



Small Business Development Division Project Worksheet

Project/Contract Title: WORKER'S COMPENSATION MEDICAL BILL REVIEW SERVICES **Received Date:** 05/03/2013
Project/Contract No: RQID1300112 **Funding Source:**
Department: INTERNAL SERVICES **INTERNAL SERVICES FUND**
Estimated Cost of Project/Bid: \$3,000,000.00 **Resubmittal Date(s):**
Description of Project/Bid: To establish a contract to provide for medical bill review services for the Worker's Compensation Program for Miami-Dade County

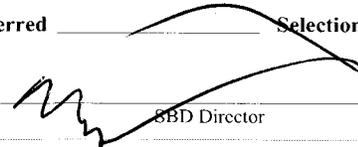
Contract Measures Recommendation		
Measure	Program	Goal Percent
No Measure	SBE	

Reasons for Recommendation
NO MEASURE - BID WAIVER
There are seven (7) SBE firms certified in the required Commodity Code
Commodity Code: 94610-Accounting And Billing Services (Including Payroll Services)

Small Business Contract Measure Recommendation				
Subtrade	Cat.	Estimated Value	% of Items to Base Bid	Availability
	SBE			164
Total				

Living Wages: YES NO
Responsible Wages: YES NO

Responsible Wages and Benefits applies to all construction projects over \$100,000 that do not utilize federal fund. For federally funded projects, unless prohibited by federal or state law or disallowed by a governmental funding source, the HIGHER wage between Davis Bacon and Responsible Wages and Benefits shall apply.

REVIEW RECOMMENDATION			
Tier 1 Set Aside _____	Tier 2 Set Aside _____		
Set Aside _____	Level 1 _____	Level 2 _____	Level 3 _____
Trade Set Aside (MCC) _____	Goal _____	Bid Preference _____	
No Measure _____	Deferred _____	Selection Factor _____	
CWP _____	 SBD Director		Date _____