ONE CITY. ONE JACKSONVILLE.

City of Jacksonville, Florida

Lenny Curry, Mayor
Division of Insurance and Risk Management
117 West Duval Street
Suite 335
Jacksonville, FL 32202
(904) 630-7521
www.coj.net

MEMORANDUM

Date: September 26, 2018

10/01/18 13:55:16
Procurement Division

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: **Subcommittee Review Letter for P-42-18 Workers Compensation and Casualty Claims Review Services**

The subcommittee received one (1) proposal for evaluation for the above referenced project and found that one to be responsive, interested, qualified and available to provide the services required by the RFP.

The proposal was evaluated using the criteria outlined in the Purchasing Code as modified by the RFP (Attachment B – Evaluation Matrix). The Price Sheet (Form 1 – Price Sheet) for that proposer is provided.

Based on the above, the following proposer is determined to be qualified to perform the required service and this proposer is:

1. Siver Insurance Consultants

We recommend that the above list be forwarded to the Mayor for final selection.

Attachments:
Scoring Matrix
Form 1 – Price Sheet (All Proposers)

Evaluation Matrix

EVALUATION SCALE

1----------10

QUALIFIED EXTREMELY QUALIFIED

PROJECT NO. **P-42-18**

PROJECT TITLE: **Workers Comp & Casualty Claims Review**

FIRM	COMPETENCE	CURRENT WORKLOAD	FINANCIAL RESPONSIBILITY	ABILITY TO OBSERVE COMPLIANCE WITH PLANS	PROFESSIONAL ACCOMPLISHMENTS RECORD	PROXIMITY TO PROJECT	Past & Present Demonstrated Commitment to Small & Minority Businesses & Contributions Toward A Diverse Market Place	ABILITY TO DESIGN AN APPROACH AND WORK PLAN	TIME & BUDGET	VOLUME OF CURRENT AND PRIOR WORK FOR USING AGENCIES	OVERALL
Maximum Points	20	5	5	5	5	5	10	20	20	5	**100**
Siver Insurance Consultants	19.50	5.00	5.00	5.00	5.00	3.50	9.50	20.00	19.50	4.50	**96.50**

Evaluation Matrix

EVALUATION SCALE

1 ———————————————— 20

QUALIFIED EXTREMELY QUALIFIED

PROJECT NO. **P-42-18**

PROJECT TITLE: **Worker's Compensation and Casualty Claims Review**

FIRM	COMPETENCE	CURRENT WORKLOAD	FINANCIAL RESPONSIBILITY	ABILITY TO OBSERVE COMPLIANCE WITH PLANS	PROFESSIONAL ACCOMPLISHMENTS RECORD	PROXIMITY TO PROJECT	Past & Present Demonstrated Commitment to Small & Minority Businesses & Contributions Toward A Diverse Market Place	ABILITY TO DESIGN AN APPROACH AND WORK PLAN	Quotation of Rates, Fees or Charges & Other Detailed Cost Proposal or Cost Breakdown Information	VOLUME OF CURRENT AND PRIOR WORK FOR USING AGENCIES	OVERALL
MAXIMUM POINTS	**20**	**5**	**5**	**5**	**5**	**5**	**10**	**20**	**20**	**5**	**100**
Siver	**19.00**	**5.00**	**5.00**	**5.00**	**5.00**	**4.00**	**10.00**	**20.00**	**19.00**	**5.00**	**97.00**

Bm Centers 9/26/18

Evaluation Matrix

EVALUATION SCALE

1 ---------- 20

QUALIFIED EXTREMELY QUALIFIED

PROJECT NO. **P-42-18**

PROJECT TITLE: **Worker's Compensation and Casualty Claims Review**

FIRM	COMPETENCE	CURRENT WORKLOAD	FINANCIAL RESPONSIBILITY	ABILITY TO OBSERVE COMPLIANCE WITH PLANS	PROFESSIONAL ACCOMPLISHMENTS RECORD	PROXIMITY TO PROJECT	Past & Present Demonstrated Commitment to Small & Minority Businesses & Contributions Toward A Diverse Market Place	ABILITY TO DESIGN AN APPROACH AND WORK PLAN	Quotation of Rates, Fees or Charges & Other Detailed Cost Proposal or Cost Breakdown Information	VOLUME OF CURRENT AND PRIOR WORK FOR USING AGENCIES	OVERALL
MAXIMUM POINTS	**20**	**5**	**5**	**5**	**5**	**5**	**10**	**20**	**20**	**5**	**100**
Siver Insurance Consultants	**20.00**	**5.00**	**5.00**	**5.00**	**5.00**	**3.00**	**9.00**	**20.00**	**20.00**	**4.00**	**96.00**

Form 1 - Price Sheet

NAME OF CONSULTANT E. W. Siver & Associates, Inc. dba Siver Insurance Consultants

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.

	Term	Annual Fixed Price
Claims Review only (including all Travel Expenses)	One (1) year with (4) additional (1) year periods	$45,000
Alternative Hourly Rate per staff level	One (1) year with (4) additional (1) year periods	$220/hour - Sr. Consultants $150/hour - Consultants

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