



DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL

DEPARTMENT: Finance

BID/RFP# DESCRIPTION: Employee Benefits Health Plan (Basic & Enhanced Medicare Advantage Plans)

BID/RFP# NUMBER: 19-RFP060519C-MH

ORIGINAL APPROVAL DATE: August 7, 2019

RENEWAL PERIOD: FROM: January 1, 2022 THROUGH December 31, 2022

RENEWAL OPTION #: Second of Four

NUMBER OF RENEWAL OPTIONS: Four

RENEWAL AMOUNT:

- **\$229.19 per enrollee per month Basic Medicare Advantage Plan**
- **\$267.77 per enrollee per month Enhanced Medicare Advantage Plan**

COMPANY'S NAME: Aetna, Inc.

ADDRESS: 1100 Abernathy Road, Suite 375

CITY: Atlanta

STATE: Georgia

ZIP: 30328

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#: 19-RFP060519C-MH

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

FULTON COUNTY, GEORGIA

[INSERT COMPANY NAME]

**Robert L. Pitts, Chairman
Fulton County Board of Commissioners**

**[Insert name]
[Insert title]**

ATTEST:

ATTEST:

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

**Secretary/
Assistant Secretary**

(Affix County Seal)

(Affix Corporate Seal)

AUTHORIZATION OF RENEWAL:

ATTEST:

**[Insert Department Head Name & Title]
[Insert User Department Name]**

Notary Public

County:_____

Commission Expires: _____

(Affix Notary Seal)

ITEM#: _____ RCS: _____
RECESS MEETING

ITEM#: _____ RM: _____
REGULAR MEETING