



CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Finance

BID/RFP# NUMBER: 21RFP071321C-MH

BID/RFP# TITLE: Employee Voluntary Benefits

ORIGINAL APPROVAL DATE: September 1, 2021

RENEWAL EFFECTIVE DATES: January 1, 2026 THROUGH December 31, 2026

RENEWAL OPTION #: 4 OF 4

NUMBER OF RENEWAL OPTIONS: 4

RENEWAL AMOUNT: 100% employee paid premiums based on approved rates.

COMPANY'S NAME: Metropolitan Life Insurance Company (MetLife)

ADDRESS: 1200 Abernathy Road NE, Building 600, Suite 1450

CITY: Atlanta

STATE: GA

ZIP: 30328

This Renewal Agreement No. 4 was approved by the Fulton County Board of

Commissioners on BOC DATE: 09/17/2025

BOC NUMBER: 25-0711C

CERTIFICATE OF INSURANCE: The Contractor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Contractor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

FULTON COUNTY, GEORGIA

Signed by:

14E1B4AA5F6A44A...
Robert L. Pitts, Chairman
Fulton County Board of Commissioners

METROPOLITAN LIFE INSURANCE
COMPANY (METLIFE)

Signed by:

5555BEB0320A...
Brian Blackburn,
Vice President

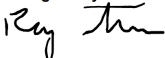
ATTEST:

Signed by:

EEC476C4837648D...
Tonya R. Grier
Clerk to the Commission

(Affix County Seal) 

AUTHORIZATION OF RENEWAL:

Signed by:

43FAB45F3E5E409...
Ray Turner, Finance Interim Director
Finance Department

ITEM#: _____ RCS: _____	ITEM#: 25-0711C RM: 09/17/2025
FIRST REGULAR MEETING	SECOND REGULAR MEETING

CERTIFICATE OF INSURANCE





1200 Abernathy Road NE
Building 600, Suite 1450
Atlanta, GA 30328

Edward J. Ryan
Senior Account Executive
National Accounts
AR Insurance Lic # 408980
CA Insurance Lic # 0107512
Registered Representative

Office 770-407-2543
Cell 678-642-6936
Fax (770) 407-2495
eryan@metlife.com

June 17, 2025

John Uhas
Benefits Consultant
Benalytics Consulting Group, LLC
2110 Newmarket Parkway SE, Ste 200
Marietta, Georgia 30067
Office: 770-420-0525
Cell: 404-372-6794
juhas@benalytics.com

**Re: Fulton County Government
Renewal – 1/1/2026**

Dear John,

MetLife appreciates the opportunity to be a part of your benefit program. This letter confirms your renewal for the 2026 plan year.

I am pleased to advise you that the rates currently in effect will continue for the next plan year commencing on 1/1/2026. In determining the rates for the plan year ahead, we have evaluated your plan experience, taking into account the credibility of the experience and the demographics of your group. Our objective in the renewal process is to identify rates that will maintain the overall financial stability of your benefit program.

We have set the following rates for the coming year:

Coverage	Current Rate/Fee	Renewal Rate/Fee	Change in Rate/Fee (+/- %)
STD – Option 1			
• <25	\$0.519	\$0.519	0.00%
• 25-29	\$0.690	\$0.690	0.00%
• 30-34	\$0.760	\$0.760	0.00%
• 35-39	\$0.594	\$0.594	0.00%
• 40-44	\$0.480	\$0.480	0.00%
• 45-49	\$0.490	\$0.490	0.00%
• 50-54	\$0.591	\$0.591	0.00%
• 55-59	\$0.731	\$0.731	0.00%
• 60-64	\$0.879	\$0.879	0.00%
• 65-69	\$0.944	\$0.944	0.00%
• 70-74	\$0.944	\$0.944	0.00%
• 75+	\$0.944	\$0.944	0.00%
STD – Option 2			

• <25	\$0.287	\$0.287	0.00%
• 25-29	\$0.374	\$0.374	0.00%
• 30-34	\$0.415	\$0.415	0.00%
• 35-39	\$0.334	\$0.334	0.00%
• 40-44	\$0.279	\$0.279	0.00%
• 45-49	\$0.288	\$0.288	0.00%
• 50-54	\$0.347	\$0.347	0.00%
• 55-59	\$0.430	\$0.430	0.00%
• 60-64	\$0.518	\$0.518	0.00%
• 65-69	\$0.555	\$0.555	0.00%
• 70-74	\$0.555	\$0.555	0.00%
• 75+	\$0.555	\$0.555	0.00%
Disability Coverages are in a Rate Guarantee through 12/31/2026.			

The rates shown above assume your existing plan design, contribution structure and group demographics remain the same. The rates also assume that there will be no change in any Source of Other Income Benefits by which our disability benefit payments may be reduced.

Please do not hesitate to contact me at 770-407-2543, if I may answer any questions or assist in any way.

Once again, thank you for the privilege you have extended to us. You are the reason we are in business. We look forward to continuing our relationship in the months and years ahead.

Sincerely,



Edward J. Ryan
Senior Account Executive
National Accounts



U.S. Business Intermediary and Producer Compensation Notice

Metropolitan Life Insurance Company, Metropolitan Tower Life Insurance Company, MetLife Consumer Services, Inc. and Metropolitan General Insurance Company (collectively herein called "MetLife"), enters into arrangements concerning the sale, servicing and/or renewal of MetLife group insurance and certain other group-related insurance and non-insurance products ("Products") with brokers, agents, consultants, third party administrators, general agents, associations, and other parties that may participate in the sale, servicing and/or renewal of such products (*each an "Intermediary"*). MetLife may pay your Intermediary compensation, which may include, among other things, base compensation, supplemental compensation and/or a service fee. MetLife may pay compensation for the sale, servicing and/or renewal of products, or remit compensation to an Intermediary on your behalf. Your Intermediary may also be owned by, controlled by or affiliated with another person or party, which may also be an Intermediary and who may also perform marketing and/or administration services in connection with your products and be paid compensation by MetLife.

Base compensation, which may vary from case to case and may change if you renew your products with MetLife, may be payable to your Intermediary as a percentage of premium or a fixed dollar amount. MetLife may also pay your Intermediary compensation that is based upon your Intermediary placing and/or retaining a certain volume of business (*number of products sold or dollar value of premium*) with MetLife. In addition, supplemental compensation may be payable to your Intermediary for eligible Products. Under MetLife's current supplemental compensation plan (SCP), the amount payable as supplemental compensation may range from 0% to 9% of premium or fees. The supplemental compensation percentage may be based on one or more of: (1) the number of products sold through your Intermediary during a one-year period, or other defined period; (2) the amount of eligible new or renewal premium or fees with respect to products sold through your Intermediary during a one-year period; (3) the persistency percentage of products inforce through your Intermediary during a one-year period; (4) the block growth of the products inforce through your Intermediary during a one-year period; (5) eligible new or renewal premium or fees growth during a one-year period; or (6) a flat amount, fixed percentage or sliding scale of the premium or fees for products as set by MetLife. The supplemental compensation percentage will be set by MetLife based on the achievement of the outlined qualification criteria and it may not be changed until the following SCP plan year. As such, the supplemental compensation percentage may vary from year to year, but will not exceed 9% under the current supplemental compensation plan.

The cost of supplemental compensation is not directly charged to the price of our products except as an allocation of overhead expense, which is applied to all eligible group insurance products, whether or not supplemental compensation is paid in relation to a particular sale or renewal. As a result, your rates will not differ by whether or not your Intermediary receives supplemental compensation. If your Intermediary collects the premium or fees from you in relation to your products, your Intermediary may earn a return on such amounts. Additionally, MetLife may have a variety of other relationships with your Intermediary or its affiliates, or with other parties, that involve the payment of compensation and benefits that may or may not be related to your relationship with MetLife (*e.g., insurance and employee benefits exchanges, enrollment firms and platforms, sales contests, consulting agreements, participation in an insurer panel, or reinsurance arrangements*).

More information about the eligibility criteria, limitations, payment calculations and other terms and conditions under MetLife's base compensation and supplemental compensation plans can be found on MetLife's Website at www.metlife.com/business-and-brokers/broker-resources/broker-compensation. Questions regarding Intermediary compensation can be directed to ask4met@metlifeservice.com, or if you would like to speak to someone about Intermediary compensation, please call (800) ASK 4MET. In addition to the compensation paid to an Intermediary, MetLife may also pay compensation to your representative. Compensation paid to your representative is for participating in the sale, servicing, and/or renewal of products, and the compensation paid may vary based on a number of factors including the type of product(s) and volume of business sold. If you are the person or entity to be charged under an insurance policy or annuity contract, you may request additional information about the compensation your representative expects to receive as a result of the sale or concerning compensation for any alternative quotes presented, by contacting your representative or calling (866) 796-1800.

Non-U.S. Coverage

When providing you with information concerning an eligible group insurance policy issued or proposed to your affiliate or subsidiary outside the United States by a MetLife affiliate or by other locally licensed insurers that are members of the MAXIS Global Benefits Network (MAXIS GBN), New York insurance law requires the person providing the information to be licensed as an insurance broker. In this capacity, the information provided to you will only be on behalf of such insurers and not on behalf of MetLife or any other insurer that is not a member of MAXIS GBN. Please note that while MetLife is a member of MAXIS GBN and is licensed to transact insurance business in New York, the other MAXIS GBN member insurers are not licensed or authorized to do business in New York. The group insurance policies they issue are for coverage outside the United States and are governed by the laws of the country they were issued in. These policies have not been approved by the New York Superintendent of Financial Services, are not subject to all of the laws of New York, and are not protected by the New York State Guaranty Fund.

Certificate Of Completion

Envelope Id: 703C9508-564C-4A77-BE32-39488D157974

Status: Completed

Subject: Voluntary Worksite Benefits Metropolitan Life Short Term Disability 2022 25-0711 9-17-25

Parcel ID:

Source Envelope:

Document Pages: 6

Signatures: 4

Envelope Originator:

Certificate Pages: 6

Initials: 0

Mark Hawks

AutoNav: Enabled

Stamps: 1

141 Pryor Street

Envelopeld Stamping: Enabled

Purchasing & Contract Compliance, Suite 1168

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Atlanta, GA 30303

mark.hawks@fultoncountyga.gov

IP Address: 74.174.59.4

Record Tracking

Status: Original

Holder: Mark Hawks

Location: DocuSign

9/29/2025 1:05:54 PM

mark.hawks@fultoncountyga.gov

Security Appliance Status: Connected

Pool: StateLocal

Storage Appliance Status: Connected

Pool: Fulton County Government

Location: Docusign

Signer Events

Brian Blackburn

bblackburn@metlife.com

Vice President

MetLife

Security Level: Email, Account Authentication (None)

Signature

Signed by:

Brian Blackburn

A53E4BB14A1F48E...

Signature Adoption: Pre-selected Style

Using IP Address: 170.85.56.188

Timestamp

Sent: 9/29/2025 1:10:12 PM

Resent: 9/30/2025 7:34:15 AM

Resent: 10/1/2025 1:14:50 PM

Viewed: 10/2/2025 12:19:53 PM

Signed: 10/2/2025 1:17:18 PM

Electronic Record and Signature Disclosure:

Accepted: 10/2/2025 12:19:53 PM

ID: 4254f014-6d2b-4a72-98bc-8daa504acfdc

Ray Turner

Ray.Turner@fultoncountyga.gov

Deputy Director

Fulton County Government

Security Level: Email, Account Authentication (None)

Signed by:

Ray Turner

43EAB45F3E5E409...

Signature Adoption: Drawn on Device

Using IP Address: 2600:387:f:221::4

Signed using mobile

Sent: 10/2/2025 1:17:21 PM

Viewed: 10/4/2025 5:44:51 PM

Signed: 10/4/2025 5:45:19 PM

Electronic Record and Signature Disclosure:

Not Offered via Docusign

Nikki Peterson

nikki.peterson@fultoncountyga.gov

Chief Deputy Clerk to the Board of Commissioners

Fulton County Government

Security Level: Email, Account Authentication (None)

Completed

Using IP Address: 74.174.59.10

Sent: 10/4/2025 5:45:20 PM

Viewed: 10/6/2025 8:20:59 AM

Signed: 10/6/2025 8:22:00 AM

Electronic Record and Signature Disclosure:

Accepted: 11/27/2017 10:39:37 AM

ID: b7ce88ee-0c66-4f3a-bfee-705e0af602d8

Robert L. Pitts

harriet.thomas@fultoncountyga.gov

Chairman

Fulton County

Security Level: Email, Account Authentication (None)

Signed by:

Robert L. Pitts

14E1B4AA5F6A44A...

Signature Adoption: Pre-selected Style

Using IP Address: 74.174.59.10

Sent: 10/6/2025 8:22:01 AM

Viewed: 10/6/2025 9:00:44 AM

Signed: 10/6/2025 9:00:53 AM

Electronic Record and Signature Disclosure:

Signer Events	Signature	Timestamp
Accepted: 10/6/2025 9:00:44 AM ID: 7d07a611-1d26-4127-9d92-6119eb31a5b8 Tonya Grier tonya.grier@fultoncountyga.gov Clerk to the Commission Fulton County Government Security Level: Email, Account Authentication (None)	Signed by:  EEC476C4837648D...  Signature Adoption: Uploaded Signature Image Using IP Address: 104.129.206.109	Sent: 10/6/2025 9:00:55 AM Viewed: 10/6/2025 10:24:48 AM Signed: 10/6/2025 10:24:55 AM

Envelope Summary Events	Status	Timestamps
Envelope Updated	Security Checked	9/30/2025 7:34:14 AM
Envelope Updated	Security Checked	10/1/2025 1:14:49 PM
Envelope Updated	Security Checked	10/1/2025 1:14:49 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Envelope Updated	Security Checked	10/1/2025 1:14:50 PM
Certified Delivered	Security Checked	10/6/2025 10:24:48 AM
Signing Complete	Security Checked	10/6/2025 10:24:55 AM
Completed	Security Checked	10/6/2025 10:24:59 AM

Payment Events	Status	Timestamps
----------------	--------	------------

Electronic Record and Signature Disclosure

CONSUMER DISCLOSURE

From time to time, Carahsoft OBO Fulton County, Georgia (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign, Inc. (DocuSign) electronic signing system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to these terms and conditions, please confirm your agreement by clicking the 'I agree' button at the bottom of this document.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after signing session and, if you elect to create a DocuSign signer account, you may access them for a limited period of time (usually 30 days) after such documents are first sent to you. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. To indicate to us that you are changing your mind, you must withdraw your consent using the DocuSign 'Withdraw Consent' form on the signing page of a DocuSign envelope instead of signing it. This will indicate to us that you have withdrawn your consent to receive required notices and disclosures electronically from us and you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Carahsoft OBO Fulton County, Georgia:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: glenn.king@fultoncountyga.gov

To advise Carahsoft OBO Fulton County, Georgia of your new e-mail address

To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at glenn.king@fultoncountyga.gov and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address..

In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

To request paper copies from Carahsoft OBO Fulton County, Georgia

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an e-mail to glenn.king@fultoncountyga.gov and in the body of such request you must state your e-mail address, full name, US Postal address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Carahsoft OBO Fulton County, Georgia

To inform us that you no longer want to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your DocuSign session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an e-mail to glenn.king@fultoncountyga.gov and in the body of such request you must state your e-mail, full name, US Postal Address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

Operating Systems:	Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X
Browsers:	Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari™ 3.0 or above (Mac only)
PDF Reader:	Acrobat® or similar software may be required to view and print PDF files
Screen Resolution:	800 x 600 minimum
Enabled Security Settings:	Allow per session cookies

** These minimum requirements are subject to change. If these requirements change, you will be asked to re-accept the disclosure. Pre-release (e.g. beta) versions of operating systems and browsers are not supported.

Acknowledging your access and consent to receive materials electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please verify that you were

able to read this electronic disclosure and that you also were able to print on paper or electronically save this page for your future reference and access or that you were able to e-mail this disclosure and consent to an address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format on the terms and conditions described above, please let us know by clicking the 'I agree' button below.

By checking the 'I agree' box, I confirm that:

- I can access and read this Electronic CONSENT TO ELECTRONIC RECEIPT OF ELECTRONIC CONSUMER DISCLOSURES document; and
- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify Carahsoft OBO Fulton County, Georgia as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by Carahsoft OBO Fulton County, Georgia during the course of my relationship with you.