



Fulton County Board of Commissioners
Agenda Item Summary

14-0849

BOC Meeting Date
10/15/2014

Requesting Agency

Finance Department (Risk Management Division)

Commission Districts Affected

All Districts

Requested Action *(Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)*

Request approval to renew existing contracts - Finance Department (Risk Management), RFP# 12RFP84430C-DR, Life and Disability and Broker Services, in the amount of \$120,000 with Resurgens Risk Management/Willis of Georgia, a Joint Venture ("RM/Willis") (Atlanta, GA) to provide life and disability insurance broker services. This action exercises the second of two renewal options. No renewal options remain. Effective dates: January 1, 2015 through December 31, 2015.

Requirement for Board Action *(Cite specific Board policy, statute or code requirement)*

In accordance with Purchasing Code Section 102-394(6), the Purchasing Department shall present all renewal requests to the Board of Commissioners at least 90 days prior to the contract renewal date or 60 days if the contract term is six (6) months or less.

Is this Item Goal Related? *(If yes, describe how this action meets the specific Board Focus Area or Goal)*

No

Is this a purchasing item?

Yes

Summary & Background

(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)

The Finance Department requests approval to renew the existing contract to provide life and disability insurance broker services.

This contract will assist the County's Finance Department in providing an on-line/electronic platform for employees to enroll in the desired employee benefit plans, provide written plan educational/informational materials, call center/customer support, claims administration and plan insurance marketing and procurement broker services.

The insurance broker services will include the placement of Basis/Supplemental/Dependent/Retiree Life products, Long Term Disability, Accidental Death and Dismemberment.

In addition, the Administrator/Broker will provide the Finance Department with regular plan statistical reports/updates, coordination of employee benefits/open enrollment events and recommendations regarding plan enhancements and/or improvements.

Agency Director Approval		County Manager's Approval
Typed Name and Title Felicia Strong-Whitaker, Interim Director	Phone (404) 612-5800	
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

CURRENT CONTRACT HISTORY	BOC ITEM	DATE	DOLLAR AMOUNT
Original Award Amount	12-0750	09/05/12	\$120,000
1 st Renewal	13-0674	08/21/13	\$120,000
2nd Renewal			\$120,000
Total Revised Amount			\$360,000

Contract Compliance Information

(Provide Contractor and Subcontractor details.)

Contract Value: \$120,000.00
Prime Vendor: *Resurgens Risk Management/Willis of Georgia (JV 50/50%)*
Status: *African American Male Business Enterprise Certified*
Willis of Georgia Non-Minority
Location: Atlanta, GA
County: Fulton County
Prime Value: \$120,000.00 or 100.00%

Total Contract Value: \$120,000.00 or 100.00%
Total M/FBE Value: \$60,000.00 or 50.00%

Contractor Type	Contractor Status	Contractor Name	Address	City	State	Zip Code	Contact Name	Contact Phone	Contact Email	Upon Approval	Amount	Percentage	Prime/Contract Value
Prime	MBE & Non-M/FBE	RRM/Willis (A Joint Venture)	1201 Peachtree St., Suite 1730	Atlanta,	Georgia	30361					\$120,000.00	100%	\$120,000.00

Solicitation Information	NON-MFBE	MBE	FBE	TOTAL
No. Bid Notices Sent:				
No. Bids Received:				
Total Contract Value	\$120,000.00 or 100.00%			
Total M/FBE Values	\$ 60,000.00 or 50.00%			
Total Prime Value	\$120,000.00 or 100.00%			
Fiscal Impact / Funding Source <i>(Include projected cost, approved budget amount and account number, source of funds, and any future funding requirements.)</i> 725-999-P001-1243: Risk Management Fund, Non-Agency, General Liability-Public Official - \$120,000.00				
Exhibits Attached <i>(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)</i> Exhibit 1: Contractor Performance Report Exhibit 2: Contractor Renewal Form Exhibit 3: Contractor Renewal Evaluation Form				
Source of Additional Information <i>(Type Name, Title, Agency and Phone)</i> Eldridge A. Morris, Risk Manager, Finance Department (Risk Management Division) (404) 612-0556				

Continued

Procurement**Contract Attached:**
No**Previous Contracts:**
Yes**Solicitation Number:**
12RFP84430C-DR**Submitting Agency:**
Finance**Staff Contact:**
Eldridge Morris**Contact Phone:**
(404) 612-0556**Description:****FINANCIAL SUMMARY****Total Contract Value:**

Original Approved Amount: \$120,000.00
 Previous Adjustments: \$120,000.00
 This Request: \$120,000.00
 TOTAL: \$360,000.00

MBE/FBE Participation:

Amount: %:
 Amount: %:
 Amount: %:
 Amount: %:

Grant Information Summary:

Amount Requested: ☐ Cash
 Match Required: ☐ In-Kind
 Start Date: ☐ Approval to Award
 End Date: ☐ Apply & Accept
 Match Account \$:

Funding Line 1:

725-999-P001-1243

Funding Line 2:**Funding Line 3:****Funding Line 4:****KEY CONTRACT TERMS****Start Date:**

01/01/2015

End Date:

12/31/2015

Cost Adjustment:**Renewal/Extension Terms:**

No renewals remain

ROUTING & APPROVALS

X	Originating Department:	Whitmore, Sharon	Date: 8/25/2014
	County Attorney:		Date:
X	Purchasing/Contract Compliance:	Strong-Whitaker, Felicia	Date: 10/5/2014
X	Finance/Budget Analyst/Grants Admin:	Stewart, Hugh	Date: 8/27/2014
	Grants Management:		Date:
X	County Manager:	O'Connor, Patrick	Date: 10/9/2014

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE				
CONTRACTORS PERFORMANCE REPORT PROFESSIONAL SERVICES				
Report Period Start	Report Period End		Contract Period Start	Contract Period End
1/1/2014	7/21/2014		1/1/2014	12/31/2014
PO Number				PO Date
12RFP84430C-DR				1/1/2014
Department	FINANCE			
Bid Number	12RFP84430C-DR			
Service Commodity	Life and Disability Broker Services			
Contractor	Resurgen's Risk Management/Willis, a Joint Venture			

- 0 = Unsatisfactory *Achieves contract requirements less than 50% of the time, not responsive, effective and/or efficient, unacceptable delay, incompetence, high degree of customer dissatisfaction.*
- 1 = Poor *Achieves contract requirements 70% of the time. Marginally responsive, effective and/or efficient; delays require significant adjustments to programs; key employees marginally capable; customers somewhat satisfied.*
- 2 = Satisfactory *Achieves contract requirements 80% of the time; generally responsive, effective and/or efficient; delays are excusable and/or results in minor programs adjustments; employees are capable and satisfactorily providing service without intervention; customers indicate satisfaction.*
- 3 = Good *Achieves contract requirements 90% of the time. Usually responsive; effective and/or efficient; delays have not impact on programs/mission; key employees are highly competent and seldom require guidance; customers are highly satisfied.*
- 4 = Excellent *Achieves contract requirements 100% of the time. Immediately responsive; highly efficient and/or effective; no delays; key employees are experts and require minimal directions; customers expectations are exceeded.*

1. Quality of Goods/Services (-Specification Compliance - Technical Excellence - Reports/Administration - Personnel Qualification)

- ☐ 0
- ☐ 1
- ☐ 2
- ☒ 3
- ☐ 4

Comments:

Contractor has provided professional services in accordance with the Scope of Work. Staff have displayed the technical expertise required for each component of the Scope. Reports and Administration have been effective overall.

2. Timeliness of Performance (-Were Milestones Met Per Contract - Response Time (per agreement, if applicable) - Responsiveness to Direction/Change - On Time Completion Per Contract)

- ☐ 0
- ☐ 1
- ☐ 2
- ☒ 3
- ☐ 4

Comments:

Overall technical performance has been good. An issue involving a "sub-contractor" was addressed and resolved in a responsive and timely manner.

On time completion of activities, as per the Contract, has been noted.

3. Business Relations (-Responsiveness to Inquiries - Prompt Problem Notifications)

- ☐ 0
- ☐ 1
- ☐ 2
- ☒ 3
- ☐ 4

Comments:

Contractor has been responsive to inquiries from Employee Benefits and Risk Management staff.

4. Customer Satisfaction (-Met User Quality Expectations - Met Specification - Within Budget - Proper Invoicing - No Substitutions)


- ☐ 0

Comments:

<input type="radio"/> 1	Overall customer satisfaction has been good.
<input type="radio"/> 2	Services have been performed within budget (contract amount).
<input checked="" type="radio"/> 3	
<input type="radio"/> 4	

5. Contractors Key Personnel (-Credentials/Experience Appropriate - Effective Supervision/Management - Available as Needed)

<input type="radio"/> 0	Comments:
<input type="radio"/> 1	Contractor has an experienced/licensed staff.
<input type="radio"/> 2	Supervision/Management has been effective and timely.
<input checked="" type="radio"/> 3	
<input type="radio"/> 4	

Overall Performance Rating:	3.0		
Would you select/recommend this vendor again? (Check box for Yes. Leave Blank for No)		Rating completed by:	Eldridge.Morris
<input checked="" type="radio"/> Yes <input type="radio"/> No			
Department Head Name	Department Head Signature		Date
Eldridge A. Morris			7/21/2014



Fulton County, GA

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE**CONTRACT RENEWAL**

DEPARTMENT: Finance

BID/RFP# DESCRIPTION: Life & Disability Broker Services

BID/RFP# NUMBER: 12RFP84420CDR

ORIGINAL APPROVAL DATE: September 5, 2012

RENEWAL PERIOD: FROM: 01/01/2015 **THROUGH** 12/31/2015

RENEWAL OPTION # 2 OF 2

NUMBER OF RENEWAL OPTIONS:

RENEWAL AMOUNT: \$ 120,000.00

COMPANY'S NAME: RRM/Willis (A Joint Venture)

ADDRESS: 1201 Peachtree Street, Suite 1730

CITY: Atlanta

STATE: Georgia

ZIP: 30361

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications for Bid/RFP#

(Person signing must have signature authority for the company/corporation)

NAME: _____ (Print)
(CEO, President, Vice President)

VENDOR'S SIGNATURE: _____ **DATE** _____

ATTEST:

NOTARY PUBLIC: _____

TITLE: _____ **COUNTY:** _____

SEAL (Affix) **MY COMMISSION EXPIRES:** _____

ATTEST:

FULTON COUNTY, GEORGIA

JOHN H. EAVES, CHAIRMAN
BOARD OF COMMISSIONERS

DATE: _____

MARK MASSEY
CLERK TO THE COMMISSION

DATE: _____

DEPARTMENT AUTHORIZES RENEWAL OPTION ON THE AFOREMENTIONED BID/RFP:

DEPARTMENT HEAD: _____ (Print)

DEPARTMENT HEAD SIGNATURE: _____ **DATE** _____

Please indicate if the following are provided:

- ☐ *BOC Chairperson's signature required on renewals \$ 50,000.00 or more or any Bid/RFP previously approved by the Board of Commissioners of Fulton County.*
- ☐ *A copy of the current Certificate of Insurance must be attached to all renewals.*
- ☐ *Current Performance and Payment Bonds attached (If required)*
- ☐ *Minimum of four (4) signature pages required.*

Contract Renewal Evaluation Form

Date:	August 19, 2014
Department:	FiNANCE
Contract Number:	12RFP84430C-DR
Contract Title:	Life and Disability Broker Services

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.

The cost of the subject Contract commission resulted in annual savings to the County in excess of \$350k (as compared to the fees being paid to the previous broker service firm). The Scope of Service was consolidated to included broker services as well as participant enrollment platform for the overall employee benefits/enrollment process.

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:	Click here to enter a date.
Price found:	N/A
Different features / Conditions:	N/A
Percent difference between internet price and renewal price:	N/A

Explanation / Notes:

RFP process was used in 2012 to solicit the lowest responsive bidder.

☐ **Market Survey of other jurisdictions:**

Date contacted:	Click here to enter a date.
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?	N/A

Explanation / Notes:

Click here to enter text.

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

Click here to enter text.

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

The annual contract amount is \$120k. Contract has two renewal options.

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:	N/A
Inflation rate:	0%
Adjusted price:	Click here to enter text.
Percent difference between past purchase price and renewal price:	0%

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. The County does not have a licensed Life and Disability Plan Insurance Broker on staff. Neither is the County licensed to procure/place the aforementioned coverages with the various domestic insurance markets available.

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

The County would not have the ability to provide employees and/or their dependents with supplemental Life Insurance coverage or Disability Insurance.



Eldridge A. Morris, Risk Manager

August 19, 2014

Prepared by

Date

Patrick J. O'Connor

August 19, 2014

Department Head

Date