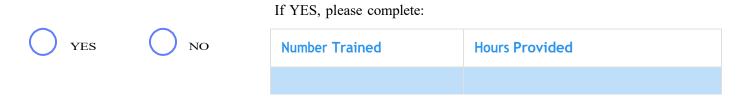
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completed fiscal year>	Service Disabled Veteran Owned							
	Small Business							
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ICVEC along 11	Name							
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If YES, please list them:			

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Briefly, is there anything else about your diversity, equity, and inclusion practices that we should know?

BELOW TO BE COMPLETED BY METRO STAFF

Total Score: 5 Initial: AM

QUESTION Score Comment

QUESTION	Score	Comment
1	0	
2	1	Overall plan for Diversity, Equity and Inclusion Practices lacked
3	0	detail. Weak Programmatic Review.
4	3	Review.
5	1	

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BAO Specialist: Angie Martin

Contract Specialist: Daniel Drumwright

Date: 10/16/23

Department Name: Finance/ Metro Wide

RFP/ITB Number: 357263

Project Name: Cost Accounting Services

Primary Contractor*	Prime Bid Amount	Total Proposed SBE/SDV (\$)	Acknowledged SBE/SDV Requirement	SBE/SDV Requirement (%)	Comments
Maximus US Services	\$ 247,500	TBD	Yes	4%	The prime IS NOT a metro Approved SBE. Acknowledged 4% SBE/SDV requirement over life of the project and consequences of misrepresentation.

DocuSign Envelope ID: F56C6C3C-C2DF-48	350-8375-F364EF1FE54A							
		Statement (of M/WBE I	Jtilization				
Proposer's/Firm's Name: Maximus US Service			•	Proposer's Phone	_{#:} 850 - 386-1101			
Solicitation Title: Cost Accounting Services					_{ddress:} Keithfrazier@	maximus.com		
Solicitation #: 357263				Amount Self-perfo				
Proposer's/Firm's Ownership: Non-M/WBE	-			Total Bid Amount:	247,500			
Proposed EBO Goal (%): 15% MBE% 0	WBE%			EBO Goal Met? (Y/	N) YES			
The following MWBE* subcontractor(s)/supplier(s)	will be utilized for the performance of this	project:						
MBE/WBE Firm Name	MBE/WBE Firm Address	Phone/E-Mail	Certificate Type (MBE or WBE)	* MBE/WBE Group Type *	Code # UNSPS/NAICS	Description of Work	MBE/WBE Dollars (\$)	Percent of Total Contra
KBMD & Associates	315 10th Ave. Suite 118	615.346.4016	MBE	1		Accounting Services	61,875	25%
2			Select	Select				
3			Select	Select				
4			Select	Select				
5			Select	Select				
			Select	Select				
6			Select	Select				
								,
I am the duly authorized representative and certify t	the facts and representations contained in	this form and support	ting documents are tr	ue and correct.				
Authorized Representative (Printed Name/Title							Date	09/14/202
*Note: MWBE is defined as business enterprise maintaining a signific	ant business prescience in the Program Area & performin		ion that is owned by one or n		frican Americans (2) Native Ame	ricans, (3) Hispanic Americans, (4) Asian Am	ericans, and (5) W	men.
Has Prime Complied with EBO Goal? Y	ES		If No, Good Fait	th Efforts Met?	BAO Only			
BAO Representative: Angie Martin		Buyer: Daniel			Herbert	Majors Date:	10/16/	23
Total MBE Subcontracting Total WBE Subcontracting		\$\frac{61875}{9}\$						

\$ 61875

BAO Notes:

Total MBE/WBE Participation:

25