

Contract Renewal Evaluation Form

Date:	October 9, 2024
Department:	Sheriff
Contract Number:	17RFP07012016B-BR
Contract Title:	Inmate Medical Services with NaphCare, of Fulton County, LLC

Instructions:

It is extremely important that every contract be rigidly scrutinized to determine if the contract provides the County with value. Each renewal shall be reviewed and answers provided to determine whether services should be maintained, services/scope reduced, services brought in-house or if the contract should be terminated. Please submit a completed copy of this form with all renewal requests.

1. Describe what efforts were made to reduce the scope and cost of this contract.

[Click here to enter text.](#)

2. Describe the analysis you made to determine if the current prices for this good or service is reflective of the current market. Check all applicable statements and provide documentation:

Internet search of pricing for same product or service:

Date of search:	N/A
Price found:	N/A
Different features / Conditions:	N/A
Percent difference between internet price and renewal price:	N/A

Explanation / Notes:

N/A

Market Survey of other jurisdictions:

Date contacted:	N/A
Jurisdiction Name / Contact name:	N/A
Date of last purchase:	Click here to enter a date.
Price paid:	N/A
Inflation rate:	N/A
Adjusted price:	N/A
Percent difference between past purchase price and renewal price:	N/A

Are they aware of any new vendors?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are they aware of a reduction in pricing in this industry?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How does pricing compare to Fulton County's award contract?	Click here to enter text.	

Explanation / Notes:

N/A

Other (Describe in detail the analysis conducted and the outcome):

N/A

3. What was the actual expenditure (from the AMS system) spent for this contract for previous fiscal year?

\$27,418,055.79

4. Does the renewal option include an adjustment for inflation? Yes No
(Information can be obtained from CPI index)

Was it part of the initial contract? Yes No

Date of last purchase:	Click here to enter a date.
Price paid:	Click here to enter text.
Inflation rate:	Click here to enter text.
Adjusted price:	Click here to enter text.
Percent difference between past purchase price and renewal price:	Click here to enter text.

Explanation / Notes:

Click here to enter text.

5. Is this a seasonal item or service? Yes No

6. Has an analysis been conducted to determine if this service can be performed in-house? Yes No If yes, attach the analysis.

7. What would be the impact on your department if this contract was not approved?

The Sheriff's Office would not be able to fulfill its mandated responsibilities.