<table>
<thead>
<tr>
<th>Subcommittee Members</th>
<th>ITEM #</th>
<th>TITLE &amp; ACTION</th>
<th>MOTION</th>
<th>CONTR EXP</th>
<th>OUTCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>William Joyce</td>
<td>P-51-17</td>
<td>Contract Amendment No. 3 Debris Monitoring and Management Planning &amp; Operations Department of Public Works</td>
<td>That Contract No. 7420-13 originally executed September 6, 2017 between the City and Etman &amp; Russo, Inc., for Debris Monitoring and Management Planning &amp; Operations be amended to exercise the first of two (2) one-year renewal options extending the period of service from September 6, 2019 through September 5, 2020 with one renewal remaining. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City's ordinances, Procurement policies and procedures and applicable federal and state laws.</td>
<td>09/06/19</td>
<td></td>
</tr>
<tr>
<td>Dinah Mason</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leah Hayes</td>
<td>P-33-16</td>
<td>Contract Amendment No. 3 Drug &amp; Alcohol Screenings Employee Services Department</td>
<td>That Contract No. 8024-05 between the City of Jacksonville and Solomica d/b/a CareSpot for Drug and Alcohol Screening be amended to: (I) exercise the third of four renewal options extending the period of service from September 1, 2019 through August 31, 2020 with one renewal option remaining; (II) provide an amount of $80,000.00 for the services; and (III) increase the maximum indebtedness by $80,000.00 to a new not-to-exceed amount of $240,000.00. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City's ordinances, Procurement policies and procedures and applicable federal and state laws.</td>
<td>08/31/19</td>
<td></td>
</tr>
<tr>
<td>Diane Moser</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leah Hayes</td>
<td>P-32-16</td>
<td>Contract Amendment No. 4 Occupational Health and Medical Services Program Employee Services Department</td>
<td>That Contract No. 10236 between the City of Jacksonville and St. Vincent's Full Service Urgent Care LLC for Occupational Health and Medical Services be amended to: (I) exercise the third of four renewal options extending the period of services from September 1, 2019 through August 31, 2020 with one renewal remaining; (II) incorporate the attached Revised Contract Fee Summary Identified as Exhibit 'B-1'; (III) provide an amount of $525,000.00 for the services; thereby (IV) increasing the maximum indebtedness by $525,000.00 to a new not-to-exceed total maximum indebtedness of $2,077,000.00. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City's ordinances, Procurement policies and procedures and applicable federal and state laws.</td>
<td>09/01/19</td>
<td></td>
</tr>
</tbody>
</table>
| Twane Duckworth | P-18-18 | Contract Amendment No. 1  
Casualty Actuarial Services  
Finance and Administration  
Department/Risk Management Division | That Contract No. 9925-01 between the City of Jacksonville and AMI Risk Casualty, Inc., for the provision of Casualty Actuarial Services be amended to (i) exercise the first of four renewal options extending the period of service from October 1, 2019 through September 30, 2020, with three renewal options remaining; (ii) provide $27,200.00 for the services; and (iii) increase the maximum indebtedness by $27,200.00 to a new not-to-exceed maximum of $54,400.00. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City’s ordinances, Procurement policies and procedures and applicable federal and state laws. | 09/30/19 |
| Twane Duckworth | P-42-18 | Contract Amendment No. 1  
Workers' Compensation and Casualty Claims Review  
Finance and Administration  
Department/Risk Management Division | That Contract No. 9429-03 between the City of Jacksonville and Silver Insurance Consultants for Workers’ Compensation and Casualty Claims Review be amended to (i) exercise the first of four renewal options extending the period of service from October 1, 2019 through September 30, 2020, with three renewal options remaining; (ii) provide $45,000.00 for the services; and (iii) increasing the maximum indebtedness by $45,000.00 to a new not-to-exceed maximum of $90,000.00. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City’s ordinances, Procurement policies and procedures and applicable federal and state laws. | 09/30/19 |
| Twane Duckworth | P-19-18 | Contract Amendment No. 1  
Workers' Compensation Managed Care Services  
Finance and Administration  
Department/Risk Management Division | That Contract No. 9926-01 between the City of Jacksonville and USIS, Inc., d/b/a AmeriSys, for Workers’ Compensation Managed Care Services be amended to (i) exercise the first of four renewal options extending the period of service from October 1, 2019 through September 30, 2020, with three renewal options remaining; (ii) provide $348,000.00 for the services; and (iii) increase the maximum indebtedness by $348,000.00 to a new not-to-exceed amount of $687,500.00. All other terms and conditions shall remain the same except for such changes as the Office of General Counsel may deem appropriate to ensure compliance with the City’s ordinances, Procurement policies and procedures and applicable federal and state laws. | 09/30/19 |
DATE: June 26, 2019

TO: Gregory W. Pease, Chief
    Procurement Division

THRU: John P. Pappas, P. E., Director

FROM: Dinah Mason, Administration Manager – Special Projects
       William J. Joyce, P. E., Operations Director

SUBJECT: P-51-17 Debris Monitoring and Management Planning & Operations
Contract No. 7420-13, Amendment 3
Consultant Services Account No.: N/A
Internal Services Account No.: PWEN011AD

Contract No. 7420-13 between the City and Eisman & Russo, Inc. is set to expire September 5, 2019. All work has been performed satisfactorily for the past two years. Item 4 of the contract allows for two, one year renewals. Therefore, we wish to extend the contract for the first of the one year renewals. There is no rate increase associated with this amendment.

Accordingly, the Public Works Department recommends that Contract No. 7420-13, originally executed September 6, 2017, between the City and Eisman & Russo, Inc. for Debris Monitoring and Management Planning & Operations be amended to extend the period of service from September 6, 2019 thru September 5, 2020, with all other terms and conditions of the Agreement remaining unchanged.

JPP:dm

Attachments: Letter from Consultant

Cc: Dinah Mason, Administration Manager – Special Projects
    William J. Joyce, P. E., Operations Director
June 25, 2019

Ms. Dinah Mason
Manager of Special Projects
City of Jacksonville
214 North Hogan St.
Ed Ball Bldg., 10th Floor
Jacksonville, FL 32202

Re: P-51-17 Debris Monitoring and Management Planning & Operations
Request for Year Renewal per Contract Original

Dear Ms. Mason:

Eisman & Russo, Inc. is pleased to request an extension to the above referenced contract. The current contract period is valid thru September 5, 2019. In its sole discretion, the City of Jacksonville may renew the contract for up to two (2) one (1) year periods. With this letter, Eisman & Russo, Inc. respectfully requests that the contract be extended for the first of these one (1) year periods. Please note that our rates will not change and will remain the same as approved in the original contract.

If you any issues or concerns regarding this contract, please do not hesitate to contact me at your earliest convenience.

Sincerely,

Antonio Mahfoud, P.E.
President

AJM/amm
Amaxwell/Invoices/coj
July 3, 2019

MEMORANDUM

TO: Gregory W. Pease, Chief of Procurement Division
FROM: Leah Hayes, Chief of Talent Management
RE: Contract Renewal; Drug and Alcohol Screening

P-33-16 Contract #8024-05
Solantic d/b/a CareSpot

Employee Services currently has a contract, 8024-05 with (2) renewal options for Drug and Alcohol Screening with Solantic d/b/a CareSpot.

Accordingly, we recommend the following action:

The City exercises its third (3) option to renew contract #8042-04A with Solantic d/b/a CareSpot, for providing Drug and Alcohol Screening. The period of service will begin September 1, 2019 and expires August 31, 2020, with one (1) renewal option remaining. All terms and conditions are stated in the attached Scope of Services and remain as negotiated in the contract.

Request approval to increase the contract under the negotiated fees, terms and conditions by $80,000.00. This is to ensure there is adequate funding to cover drug and alcohol screenings through the end of the contract. This will revise the maximum indebtedness from $160,000.00 to a not-to-exceed amount of $240,000.00.

Attachments:
Contract Extension Memo
Vendor Renewal Letter
Quotation of Rates
June 10, 2019

City of Jacksonville
117 W. Duval Street, Suite 100
Jacksonville, Florida 32202

Leah Hayes
Manager of Personnel Services

Subject: Contract Extension

Dear Mrs. Hayes:

CareSpot agrees to extend the Solantic of Jacksonville, LLC. (d/b/a CareSpot Express Healthcare) and the City of Jacksonville Occupational Health and Medical Services Program contract for 1 year (September 1, 2019 – September 1, 2020) for the same terms and conditions at current contract agreement P-33-16.

Sincerely,

David M. Arnett
Regional Sales Manager & Occupational Health Services
CareSpot®
### SUBSTANCE ABUSE TESTING SERVICES

#### QUOTATION OF RATES & FEES OR CHARGES (Attach to Form L)

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/FEE/CHARGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Urine specimen collection for 7 Panel Drug Screen (Cannabinoids,</td>
<td></td>
</tr>
<tr>
<td>Cocaine, Opiates, 6-Acetylmorphine, Phencyclidine, Amphetamines,</td>
<td></td>
</tr>
<tr>
<td>Methylenedioxymethamphetamine)</td>
<td></td>
</tr>
<tr>
<td>a. Initial Test</td>
<td>a. $25.00</td>
</tr>
<tr>
<td>b. Confirmation test by GC/MS</td>
<td>b. No Charge</td>
</tr>
<tr>
<td>c. Additional lab fees (e.g. retest of specimen, quantitative)</td>
<td>c. $300.00</td>
</tr>
<tr>
<td>2. Urine specimen collection for 5 Panel Drug Screen (Amphetamines,</td>
<td></td>
</tr>
<tr>
<td>Cocaine, Cannabinoids, Opiates, Phencyclidine, Barbiturates,</td>
<td></td>
</tr>
<tr>
<td>Benzodiazepines, Methaqualone, Methadone, Propoxyphene).</td>
<td></td>
</tr>
<tr>
<td>a. Initial Test</td>
<td>a. $25.00</td>
</tr>
<tr>
<td>b. Confirmation test by GC/MS</td>
<td>b. No Charge</td>
</tr>
<tr>
<td>c. Additional lab fees (e.g. retest of specimen, quantitative)</td>
<td>c. $300.00</td>
</tr>
<tr>
<td>3. Medical Review Officer (MRO) services to interpret all Controlled</td>
<td>Included</td>
</tr>
<tr>
<td>Substances Screens</td>
<td></td>
</tr>
<tr>
<td>4. Alcohol Screen:</td>
<td></td>
</tr>
<tr>
<td>a. Blood Specimen</td>
<td>a. $25.00</td>
</tr>
<tr>
<td>b. Evidential Breath Test (EBT)</td>
<td>b. $25.00</td>
</tr>
<tr>
<td>c. Confirmation EBT</td>
<td>c. $25.00</td>
</tr>
<tr>
<td>5. After hours collection - Days/Times/Ranges</td>
<td></td>
</tr>
<tr>
<td>Seven Days a week</td>
<td></td>
</tr>
<tr>
<td>Time Frame (to and from hours)</td>
<td></td>
</tr>
<tr>
<td>9.01 pm-7:29am</td>
<td></td>
</tr>
<tr>
<td>On-site Service Cost + Normal Cost of Service</td>
<td></td>
</tr>
<tr>
<td>$250.00 + cost of Services</td>
<td></td>
</tr>
<tr>
<td>6. On-site hiring events that occur during the week and during normal</td>
<td>$150.00 +</td>
</tr>
<tr>
<td>business hours.</td>
<td>cost of Service</td>
</tr>
</tbody>
</table>

For years one and two of the agreement, our rates are fixed. There is a 4% increase for year three. The rate remains for year four, and there is a 4% increase in year 5.

- Year 1 & 2 = $25.00
- Year 3 & 4 = $26.00
- Year 5 = $27.00
July 3, 2019

MEMORANDUM

TO: Gregory W. Pease, Chief of Procurement Division
FROM: Leah Hayes, Chief of Talent Management
RE: Contract Renewal; Occupational Health and Medical Services
P-32-16 Contract #10236
St. Vincent’s First Care, LLC

Employee Services currently has a contract, #10236 with (2) renewal options for Occupational Health and Medical Services with St. Vincent’s Full Service Urgent Care, LLC.

Accordingly, we recommend the following actions:

The City exercises its third (3) option to renew contract #10236 with St. Vincent’s First Care, LLC, for providing Occupational Health and Medical Services. The period of service will begin September 1, 2019 and expires August 31, 2020, with one (1) renewal option remaining. All terms and conditions are stated in the attached Scope of Services and remain as negotiated in the contract.

Request approval to increase the contract under the same fees, terms and conditions by $525,000.00. This is to ensure there is adequate funding to cover ongoing health and medical services through the end of the contract. This will revise the maximum indebtedness from $1,552,000.00 to a not-to-exceed amount of $2,077,000.00.

Attachments:
Contract Extension Memo
Vendor Renewal Letter
Quotation of Rates Revised Exhibit B - 1
City of Jacksonville  
Employee Services Department  
117 W. Duval Street, Suite 100  
Jacksonville, FL 32202  
Leah Hayes  
Chief of Talent Management

Re: Rates Change Request for Contract - P-32-16 Occupational Health and Medical Services Program for the City of Jacksonville

Ascension St. Vincent's Urgent Care hereby submits a change in rates for the identified services - marked in red - on the attached Quotation of Rates Sheet. We understand that these rates, once approved, will go into effect for year four renewal period which would begin September 1, 2019.

Sincerely,

Tracey Nelson  
Account Executive  
Ascension St. Vincent's Urgent Care  
Tracey.nelson@ascension.org  
904-495-8197
## MEDICAL AND SUBSTANCE ABUSE TESTING SERVICES

**QUOTATION OF RATES & FEES OR CHARGES for September 1, 2019**

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/FEE/CHARGE</th>
<th>RATE CHANGE REQUEST 1/2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Complete Medical Certificate form; Review job requirements/criteria; general review of systems; height, weight, temperature, pulse, blood pressure; audiometric testing; color vision and visual acuity testing; determine ability to perform job requirements; indicate and pre-existing condition for pension purposes</td>
<td>$55.00</td>
<td></td>
</tr>
<tr>
<td>2. Chest X-ray, one view</td>
<td>$40.00</td>
<td></td>
</tr>
<tr>
<td>3. Chest X-ray, two view</td>
<td>$50.00</td>
<td></td>
</tr>
<tr>
<td>4. EKG, when specified</td>
<td>$25.00</td>
<td></td>
</tr>
<tr>
<td>5. Back X-ray with range of motion examination and functional capacity, two view Lumbar Spine, when specified</td>
<td>$60.00</td>
<td></td>
</tr>
<tr>
<td>6. Tuberculin Test (PPD), or other labs. when specified</td>
<td>$12.00 $15</td>
<td></td>
</tr>
<tr>
<td>7. Pulmonary Function Test, when specified</td>
<td>$30.00</td>
<td></td>
</tr>
<tr>
<td>8. Hepatitis Profile, when specified</td>
<td>$50.00</td>
<td></td>
</tr>
<tr>
<td>9. Urine specimen collection for 7 Panel Drug Screen (Cannabinoids, Cocaine, Opiates, 6-Acetylmorphine, Phencyclidine, Amphetamines, Methyleneoxymethamphetamine)</td>
<td>$25.00 $27</td>
<td></td>
</tr>
<tr>
<td>a. Initial Test</td>
<td>$25.00</td>
<td></td>
</tr>
<tr>
<td>b. Confirmation test by GC/MS</td>
<td>$140.00</td>
<td></td>
</tr>
<tr>
<td>c. Additional lab fees (e.g. retest of specimen, quantitative)</td>
<td>$140.00</td>
<td></td>
</tr>
<tr>
<td>10. Urine specimen collection for 5 Panel Drug Screen (Amphetamines, Cocaine, Cannabinoids, Opiates, Phencyclidine, Barbiturates, Benzodiazepines, Methaqualone, Methadone, Propoxyphene)</td>
<td>$25.00 $25</td>
<td></td>
</tr>
<tr>
<td>a. Initial Test</td>
<td>$25.00</td>
<td></td>
</tr>
<tr>
<td>b. Confirmation test by GC/MS</td>
<td>$140.00</td>
<td></td>
</tr>
<tr>
<td>c. Additional lab fees (e.g. retest of specimen, quantitative)</td>
<td>$140.00</td>
<td></td>
</tr>
<tr>
<td>11. Medical Review Officer (MRO) services to interpret all Controlled Substances Screens</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>12. Alcohol Screen:</td>
<td>$23.00 $20</td>
<td></td>
</tr>
<tr>
<td>a. Blood Specimen</td>
<td>$20.00 $20</td>
<td></td>
</tr>
<tr>
<td>b. Evidential Breath Test (EBT)</td>
<td>$20.00</td>
<td></td>
</tr>
<tr>
<td>c. Confirmation EBT</td>
<td>$20.00</td>
<td></td>
</tr>
<tr>
<td>13. L-RPR (Blood Serology)</td>
<td>$12.00 $15</td>
<td></td>
</tr>
<tr>
<td>14. Chemistry Profile (SMAC LP UA CBC Diff) Including Reticulocyte Count</td>
<td>$45.00</td>
<td></td>
</tr>
<tr>
<td>15. Titmus vision examination, when specified</td>
<td>$10.00</td>
<td></td>
</tr>
<tr>
<td>16. Hemoglobin A1C (HbA1C)</td>
<td>$12.00</td>
<td></td>
</tr>
<tr>
<td>17. HIV / AIDS, when specified</td>
<td>$17.00</td>
<td></td>
</tr>
<tr>
<td>18. Interferon Blood Test for TB</td>
<td>$50.00</td>
<td></td>
</tr>
</tbody>
</table>

**EXHIBIT ‘B-1’**
<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/CHARGE</th>
<th>RATE CHANGE REQUEST 6/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Acetylcholinesterase / Serum Cholinesterase</td>
<td>$30.00</td>
<td></td>
</tr>
<tr>
<td>20. Serum Polychlorinated Biphenyls</td>
<td>$60.00</td>
<td></td>
</tr>
<tr>
<td>22. Blood Lead Screen OSHA</td>
<td>$30.00</td>
<td>$35</td>
</tr>
<tr>
<td>23. Blood Lead Screen with ZPP</td>
<td>$40.00</td>
<td></td>
</tr>
<tr>
<td>24. Heavy Metal Screen (Ar, Cd, Cr, Mn)</td>
<td>$115.00</td>
<td></td>
</tr>
<tr>
<td>25. Phenol Screen</td>
<td>$65.00</td>
<td></td>
</tr>
<tr>
<td>26. Urinalysis Dip Without Microscopy</td>
<td>$7.00</td>
<td></td>
</tr>
<tr>
<td>27. Fitness-for-duty physical examination</td>
<td>$55.00</td>
<td></td>
</tr>
<tr>
<td>28. Pension Disability Assessment (initial)</td>
<td>$250.00</td>
<td></td>
</tr>
<tr>
<td>29. Pension Disability Assessment (second or any subsequent review)</td>
<td>$50.00</td>
<td></td>
</tr>
<tr>
<td>30. Review of supplemental medical information</td>
<td>$50.00/hr</td>
<td></td>
</tr>
<tr>
<td>31. Consultation</td>
<td>$50.00/hr</td>
<td></td>
</tr>
<tr>
<td>32. Expert witness testimony</td>
<td>$150.00/15</td>
<td></td>
</tr>
<tr>
<td>Medical Review Officer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiologist</td>
<td>$200.00/15</td>
<td></td>
</tr>
<tr>
<td>Radiologist/Laboratory</td>
<td>$150.00/15</td>
<td></td>
</tr>
<tr>
<td>33. Cardio-Pulmonary Stress Test, when specified</td>
<td>$350.00</td>
<td>$370</td>
</tr>
<tr>
<td>34. Bruce Protocol Stress Test, when specified</td>
<td>$175.00</td>
<td></td>
</tr>
<tr>
<td>35. Jobsite assessment</td>
<td>$75.00/hr</td>
<td></td>
</tr>
<tr>
<td>36. Psychological or psychiatric evaluation</td>
<td>$600/$800</td>
<td></td>
</tr>
<tr>
<td>37. Cardiologist Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Echo Study</td>
<td>$250.00</td>
<td></td>
</tr>
<tr>
<td>Office Consultation</td>
<td>$250.00</td>
<td></td>
</tr>
<tr>
<td>38. MRI, when specified ($w/out contrast/$ with contrast)</td>
<td>$400/$550</td>
<td></td>
</tr>
<tr>
<td>39. Respirator Mask Fit</td>
<td>$20.00</td>
<td></td>
</tr>
<tr>
<td>40. Other (list/itemize):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PSA</td>
<td>$22.00</td>
<td></td>
</tr>
<tr>
<td>Hepatitis A Titer</td>
<td>$25.00</td>
<td>$28</td>
</tr>
<tr>
<td>Hep A First/Second</td>
<td>$65.00 each</td>
<td>$84</td>
</tr>
<tr>
<td>Hepatitis B Titer</td>
<td>$25.00</td>
<td>$28</td>
</tr>
<tr>
<td>Hep B First/Second/Third</td>
<td>$55.00 each</td>
<td>$65</td>
</tr>
<tr>
<td>Hepatitis C Titer</td>
<td>$25.00</td>
<td>$28</td>
</tr>
<tr>
<td>Rabies Titer</td>
<td>$35.00</td>
<td>$38</td>
</tr>
<tr>
<td>Rabies Vaccine</td>
<td>$300.00</td>
<td>$339</td>
</tr>
<tr>
<td>Tetanus (Td) Vaccine</td>
<td>$35.00</td>
<td>$43</td>
</tr>
<tr>
<td>Flu (Fee varies by season and make-up of vaccine)</td>
<td>$30.00</td>
<td>$35</td>
</tr>
</tbody>
</table>
### Exhibit B - 1

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>PHYSICIAN'S NAME(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction Medicine</td>
<td>Dr. Eduardo Sanchez</td>
</tr>
</tbody>
</table>
| Allergy & Immunology | Dr. Sanjay Swami  
Dr. Harry Katz |
| Anesthesia-Pain Medicine | Coastal Spine and Pain  
Riverside Pain and Spine |
| Cardiology | St. Vincent’s Cardiology Associates |
| Dermatology | Dr. Madeliene Gainers  
Dr. Jonathan Kantor |
| General Surgery (hernias) | North Florida Surgeons |
| Infectious Diseases | Dr. Jennifer Katsolis  
Dr. Catherine Smith |
| Neurology | St. Vincent’s Spine & Brain Institute |
| Ophthalmology | Clay Eye Physicians and Surgeons |
| Orthopedics | SE Orthopedics Specialists |
| Physical Medicine & Rehabilitation | Dr. Stephan Esser  
Dr. Frank Collier |
| Psychiatry/Psychology | Dr. Eduardo Sanchez  
Dr. Roxanne Louh |
| Pulmonology | St. Vincent’s Lung, Sleep,  
and Critical Care Associates |
| Toxicology | Dr. Stephen J. Kracht, MRO |

The City of Jacksonville requires that Provider provide results within 4 working days for candidates who pass physical examinations without complications, with the exception of annual HAZMAT and Medical Surveillance exams, which require a Phenol test that can take up to twenty-one (21) days for the results to come back. The day of the examination shall not be counted in the calculation of the 4 working days. Failure to meet this deadline may result in the City reducing the fee by 50%.

On-site immunizations and Health Fairs will occur during the week and during normal business hours. Provider will provide services during these hours. **Time Frame** (to-from hours): 7:00am to 7:00pm M-F. **On-site Service Cost + Normal Cost of Service: $42/hr, RN, 2 hr min $20/hr, MA, 2 hr min**.

On-call After Hours Services | After 7pm M-F | *N/A

**N/A per addendum answers stating that 24/7 no longer required by this RFP.**

**Note for All** Physicians will be in the St. Vincent’s Health Network. Rates will be the contracted insurance rates of the appropriate CPT code.

*EXHIBIT 'B-1'*
**Exhibit B - 1**

Additional Services Listed in RFP P-32-16 and not found on the provided Quotation of Rates and Fees or Charges Form

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/FEE/ CHARGE</th>
<th>RATE CHANGE REQUEST 6/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cardiovascular Ultrasound (Carotid, Abdominal Aorta, ABI)</td>
<td>$100.00</td>
<td></td>
</tr>
<tr>
<td>2. NFPA 1582 – Isokinetic Testing</td>
<td>$40.00</td>
<td></td>
</tr>
<tr>
<td>3. Body Composition Analysis – Body Metrics Pro System US</td>
<td>$25.00</td>
<td></td>
</tr>
<tr>
<td>4. Body Composition Analysis – Dexascan</td>
<td>$55.00</td>
<td></td>
</tr>
<tr>
<td>5. TSH – Thyroid Stimulating Hormone</td>
<td>$18.00</td>
<td></td>
</tr>
<tr>
<td>6. Hemocult</td>
<td>$25.00</td>
<td></td>
</tr>
<tr>
<td>7. Audiometric Testing</td>
<td>$30.00</td>
<td></td>
</tr>
<tr>
<td>8. Thyroid Ultrasound Diagnostic</td>
<td>$223.00</td>
<td></td>
</tr>
<tr>
<td>9. Liver, Pancreas, Spleen, Gall Bladder, and Kidney US</td>
<td>$223.00</td>
<td></td>
</tr>
<tr>
<td>10. Osteoporosis Bone Density</td>
<td>$150.00</td>
<td></td>
</tr>
<tr>
<td>11. Functional Capacity Evaluation</td>
<td>$40.00</td>
<td></td>
</tr>
<tr>
<td>12. Total Lipid Profile</td>
<td>$12.00</td>
<td>$15</td>
</tr>
<tr>
<td>13. Hair Drug Screen</td>
<td>$50.00</td>
<td>$65</td>
</tr>
</tbody>
</table>

Approved/Amended as of March 17, 2017 Quotation of Rates Fees or Charges

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/FEE/ CHARGE</th>
<th>RATE CHANGE REQUEST 6/2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MMR Titer</td>
<td>$30.00</td>
<td></td>
</tr>
<tr>
<td>2. MMR Vaccine</td>
<td>$95.00</td>
<td></td>
</tr>
<tr>
<td>3. Tdap Vaccine</td>
<td>$55.00</td>
<td>$65</td>
</tr>
<tr>
<td>4. Chicken Pox Vaccine (Varicella or Varivax)</td>
<td>$160.00</td>
<td></td>
</tr>
<tr>
<td>5. Blood Chromium Screen</td>
<td>$30.00</td>
<td>$35</td>
</tr>
<tr>
<td>6. Urine Cadmium Screen</td>
<td>$42.00</td>
<td>$45</td>
</tr>
<tr>
<td>7. Beta-2 Microglobulin</td>
<td>$35.00</td>
<td>$40</td>
</tr>
<tr>
<td>8. Urinary Phenol Screen</td>
<td>$65.00</td>
<td>$70</td>
</tr>
</tbody>
</table>

Approved/Amended as of September 1, 2018 Quotation of Rates Fees or Charges

<table>
<thead>
<tr>
<th>SERVICE</th>
<th>RATE/FEE/ CHARGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. NO SHOW Fee for Psychiatrist or Psychologist</td>
<td>$150.00</td>
</tr>
<tr>
<td>2. Consultation Fee by phone or in person with Psychiatrist or Psychologist</td>
<td>$150.00 per hour</td>
</tr>
<tr>
<td>3. Additional Diagnostic Assessment by Psychologist</td>
<td>$200.00</td>
</tr>
<tr>
<td>4. Drug Screen Charge for specific Drug not currently tested in the standard panel performed for the COJ Contract – this would be a drug test requested by the Psychiatrist to monitor compliance with prescription or to test for a drug of abuse not tested in the standard panel performed for the COJ Contract</td>
<td>$3.00 per add on per drug to be tested.</td>
</tr>
</tbody>
</table>

EXHIBIT ‘B-1’
MEMORANDUM

June 25, 2019

TO: Gregory Pease, Chairman
Professional Services Evaluation Committee

FROM: Twane Duckworth, Chief
Finance and Administration Department/Risk Management Division

Bibinia Centeno, Manager, Finance & Administrative
Finance and Administration Department/Risk Management Division

Subject: P-18-18 Casualty Actuarial Services, 1st Contract Renewal (9925-01)

The current term for the contract 9925-01 with AMI Risk Casualty, INC., for casualty actuarial services is from October 1, 2018 to September 30, 2019. Risk Management is exercising the first of four one-year renewal options for the period October 1, 2019 to September 30, 2020 with three one-year renewal options remaining. The maximum indebtedness to the City will be a not-to-exceed amount of $27,200.00 to a new maximum indebtedness of $54,400.00. The FY 20 fee for services October 1, 2019 to September 30, 2020, is described in Exhibit "B" in the table "Schedule of Proposed Prices/Rates". All other terms and conditions shall remain the same.

Accordingly, it is requested, that the City Contract No. 9925-01, with AMI Risk Casualty, INC., for casualty actuarial services (i) be renewed for the term October 1, 2019 to September 30, 2020. The fee for the Services October 1, 2019 to September 30, 2020 as described in Exhibit B, in the table "Schedule of Proposed Prices/Rates", (ii) increase the maximum indebtedness to the City by a not to exceed amount of $27,200.00 for a new total maximum indebtedness of $54,400.00. All other terms and conditions remain the same.

Thank you for your consideration in this matter.

Attachments:
AMI Risk Casualty, INC., acknowledgement attached
Exhibit "B" Contract Fee Schedule
June 19, 2019

Ms. Bibinia Centeno, CGFO
Financial and Administrative Manager
City of Jacksonville
117 W. Duval Street, Suite 335
Jacksonville, FL 32202

VIA E-MAIL:
BCenteno@coj.net

RE: Professional Services Agreement for Casualty Actuarial Services
Contract No. 9925-01

Dear Ms. Centeno:

This is to confirm in writing our interest to have the subject contract renewed for another year effective October 1, 2019 in accordance with the same terms, conditions, and provisions as the original contract.

Thank you for the opportunity to continue working with you in serving the actuarial needs of the City of Jacksonville.

Sincerely,

Aguedo M. Ingco, FCAS, MAAA, CPCU, ARM
President
July 17, 2018

Ms. Bibinia Centeno, CGFO  
Financial and Administrative Manager  
City of Jacksonville  
117 W. Duval Street, Suite 335  
Jacksonville, FL 32202

RE: Negotiated Fee for RFP No. P-18-18 Casualty Actuarial Services

Dear Ms. Centeno:

This is to confirm in writing of our agreement on the following negotiated fees in connection with the proposal we submitted in response to RFP No. P-18-18 for Casualty Actuarial Services:

<table>
<thead>
<tr>
<th>Term</th>
<th>Fixed Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actuarial Services First (1) year: Report as of 9/30 Annual</td>
<td>$16,000</td>
</tr>
<tr>
<td></td>
<td>Report as of 3/31 Interim</td>
</tr>
<tr>
<td>Actuarial Services Additional four (4) year periods: Report as of 9/30 Annual</td>
<td>$16,000 per year</td>
</tr>
<tr>
<td></td>
<td>Report as of 3/31 Interim</td>
</tr>
<tr>
<td>Two (2) on-site visits (including travel expenses) Per Year</td>
<td>$1,200 per year or $600 per visit</td>
</tr>
</tbody>
</table>
| Alternative Hourly Rate per Staff Level Various miscellaneous services; frequency to be determined | Project Manager @$180/hr.  
Technical Manager @$180/hr.  
Actuarial Assistants @$110/hr.  
Clerical Staff @$40/hr. |

Thank you for the trust and confidence that you have given us. We look forward to continue working with you in serving the actuarial needs of the City of Jacksonville.

Sincerely,

Aguedo M. Ingco, FCAS, MAAA, CPCU, ARM  
President

Actuaries • Risk Management Consultants
MEMORANDUM

June 25, 2019

TO: Gregory Pease, Chairman
Professional Services Evaluation Committee

FROM: Twane Duckworth, Chief
Finance and Administration Department/Risk Management Division

Bibinia Centeno, Manager, Finance & Administrative
Finance and Administration Department/Risk Management Division

Subject: P-42-18 Workers’ Compensation and Casualty Claims Review, 1st Contract Renewal

The current term for the contract 9429-02 with Siver Insurance Consultants, for Workers’ Compensation and Casualty Claims Review is from October 1, 2018 to September 30, 2019. Risk Management is exercising the first of four one-year renewal options for the period October 1, 2019 to September 30, 2020 with three one-year renewal options remaining. The maximum indebtedness to the City will be a not-to-exceed amount of $45,000.00 to a new maximum indebtedness of $90,000.00. The FY 20 fee for services October 1, 2019 to September 30, 2020, is described in Exhibit "B" in the table "Schedule of Proposed Prices/Rates". All other terms and conditions shall remain the same.

Accordingly, it is requested, that the City Contract No. 9925-01, with Siver Insurance Consultants, for Workers’ Compensation and Casualty Claims Review (i) be renewed for the term October 1, 2019 to September 30, 2020. The fee for the Services October 1, 2019 to September 30, 2020 as described in Exhibit B, in the table “Schedule of Proposed Prices/Rates”, (ii) increase the maximum indebtedness to the City by a not to exceed amount of $45,000.00 for a new total maximum indebtedness of $90,000.00. All other terms and conditions remain the same.

Thank you for your consideration in this matter.

Attachments:
- Siver Insurance Consultants., acknowledgement attached
- Exhibit “B” Contract Fee Schedule

DEPARTMENT OF FINANCE - RISK MANAGEMENT DIVISION
117 W Duval Street, ROOM 335   JACKSONVILLE, FL 32202   Phone: 904.630.1307   Fax: 904.630.2913   www.coj.net
June 17, 2019

Twan L. Duckworth, Esq.
Chief of Risk Management
City of Jacksonville
117 W. Duval Street, Suite 335
Jacksonville, FL 32202

Subject: Service Contract for Workers’ Compensation and Casualty Claim Review
One Year Contract Extension Proposal

Dear Mr. Duckworth:

The purpose of this letter is to formally advise you that Siver Insurance Consultants (“Siver”) is ready, willing and able to enter into a one-year extension of our Agreement with the City of Jacksonville (“the City”), pursuant to the terms and conditions of the Services Contract between the City and Siver for Workers’ Compensation and Casualty Claim Review.

As we understand it, the one-year extension would be effective from October 1, 2019 through September 30, 2020. Siver is willing to agree to continue our current, in-force billing rates with the City for the period of the one-year extension.

We look forward to working for the City in the upcoming year.

Very truly yours,

SIVER INSURANCE CONSULTANTS

George W. Erickson, JD, CPCU, LLM
Executive Vice-President

cc. Bibinia Centeno
Form 1 - Price Sheet

Proposal Number: P-42-18 Workers' Compensation and Casualty Claims Review Services

SCHEDULE OF PROPOSED PRICES/RATES

1. Flat Fee Pricing: Annual fixed amount must account for all services listed in this RFP. Any services not listed with separate pricing or as deviations on Form 6 will be considered included in the fixed amount.

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Term</th>
<th>Annual Fixed Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claims Review only</td>
<td>One (1) year with (4) additional (1) year periods</td>
<td>$45,000</td>
</tr>
<tr>
<td>(including all Travel Expenses)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alternative Hourly Rate per staff level</td>
<td>One (1) year with (4) additional (1) year periods</td>
<td>$220/hour - Sr. Consultants $150/hour - Consultants</td>
</tr>
</tbody>
</table>

2. Other Direct Project Costs not included in above fixed pricing (please specify)
   n/a

I certify that the information in this form is true and accurate.

Failure to sign this form shall result in disqualification of this proposal.

Responder’s Signature: [Signature]
Title: Executive Vice President
Date: September 4, 2018
SERVICES CONTRACT
BETWEEN
THE CITY OF JACKSONVILLE
AND
E.W. SIVER AND ASSOCIATES, INC. d/b/a SIVER INSURANCE CONSULTANTS
FOR WORKERS' COMPENSATION AND CASUALTY CLAIMS REVIEW

THIS CONTRACT is made and entered into as of the first day of October, 2018 (the “Effective Date”), by and between the CITY OF JACKSONVILLE (the “CITY”), a municipal corporation existing under the Constitution and the laws of the State of Florida, and E.W. SIVER AND ASSOCIATES, INC. d/b/a SIVER INSURANCE CONSULTANTS, a Florida profit corporation with its principal offices at 801 94th Avenue N, Suite 202, St. Petersburg, Florida 33702 (with mailing address PO Box 21343, St. Petersburg, FL 33742) (the “CONTRACTOR”), for Workers’ Compensation and Casualty Claims Review.

WHEREAS, the CITY issued a Request for Proposal No. P-42-18 (the “RFP”) for certain services described in the RFP (the “Services”); and

WHEREAS, based on CONTRACTOR’s response to the RFP (the “Response”), the CITY has negotiated and awarded this Contract to CONTRACTOR;

NOW THEREFORE, in consideration of the premises and the mutual covenants contained below, the parties agree as follows:

1. Performance of Services. The Services will be performed by CONTRACTOR as specified in the RFP and the Response and as set forth in the Scope of Services, attached hereto as Exhibit A and incorporated herein by this reference.

2. Compensation. CONTRACTOR will be paid by the CITY for the Services as set forth in the Contract Fee Schedule, attached hereto as Exhibit B and incorporated herein by this reference.

3. Maximum Indebtedness. As required by Section 106.431, Ordinance Code, the CITY’s maximum indebtedness for all products and services under this Contract shall be a fixed monetary amount not to exceed FORTY-FIVE THOUSAND AND 00/100 DOLLARS ($45,000.00).

4. Term. The initial term of this Contract shall commence on October 1, 2018, and shall continue through September 30, 2019, unless sooner terminated by either party in accordance with the terms of the RFP. This Contract may be renewed for up to four additional one (1) year periods upon the mutual agreement of the parties.

5. Contract Documents. This Contract consists of the following documents, which are hereby incorporated as if fully set forth herein and which, in case of conflict, shall have priority in the order listed:
    • This document, as modified by any subsequent signed amendments
    • Specific Information Regarding the RFP (Section 1 of the RFP)
    • Description of Services (Section 4 of the RFP)
    • General Instructions (Section 2 of the RFP)
    • General Terms and Conditions of Agreement (Section 3 of the RFP)
    • The Response, provided that any terms in the Response that are prohibited under the RFP shall not be included in this Agreement.
6. **Notices.** All notices under this Agreement shall be in writing and shall be delivered by certified mail, return receipt requested, or by other delivery with receipt to the following:

   As to the CITY:
   Twane Duckworth, Risk Manager
   117 West Duval Street, Suite 335
   Jacksonville, Florida 32202

   As to the CONTRACTOR:
   George W. Erickson, Executive Vice President and Senior Consultant
   801 94th Avenue North, Suite 202
   St. Petersburg, Florida 33702

7. **Contract Managers.** Each Party will designate a Contract Manager during the term of this Contract whose responsibility shall be to oversee the Party's performance of its duties and obligations pursuant to the terms of this Contract. As of the Effective Date, CITY'S Contract Manager is Twane Duckworth (Phone: 904.630.7208; Twaned@coj.net), and the CONTRACTOR'S Contract Manager is George W. Erickson (Phone 727.577.2780; gerickson@siver.com). Each party shall provide prompt written notice to the other party of any changes to the party's Contract Manager or his or her contact information; provided, such changes shall not be deemed Contract amendments and may be provided via email.

8. **Entire Agreement.** This Contract constitutes the entire agreement between the parties hereto for the Services to be performed and furnished by the CONTRACTOR. No statement, representation, writing, understanding, agreement, course of action, or course of conduct made by either party or any representative of either party which is not expressed herein shall be binding. CONTRACTOR may not unilaterally modify the terms of this Contract by affixing additional terms to materials delivered to the CITY (e.g., "shrink wrap" terms accompanying or affixed to a deliverable) or by including such terms on a purchase order or payment document. CONTRACTOR acknowledges that it is entering into this Contract for its own purposes and not for the benefit of any third party.

9. **Amendments.** All changes to, additions to, modifications of, or amendments to this Contract or any of the terms, provisions, and conditions hereof shall be binding only when in writing and signed by the authorized officer, agent, or representative of each of the parties hereto.

10. **Counterparts.** This Contract and all amendments hereto may be executed in several counterparts, each of which shall be deemed an original, and all of such counterparts together shall constitute one and the same instrument.

[Remainder of page left blank intentionally. Signature page follows immediately.]
IN WITNESS WHEREOF, the parties have executed this Contract as of the day and year first above written.

ATTEST:

CITY OF JACKSONVILLE

By James McCain
Corporation Secretary

Sam E. Jones
Chief Administrative Officer
For: Mayor Lenny Curry
Under Authority of:
Executive Order No 2015-05

In accordance with the Ordinance Code of the City of Jacksonville, I do hereby certify that there is an unexpended, unencumbered, and un-impounded balance in the appropriation sufficient to cover the foregoing agreement; and that provision has been made for the payment of monies provided therein to be paid.

Director of Finance
CITY Contract Number: GC-1244377
7/1/19

Form Approved:

James McCain
Office of General Counsel

WITNESS:

E.W. SIVER AND ASSOCIATES, INC.
d/b/a SIVER INSURANCE
CONSULTANTS

By Theresa M. Conley
Signature
Type/Print Name
Sr. Consultant
Title

By George W. Erickson
Signature
Type/Print Name
Executive Vice President
Title
1.1 Introduction
The City of Jacksonville ("Buyer") intends to hire an individual or firm ("Consultant" or "Contractor") to provide the professional services described in Section 1.2 of this Request for Proposal ("RFP"). Persons interested in submitting a response/proposal to this RFP (a "Proposal") should carefully review this RFP for instructions on how to respond and for the applicable contractual terms. This RFP is divided into the following sections:

Section 1 Specific Information Regarding this RFP
Section 2 General Instructions
Section 3 General Terms and Conditions of Agreement
Section 4 Description of Services (if referenced in Section 1.2 below)

Attachment A Response/proposal Format
Attachment B Evaluation Matrix
Attachment C Equal Business Opportunity Program Requirements
(JSEB Form 1, Form 2)
Attachment D Sample Contract
Attachment E Federal Funding Provisions (if applicable under Section 1.7 below)
Attachment F Indemnification
Attachment G Insurance

Form 1 - Price Sheet
Form 2 - Conflict of Interest Certificate
Form 3 - Insurance Agent Acknowledgement
Form 4 - Drug Free Workplace
Form 5 - Mandatory Proposal Forms
Form 6 - Responder's Warranty
Form 7 - Deviation from Services Requested in RFP

In the event of conflicting provisions, the following sections of this RFP will have priority in the order listed: Section 1, Section 4, Section 2, Section 3, the Attachments, and the Forms.

1.2 Scope of Services
The services sought under this RFP are generally described as follows: The purpose of this Request for Proposal is to contract with a qualified Consultant to provide an evaluation of the claims handling processes and procedures of the Self-Insurance Program (General and Automobile Liability, and Workers' Compensation) of the City of Jacksonville, Florida and the Independent Agencies that participate in the Self-Insurance Program in accordance with industry standards and best practices. The Claims Review should address claims practices and claim activity during the past three years. This Claims Review will review 90 WC claims and 150 AL/GL claims.

Please see Section 4 for a full description of the services and deliverables required under this RFP.
Section 4
Description of Services and Deliverables

Contents
4.1 Claims Review Services
4.2 Miscellaneous

4.1 CLAIMS REVIEW SERVICES

A Claims Review of the Risk Management Self-Insurance Program shall be conducted by reviewing a random sample of Workers' Compensation, General and Automobile liability claims. (Review will include 90 WC claims and 150 AL/GL Claims.) For the purposes of this Claims Review, General and Automobile liability shall be combined. The Claims Review should address claims practices and claim activity during the past three years.

The following list provides an outline of general expectations for the Consultant relating to the Claims Review:

1. Contractor must be available for discussions with representatives of Risk Management, both telephonically and in-person, to address desired goals of the claims review and selection criteria for claims to be reviewed, to establish specific dates for Consultant's on-site activities, and to determine what, if any, preparations are necessary on the part of the City to facilitate the Consultant's on-site activities.

2. Claim Review process will be conducted on-site at a mutually agreeable date.

3. In addition to the on-site execution of the Claims Review, the City expects to have an on-site initial visit and an on-site wrap-up visit. All travel costs associated with on-site visits will be at the full expense of the Consultant.

4. Management and claims adjuster interviews;

5. An analysis of staff utilization and needs;

6. An analysis of vendor and expert utilization;

7. Submission of an initial draft of the Claims Review report to the City's Risk Manager on June 1, 2019;
   a. Availability to discuss with the City's Risk Management representatives to review the draft of the Claims Review report;
   b. All information, assumptions, data and analysis used and relied upon, will be disclosed to the City during preparation and prior to the final claims review. The draft report should allow the City an opportunity to validate all assumptions;

8. A written final report of the results of the Claims Review shall be provided to the City's Risk Manager containing both findings and recommendations no later than July 1, 2019.
   a. Availability to discuss with Risk Management representatives the contents of the final claims review report, within thirty (30) days of the issuance of said written final report.
   b. The City reserves the right to have summarized in the final claims review report all information, assumptions, data and analyses that are relied upon.
   c.

9. Evaluation of supervisor/manager claims protocols, including providing direction and review of claims and adjusters according to industry standards.

RFP: P-42-18 WC & Casualty Claims Review Services

Exhibit 'A'
10. Specific to workers' compensation claims procedures, evaluation should include, but not be limited to:
   a. Timely reporting of claims to Risk Management (within 24 hours of notice to supervisor).
   b. Timely setup and assignment to adjuster once received in Risk Management, including compliance with filing state required forms.
   c. Initial contact with physician, claimant and/or employer within 48 hours, as appropriate to the claim type.
   d. Adjuster note field documented.
   e. Reserving appropriate to known exposure, with periodic reviews.
   f. Subrogation/Recovery Unit progress and documentation.
   g. Assignment to nurse case management documented in the notes.
   h. Assignment for surveillance documented in the notes.
   i. If appropriate, timely and detailed reporting to excess insurance.
   j. Adjuster adherence to supervisor direction.
   k. Settlement rationale discussed in the notes, as appropriate.
   l. Timeliness of closure.

11. Specific to general and auto liability claims procedures, evaluation should include, but not be limited to:

   **General Losses:**
   a. Timely establishment of file after claim reported to Risk Management
   b. Initial contact to claimant and/or their representative
   c. Recorded statement taken; if not, documentation of rationale
   d. Each System Tab properly Completed:
      o Claim properly reserved for risk factors known at time of report of claim
      o All info tabs completed: Claim, Employee, Claimant, Litigation Info tabs
      o Attachment Fields properly addressing the exposure: Damages, Liability
      o All legal sub tabs addressed if claim is in litigation
   e. Reserving appropriate to known exposure, with periodic review.

   **Body Injury Claims:** (in addition to the items listed under General Losses)
   a. ISO reporting completed
   b. Injury description outlined
   c. Applicable Checklist provided by OGC in file (i.e. Slip and Fall)
   d. Evaluation of attorney demand within 30 days of receipt
   e. Negotiation strategy outlined, including worst and best possible outcomes
   f. Authority to settle received from Management if offer above adjuster authority
   g. Properly executed release of all claims in file

4.2 **MISCELLANEOUS.** Based upon the information made available to the City as a result of the scope of services ultimately rendered pursuant to the RFP, certain additional insurance consulting services related to the nature and scope of this RFP may be requested by the City. Accordingly, Proposals submitted in response/proposal to the RFP should provide an hourly rate applicable to future additional requested services not specifically requested in the RFP. These services would be similar in scope and nature to the claim review/claim administration and adjusting, etc. Should the City elect additional billed services, the new billed amount will increase the maximum indebtedness amount for services.

(End of Section 4)

RFP: P-42-18 WC & Casualty Claims Review Services

EXHIBIT A
Exhibit B

Form 1 - Price Sheet

Proposal Number: P-42-18 Workers’ Compensation and Casualty Claims Review Services

SCHEDULE OF PROPOSED PRICES/RATES

1. Flat Fee Pricing: Annual fixed amount must account for all services listed in this RFP. Any services not listed with separate pricing or as deviations on Form 6 will be considered included in the fixed amount.

<table>
<thead>
<tr>
<th>Claims Review only (including all Travel Expenses)</th>
<th>Term</th>
<th>Annual Fixed Price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One (1) year with (4) additional (1) year periods</td>
<td>$45,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Alternative Hourly Rate per staff level</th>
<th>Term</th>
<th>Annual Fixed Price</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One (1) year with (4) additional (1) year periods</td>
<td>$220/hour - Sr. Consultants $150/hour - Consultants</td>
</tr>
</tbody>
</table>

2. Other Direct Project Costs not included in above fixed pricing (please specify)
n/a

I certify that the information in this form is true and accurate.

Failure to sign this form shall result in disqualification of this proposal.

Responder's Signature
Title: Executive Vice President
Date: September 4, 2018

RFP: P-42-18 WC & Casualty Claims Review Services
City of Jacksonville, Florida

Lenny Curry, Mayor

Procurement Division
Ed Ball Building
214 N. Hogan Street, Suite 800
Jacksonville, Florida 32202

ONE CITY. ONE JACKSONVILLE.

October 18, 2018

The Honorable Lenny Curry, Mayor
City of Jacksonville
4th Floor, St. James Building
Jacksonville, FL 32202

Dear Mayor Curry:

Ref: P-42-18 Workers Compensation and Casualty Claims Review
Finance and Administration Department/Risk Management Division

The Professional Services Evaluation Committee met today in Board Room B51 on the eighth floor of the Ed Ball Building, for the purpose of concluding fee and contract negotiations with the number one ranked company for the above-captioned project.

The following motion/recommendation was adopted:

That the City of Jacksonville enter into a Contract with Silver Insurance Consultants for the provision of Workers Compensation and Casualty Claims Review Services by: (i) incorporating the attached scope of services identified as Exhibit 'A' and contract fee schedule identified as Exhibit 'B'; (ii) providing a period of service from October 1, 2018 through September 30, 2019 with four (4) one-year renewal options available at terms mutually agreeable; and (iii) providing a not-to-exceed total maximum Indebtedness of $45,000.00. All other terms and conditions are per the RFP and the city’s standard contract language.

If the foregoing meets your approval, we respectfully request your signature and return to my office.

Respectfully submitted,

Gregory Pease, Chief
Procurement Division
Chairman, Professional Services Evaluation Committee

APPROVED:

Lenny Curry, Mayor
This 18th day of October, 2018

cc: Mayor Lenny Curry
Chief Administrative Officer
Under Authority of
Executive Order No. 2015-05
MEMORANDUM

June 28, 2019

TO: Gregory Pease, Chairman
   Professional Services Evaluation Committee

FROM: Twane Duckworth, Chief
       Finance and Administration Department/Risk Management Division

   Barbara Holton, Workers’ Compensation Claims Manager
   Finance and Administration Department/Risk Management Division

Subject: P19-18 Workers’ Compensation Managed Care Services, Renewal, 1st
         Contract Renewal (9926-01)

The current term for the contract 9926-01 with USIS, INC., d/b/a AmeriSys for Workers’ Compensa

The current term for the contract 9926-01 with USIS, INC., d/b/a AmeriSys for Workers’ Compensation Managed Care Services is from October 1, 2019 to September 30, 2020. Risk Management is exercising the first of four one-year renewal options for the period October 1, 2019 to September 30, 2020 with three one-year renewal options remaining. The maximum indebtedness to the City will be a not-to-exceed amount of $348,000.00 to a new maximum indebtedness of $687,500.00. The FY20 fee for services October 1, 2019 to September 30, 2020, is described in Exhibit “B” in the table “Schedule of Proposed Prices/Rates”. All other terms and conditions shall remain the same.

Accordingly, it is requested, that the City Contract No. 9926-01, with USIS, INC., d/b/a AmeriSys for Workers’ Compensation Managed Care Services (i) be renewed for the term October 1, 2019 to September 30, 2020. The fee for the Services October 1, 2019 to September 30, 2020 as described in Exhibit B, in the table “Schedule of Proposed Prices/Rates”. (ii) increase the maximum indebtedness to the City by a not to exceed amount of $348,000.00 for a new total maximum indebtedness of $687,500.00. All other terms and conditions remain the same.

Thank you for your consideration in this matter.

Attachments:
USIS, INC., d/b/a AmeriSys acknowledgement attached
Exhibit “B” Contract Fee Schedule
June 27, 2019

Twan L. Duckworth
Chief of Risk Management
117 W. Duval Street, Ste 335
Jacksonville, FL 32207

Re: Agreement for Workers’ Compensation Managed Care Services

Dear Mr. Duckworth:

This is to confirm our agreement to extend the above mentioned contract, in accordance with the extension provisions and amounts outlined Form 1 Price Sheet in proposal P-19-18 June 27, 2018. Other terms of the agreement remain the same.

This contract extension is for contract period October 1, 2019 through September 30, 2020.

Thank you for allowing us to serve your organization and feel free to contact me should you have any questions.

Respectfully submitted,

Ron Warble
Executive Vice President
USIS, Inc. dba AmeriSys
Proposed Flat Annual Cost for ALL REQUESTED SERVICES:

<table>
<thead>
<tr>
<th>Term</th>
<th>Proposed Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 1, 2018 – September 30, 2019</td>
<td>$339,500.00</td>
</tr>
<tr>
<td>October 1, 2019 – September 30, 2020</td>
<td>$348,000.00</td>
</tr>
<tr>
<td>October 1, 2020 – September 30, 2021</td>
<td>$356,750.00</td>
</tr>
<tr>
<td>October 1, 2021 – September 30, 2022</td>
<td>$365,500.00</td>
</tr>
<tr>
<td>October 1, 2022 – September 30, 2023</td>
<td>$374,750.00</td>
</tr>
</tbody>
</table>

Please outline ALL variable costs which are not included above.
No variable costs.

Please confirm that all services outlined in the Transition Phase are included in above pricing.
All services outlined in the Transition Phase are included in the above pricing.