Contract Renewal Evaluation Form

Date:	August 3, 2022
Department:	FINANCE
Contract Number:	RFP 19-RFP060519C-MH
Contract Title:	Finance Department, RFP 19-RFP060519C-MH, Employee Healthcare Benefit Plan for Aetna (Atlanta, GA) to administer: [1] Dental PPO (DPPO) Plan on a self-insured basis and [2] Dental HMO (DMO) Plan to eligible employees, retirees, beneficiaries and their covered dependents on a fully-insured basis.

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.

Aetna administers the self-insured Dental PPO Plan and the fully insured Dental HMO plans offered to eligible employees, retirees and beneficiaries on behalf of the County. All of the healthcare plans went through a formal procurement process in 2019 to ensure that the County was partnering with quality vendors and effective plans effective 1/1/2020. This contract provides dental benefits. There are no admin fee/premium rate changes to the dental PPO and dental HMO plans from 2022 to 2023.

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:

The competitive bid process during the last procurement that was effective 1/1/2020. The 2023 plan year will exercise the third of four renewal options of the contract cycle.

☐ Internet search of pricing for same product or service:

Date of search:	RFP Review Process
Price found:	Click here to enter text.
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Different features / Conditions:	Click here to enter text.
Percent difference between internet price and renewal price:	Click here to enter text.

Explanation / Notes:

Click here to enter text.

☐ Market Survey of other jurisdictions:

Date contacted:	Click here to enter a date.
Jurisdiction Name / Contact name:	Click here to enter text.

	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.		
	Are they aware of any new vendors?	☐ Yes	□ No		
	Are they aware of a reduction in pricing in this industry?	☐ Yes	□ No		
	How does pricing compare to Fulton County's award contract?	Click here	to enter text.		
	Explanation / Notes:				
	Click here to enter text.				
 Other (Describe in detail the analysis conducted and the outcome): 3. What was the actual expenditure (from the AMS system) spent for this contract for previous fiscal year? Aetna Dental - \$ 2,611,153.68 4. Does the renewal option include an adjustment for inflation? □ Yes ☒ No 					
	etna Dental - \$ 2,611,153.68 Does the renewal option include an adjustment for inflation?	□ Yes			
	Petra Dental - \$ 2,611,153.68 Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index)		[™] No		
Dr	Petra Dental - \$ 2,611,153.68 Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract?	□ Yes	⊠ No □ No		
	Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract?		No □ No a date.		
Pr	Petra Dental - \$ 2,611,153.68 Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract?	☐ Yes Click here to enter	No No a date.		
Pr	Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract? Interest of last purchase: Interest of last purchase:	☐ Yes Click here to enter Click here to enter	No No a date. text.		
Pri Inf	Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract? Interest of last purchase: Interest of last purchase:	☐ Yes Click here to enter Click here to enter Click here to enter	No □ No a date. text. text. text.		
Pri Inf	Does the renewal option include an adjustment for inflation? (Information can be obtained from CPI index) Was it part of the initial contract? Ite of last purchase: Idea paid: Ideal price:	☐ Yes Click here to enter Click here to enter Click here to enter Click here to enter	No □ No a date. text. text. text.		

6.	Has an analysis been conducted to determine it ⊠ No If yes, attach the analysis.	this service can be performed in-house? 🗆 Yes			
	The level of expertise, staffing and resource administration of this service type.	ne level of expertise, staffing and resources do not exist in-house to handle the dministration of this service type.			
7.	What would be the impact on your department if this contract was not approved?				
	Inability to administer plan designs required retirees, beneficiaries and eligible dependent				
	Melissa Barnett, Benefits Manager	August 3, 2022			
	Prepared by	Date			
	Hakeem Oshikoya, Finance Director	August 3, 2022			
	Department Head	Date			