ONE CITY. ONE JACKSONVILLE.

MEMORANDUM

May 1, 2018

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: **Certification Letter for RFP for P-18-18 Casualty Actuarial Services**

Please take appropriate action to issue a Request for Proposal (RFP) for the referenced professional services.

The following information is furnished in accordance with chapter 126.302 of the City Ordinance Code.

1. The general purpose of the service or study:

   See attached RFP; generally to provide liability projections for the City's Self-Insurance Program.

2. The Objective of the study or services:

   The main objective of this RFP is to select a vendor that will provide the service and deliverables as described in Section 4 to be in compliance with meeting the GASB 10 requirements to fairly present the liability of the Self-Insurance Program.

3. The estimated period of time needed for the service or study:

   It is an original one fiscal year with four one year renewal options.

4. The estimated cost of the service or study:

   The estimated cost for these services is budgeted at $28,400 for FY 19; this is based on the FY18 budget.

5. Whether the proposed study or service would or would not duplicate a prior or existing study or service:

   The requested services will not duplicate existing services.

6. List of current contracts or prior services or studies which are related to the proposed study or service.

   The current Casualty Actuarial Services Contract is P34-13 awarded to AMI Risk Consultants, Inc., which expires on September 30, 2018.

7. A statement as to why the service/study cannot be done by department or agency staff:

   Under the guidelines of GASB 10 the Self-Insurance Program of the City is required to have an annual casualty actuarial study done to determine the proper reserves to record on the Balance Sheet of the City. This should be done independently and with a skill set not present within the City.

8. The **names** and **telephone numbers** of **two** representatives from the using agency designated to serve on the evaluation committee as subcommittee members

   Twane Duckworth, Chief of Risk Management, 630-7208
   Bibinia Centeno, Financial & Admin. Manager, 630-7901

9. A project funding account number:

   AFRM581AD - 03109

10. The **names** and **addresses** of **specific consultants** the using agency wishes to be included in the solicitation process.

    Gail Flannery
    AMI Risk Consultants, Inc.
    1336 SW 146th Ct
    Miami, FL 33184
    Phone: (305) 273-1589
    Fax: (305) 330-5427
    gailf@amirisk.com

11. A signed statement to the effect the individuals responsible for developing the scope and Certification letter and the two individuals named herein to serve as subcommittee Members, have read and understood the Procurement Manual and Procurement Committee Guidelines dated March, 2017

Twane Duckworth	Chief of Risk Management TITLE
Bibinia Centeno	Financial & Admin. Manager TITLE