# dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York Administrative Proposal Section 4.4 Page 1 of 8

## **NEW YORK STATE**

NYS Vendor ID: 000000000

BUSINESS EN	TITY INFOR	RMATION					
							_
List any other D	BA. Trade Na	me, Other Id	entity, or EIN used in t	the last five (5) ve	ears, the state or county where f	filed, and	the status
(active or inactiv			3,	(-)	,	,	
Туре	Name			EIN	State or County where filed		Status
	-1				1		
I. BUSINESS C	HARACTEF	RISTICS					
1.0 Business En	tity Type – Pl	ease check ap	opropriate box and pro	vide additional in	formation:		
a) 🗌 Corp	oration (inclu	ıding PC)	Date of Incorporation	n			
b) ⊠ Limited Liability Co.		Date Organized March 2019					
(LLC	C or PLLC)						
c) 🗌 Limi	ted Liability F	Partnership	Date of Registration				
d) 🗌 Limi	ted Partnershi	p	Date Established				
e) 🗌 Gene	eral Partnershi	p	Date Established		County (if formed in NYS)		
f) Sole	Proprietor		How many years in business?				
g) Other			Date Established				
If Other, ex	xplain:						
1.1 Was the Bus						Yes	⊠ No
•	•		siness Entity was form	ed:			
	ed States	State	North Dakota				
		Country	red to do business in N	ew Vork State wi	th the Department of State?	Yes	☐ No
			ess Entity is a General		th the Department of State:	_	required
			not required to be regix is pending approval.	stered in New Yo	ork State.		
1.3 Is the Busine Finance?	ess Entity regi	stered as a Sa	ales Tax vendor with the	ne New York Stat	e Department of Tax and	Yes	X No

I. BUSINESS CHARACTERISTICS				
Explain and provide detail, such as 'not required,' 'applicat	cion in process,' or other reasons for not being registere	d.		
1.4 Is the Business Entity a Joint Venture? Note: If the sub submit a separate questionnaire for the Business Entity		☐ Yes ⊠ No		
1.5 Does the Business Entity have an active Charities Regi	stration Number?	☐ Yes ⊠ No		
Enter Number:				
If exempt, explain:				
If an application is pending, enter date of application:	Attach a copy of the application			
1.6 Does the Business Entity have a DUNS Number?		⊠ Yes □ No		
Enter DUNS Number				
1.7 Is the Business Entity's principal place of business/Exe If "No," does the Business Entity maintain an office in		☐ Yes ☐ No ☐ Yes ☐ No		
Provide the address and telephone number for one New Yo n/a	rk Office.			
1.8 Is the Business Entity's principal place of business/exe	cutive office:			
X Owned				
Rented Landlord Name (if 'rented')				
Other Provide explanation (if 'other')				
Is space shared with another Business Entity?		☐ Yes ⊠ No		
Name of other Business Entity n/a				
Address				
City State	Zip Code Country			
1.9 Is the Business Entity a Minority Community Based On	rganization (MCBO)?	☐ Yes ⊠ No		
1.10 Identify current Key Employees of the Business Entit	y. Attach additional pages if necessary.			
1.11 Identify current Trustees/Board Members of the Busin	ness Entity. Attach additional pages if necessary.			
	, i e			
Name	Title			
Name	Title			
Name	Title			
INAME	Tiue			
II. AFFILIATES AND JOINT VENTURE RELATIONSHIPS				
2.0 Does the Business Entity have any Affiliates? Attach additional pages if necessary (If no, proceed to	Section III)	X Yes No		
	Affiliate's Primary Business	Activity		
<u> </u>				

# VENDOR RESPONSIBILITY QUESTIONNAIRE **NOT-FOR-PROFIT BUSINESS ENTITY**

II. AFFILIATES AND JOINT VENTURE RELATIONSHIPS		
Explain relationship with the Affiliate and indicate percent ownership, if applicable (enter N/A, if not applicable): Discovery Benefits utilizes the WEX Health technology platform to administer our lines of business.		
Are there any Business Entity Officials or Principal Owners that the Business Entity has in common with this Affiliate?	X Yes	□ No
Discovery Benefits, LLC and WEX Health are both subsidiaries of WEX, Inc.		
III. CONTRACT HISTORY		
3.0 Has the Business Entity held any contracts with New York State government entities in the last three (3) years? If "Yes," attach a list including the Contract Number, Agency Name, Contract Amount, Contract Start Date, Contract End Date, and the Contract Description.	b	
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IV. INTEGRITY – CONTRACT BIDDING		
Within the past five (5) years, has the Business Entity or any Affiliate		
4.0 Been suspended or debarred from any government contracting process or been disqualified on any government procurement?	Yes	⊠ No
4.1 Been subject to a denial or revocation of a government prequalification?	Yes	⊠ No
4.2 Been denied a contract or had a bid rejected based upon a finding of non-responsibility by a government entity?	Yes	⊠ No
4.3 Agreed to a voluntary exclusion from bidding/contracting with a government entity?	Yes	⊠ No
4.4 Initiated a request to withdraw a bid submitted to a government entity or made any claim of an error on a bid submitted to a government entity?	Yes	⊠ No
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity involved, the relationship to the Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the issue(s). Provide answer below or attach additional sheets with numbered responses.		
V. INTEGRITY – CONTRACT AWARD		
Within the past five (5) years, has the Business Entity or any Affiliate		
5.0 Been suspended, cancelled or terminated for cause on any government contract?	Yes	No No
5.1 Been subject to an administrative proceeding or civil action seeking specific performance or restitution in connection with any government contract?	Yes	⊠ No
5.2 Entered into a formal monitoring agreement as a condition of a contract award from a government entity?	Yes	⊠ No
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity involved, the relationship to the Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the issue(s). Provide answer below or attach additional sheets with numbered responses.		_

## VI. CERTIFICATIONS/LICENSES

6.0 Within the past five (5) years, has the Business Entity or any Affiliate had a revocation, suspension or disbarment of any business or professional permit and/or license?	Yes	No No
If "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Bugovernment entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of Provide answer below or attach additional sheets with numbered responses.		
VII. LEGAL PROCEEDINGS		
Within the past five (5) years, has the Business Entity or any Affiliate		
7.0 Been the subject of an investigation, whether open or closed, by any government entity for a civil or criminal violation?	Yes	<b>X</b> No
7.1 Been the subject of an indictment, grant of immunity, judgment or conviction (including entering into a plea bargain) for conduct constituting a crime?	Yes	<b>X</b> No
7.2 Received any OSHA citation and Notification of Penalty containing a violation classified as serious or willful?	Yes	X No
7.3 Had any New York State Labor Law violation deemed willful?	Yes	X No
7.4 Entered into a consent order with the New York State Department of Environmental Conservation, or a federal, state or local government enforcement determination involving a violation of federal, state or local environmental laws?	Yes	X No
<ul><li>7.5 Other than the previously disclosed:</li><li>(i) Been subject to the imposition of a fine or penalty in excess of \$1,000, imposed by any government entity as a result of the issuance of citation, summons or notice of violation, or pursuant to any administrative, regulatory, or judicial determination; or</li><li>(ii) Been charged or convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any government entity?</li></ul>	Yes	<b>X</b> No
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity involved, the relationship to the Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the issue(s). Provide answer below or attach additional sheets with numbered responses.		
VIII. LEADERSHIP INTEGRITY		
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Note: If the Business Entity is a Joint Venture, answer 'N/A- Not Applicable' to questions 8.0 through 8.4. Within the past five (5) years, has any individual previously identified, any other Key Employees not previously individual having the authority to sign execute or approve bids, proposals, contracts or supporting documentations State been subject to	ion with No	ew York
Note: If the Business Entity is a Joint Venture, answer 'N/A- Not Applicable' to questions 8.0 through 8.4.  Within the past five (5) years, has any individual previously identified, any other Key Employees not previously individual having the authority to sign execute or approve bids, proposals, contracts or supporting documentations State been subject to  8.0 A sanction imposed relative to any business or professional permit and/or license?  8.1 An investigation, whether open or closed, by any government entity for a civil or criminal violation for any	Yes N/A Yes N/A Yes N/A	X No X No X No
Note: If the Business Entity is a Joint Venture, answer 'N/A- Not Applicable' to questions 8.0 through 8.4.  Within the past five (5) years, has any individual previously identified, any other Key Employees not previously individual having the authority to sign execute or approve bids, proposals, contracts or supporting documentations. State been subject to  8.0 A sanction imposed relative to any business or professional permit and/or license?  8.1 An investigation, whether open or closed, by any government entity for a civil or criminal violation for any business related conduct?  8.2 An indictment, grant of immunity, judgment, or conviction of any business related conduct constituting a crime including, but not limited to, fraud, extortion, bribery, racketeering, price fixing, bid collusion or any	Yes N/A Yes N/A Yes N/A	X No X No

# VENDOR RESPONSIBILITY QUESTIONNAIRE NOT-FOR-PROFIT BUSINESS ENTITY

## VIII. LEADERSHIP INTEGRITY

Note: If the Business Entity is a Joint Venture, answer 'N/A- Not Applicable' to questions 8.0 through 8.4.

Within the past five (5) years, has any individual previously identified, any other Key Employees not previously identified or any individual having the authority to sign execute or approve bids, proposals, contracts or supporting documentation with New York State been subject to

For each "Yes" answer, provide an explanation of the issue(s), the individual involved, the relationship to the submitting Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

IX. FINANCIAL AND ORGANIZATIONAL CAPACITY		
9.0 Within the past five (5) years, has the Business Entity or any Affiliates received any formal unsatisfactory performance assessment(s) from any government entity on any contract?	Yes X No	
If "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Bugovernment entity involved, relevant dates and any remedial or corrective action(s) taken and the current status of Provide answer below or attach additional sheets with numbered responses.		
9.1 Within the past five (5) years, has the Business Entity or any Affiliates had any liquidated damages assessed over \$25,000?	Yes X No	
If "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Bu contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attasheets with numbered responses.		
9.2 Within the past five (5) years, has the Business Entity or any Affiliates had any liens, claims or judgments over \$15,000 filed against the Business Entity which remain undischarged or were unsatisfied for more than 120 days?	Yes X No	
If "Yes," provide an explanation of the issue(s), the Business Entity involved, the relationship to the submitting Burelevant dates, the lien holder or claimant's name(s), the amount of the lien(s), claim(s), or judgments(s) and the cuissue(s). Provide answer below or attach additional sheets with numbered responses.		
9.3 Within the last seven (7) years, has the Business Entity or any Affiliate initiated or been the subject of any bankruptcy proceedings, whether or not closed, regardless of the date of filing, or is any bankruptcy proceeding pending?	Yes X No	
If "Yes," provide the Business Entity involved, the relationship to the submitting Business Entity, the Bankruptcy the Court name, the Docket Number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Coanswer below or attach additional sheets with numbered responses.		
9.4 During the past three (3) years, has the Business Entity and any Affiliates failed to file or pay any tax returns required by federal, state or local tax laws?	Yes X No	
If "Yes," provide the Business Entity involved, the relationship to the submitting Business Entity, the taxing jurisd or other), the type of tax, the liability year(s), the Tax Liability amount the Business Entity failed to file/pay, and the Tax Liability. Provide answer below or attach additional sheets with numbered responses.		
9.5 During the past three (3) years, has the Business Entity and any Affiliates failed to file or pay any New York State unemployment insurance returns?	Yes X No	
If "Yes," provide the Business Entity involved, the relationship to the submitting Business Entity, the year(s) the B failed to file/pay the insurance, explain the situation, and any remedial or corrective action(s) taken and the current issue(s). Provide answer below or attach additional sheets with numbered responses.		
9.6 During the past three (3) years, has the Business Entity or any Affiliates had any government audits? If "Yes," did any audit reveal material weaknesses in the Business Entity's system of internal controls If "Yes," did any audit reveal non-compliance with contractual agreements or any material disallowance (if not previously disclosed in 9.6)?	Yes X No Yes No Yes No	
For each "Yes" answer, provide an explanation of the issue(s), the Business Entity involved, the relationship to the Business Entity, the government entity involved, relevant dates and any remedial or corrective action(s) taken and the issue(s). Provide answer below or attach additional sheets with numbered responses.		of

X. FREEDOM OF INFORMATION LAW (FOIL)	
10.0 Indicate whether any information supplied herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL). Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL.	Yes X No
Indicate the question number(s) and explain the basis for your claim.	

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NYS Vendor ID: 000000000

# NEW YORK STATE VENDOR RESPONSIBILITY QUESTIONNAIRE NOT-FOR-PROFIT BUSINESS ENTITY

#### Certification

The undersigned: (1) recognizes that this questionnaire is submitted for the express purpose of assisting New York State-government entities (including the Office of the State Comptroller (OSC)) in making responsibility determinations regarding award or approval of a contract or subcontract and that such government entities will rely on information disclosed in the questionnaire in making responsibility determinations; (2) acknowledges that the New York State government entities and OSC may, in their discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; and (3) acknowledges that intentional submission of false or misleading information may result in criminal penalties under State and/or Federal Law, as well as a finding of non-responsibility, contract suspension or contract termination.

#### The undersigned certifies that he/she:

- is knowledgeable about the submitting Business Entity's business and operations;
- · has read and understands all of the questions contained in the questionnaire;
- · has not altered the content of the questionnaire in any manner;
- has reviewed and/or supplied full and complete responses to each question;
- to the best of his/her knowledge, information and belief, confirms that the Business Entity's responses are true, accurate and complete, including all attachments, if applicable;
- understands that New York State government entities will rely on the information disclosed in the questionnaire
  when entering into a contract with the Business Entity; and
- is under an obligation to update the information provided herein to include any material changes to the Business
  Entity's responses at the time of bid/proposal submission through the contract award notification, and may be
  required to update the information at the request of the New York State government entities or OSC prior to the
  award and/or approval of a contract, or during the term of the contract.

