SUBJECT: PIGGYBACK CHARLOTTE COUNTY RFQ #2017000070 FOR RISK MANAGEMENT INFORMATION SYSTEM

BID #: PSC-0506-18 **OPEN DATE: 06/14/2018**

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: THREE (3) YEARS FROM CONTRACT EXECUTION

AGENCY: RISK MANAGEMENT DIVISION

BASIS OF AWARD: PIGGYBACK CHARLOTTE COUNTY RFQ #2017000070

NUMBER OF BIDS INVITED: ( ) **NUMBER RECEIVED:** ( ) **OTHER** ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to increase the piggyback award with Origami Risk, LLC, via Charlotte County RFQ #2017000070 by $18,030.00 to cover travel cost for Origami Risk representatives to orchestrate the transition of the Risk Management Information System (RMIS) and to add an automated law enforcement report to the RMIS. The total revised expenditure amount not-to-exceed $444,790.00.

Funding Source: AFRM581AD-03109 – To be executed by formal contract amendment through the Office of General Counsel

ATTACHMENTS: Recommendation Memo, Statement of Work/Quote and Previous Award

ANALYST: _____ **RESPECTFULLY SUBMITTED** _____
Annette Burney
GREGORY PEASE, CHIEF
PROCUREMENT DIVISION

CONCURRENCE BY: Twane Duckworth, Chief of Risk Management

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE
MEMBERS APPROVING _____ MEMBERS DISAPPROVING _____ DATE: _____

_____ _____ OTHER: _____

_____ _____

_____ _____

ACTION OF AWARDING AUTHORITY DATE _____

APPROVED _____ DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION _____

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

TO: **Greg Pease, Procurement Chief**

FROM: **Twane Duckworth, Chief of Risk Management**

SUBJECT: **Origami Risk Contract (#10448) – Increased Maximum Indebtedness**

DATE: **January 9, 2019**

The Risk Management Division (the "Division") for the City is currently engaged in a contract (#10448) with Origami Risk to provide a transition from Marsh Clearsight which has provided the Division a Risk Management Information Systems ("RMIS") for almost 20 years.

The transition from this Marsh Clearsight's legacy system is quite an undertaking in both volume and the sensitivity of the records themselves. It must be done correctly on the first time. Accordingly, there is a need for additional work to be done onsite to effectively minimize errors. This travel is not contemplated in our previously approved maximum indebtedness. The expected costs for three trips by several Origami representatives through the implementation phase is estimated at $11,000.00 dollars.

In addition, the Division desires to add an additional tool within the existing approved system for an automated law enforcement report. The Divisions handles hundreds of these forms and will provide more efficiency to our work. The quote costs for this addition is $7,030.00.

Accordingly, the Division is requesting to increase the current maximum indebtedness of $426,760.00 (four hundred twenty six thousand seven hundred sixty dollars and no cents) by $18,030.00 (eighteen thousand thirty dollars and no cents) for a new maximum indebtedness of $444,790.00 (four hundred forty four thousand seven hundred ninety dollars and no cents). All the original terms of the contract will remain the same. The Division's funding source is through AFRM581AD – 3109.

Attachments: Exhibit 1 – Statement of Work #20181207

STATEMENT OF WORK #20181207
Ref ID: #COJ20180115

This Statement of Work ("SOW") describes services to be performed by Origami Risk LLC ("Origami") for City of Jacksonville ("Client"). This SOW is subject to all the terms and conditions of the Agreement between Client and Origami for Provision of a Risk Management Information System, including the Statement of Work attached thereto as Exhibit A (collectively, the "Agreement").

TERM

The term of this SOW shall begin upon execution and shall be coterminous with the term of the Agreement.

PROJECT SCOPE

Provide and implement Origami's Risk Management Information System (RMIS) OCR for one additional custom form to Client's Risk Management team, to help ensure accurate and consistent tracking and reporting of Traffic Crash Reports. Client's claims.

Project Priorities: The immediate priorities focus on the following areas:

(i) Create and Tag Florida Traffic Crash Report Form
Origami will utilize the OCR capabilities to scan and read the Florida Traffic Crash Report (long form version – only) Pages 1-3 excluding the diagram not OCR compatible.

(ii) Test and Certify form
Once the new nonstandard OCR form is built, testing will be conducted to ensure tagging and scanned detail is converted in to the system as expected. Since this is a nonstandard Acord form we will require added client testing to ensure accurate utilization.

(iii) Build out form workflow in support the business needs of the Client
Origami will work with the Client to configure and deploy the Florida Traffic Crash Report form. With the build out we will collect business needs workflow and have that built in to the system. Testing of workflow will also be conducted with client assistance.

OCR Form Configuration Details:

Form name: Florida Traffic Crash Report **(see Exhibit C for sample)**

Professional Services work to be performed by Origami professionals for the creation of OCR documents:

Hours	Service Hours Used For
18	Configuration and Testing of (1) non-standard form including form tagging, fields creations, data transfer and OCR testing.
20	Set up of workflow around form to assist in business needs of Client
Total:	38

Cost: 38 Service hours x $185 Service hour bundled rate = $7,030

Subtotal: $7,030

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Ref ID: #COJ20180115

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Cost: 38 Service hours x $185 Service hour bundled rate = $7,030

Subtotal: $7,030

LICENSES

Extended Functionality Licenses

License	Selected	Quantity	Description
OCR Scanning License	Yes	1 additional nonstandard form.	This license provides access to Origami Risk's Optical Character Recognition (OCR) functionality for the purpose of mapping specified data from scanned documents to data fields within Origami Risk.

License Notes:

1. Origami Risk adds generally available features from time to time that may require configuration prior to use. If Client requests Origami's assistance in this configuration, Professional Services hours may be applied for any such configuration.

2. In addition to the generally available features, Origami Risk may occasionally deploy new functionality that will require an Extended Functionality License similar to those listed in the Extended Functionality License section above. These features may require additional fees based on record volume, number of additional users accessing the new features, or some other incremental cost driver. In such cases, additional fees will apply.

PRICING AND INVOICE SCHEDULE

The price for the services listed above in this SOW is $7,030 for the first year, one-time payment. Exhibit B provides a detailed breakdown of the components of the price.

Payment is due in full upon execution of this SOW Amendment.

If needed, additional services can be purchased through an additional addendum to this SOW. All fees are subject to state sales tax, where applicable.

ADDITIONAL PRICING:

1. If Client requires additional storage during the term of this SOW, additional fees will apply as follows:

- Current annual fee for storage of up to 5,000 Claims / Incidents = $5,000
- Annual fee for storage of 5,001-10,000 Claims / Incidents = $7,500
- Annual fee for storage of 10,001-25,000 Claims / Incidents = $15,000

- Current annual fee for storage includes 50GB of File Attachment storage
- Additional File Attachment storage is $2,000 per 50GB per year

2. Additional Professional Service hours will be invoiced as incurred at Origami's unbundled rate listed within Exhibit B. Bundled hours may be added prior to the start of each contract year.

3. Additional users, additional licenses or additional use beyond that which is listed above in the Licenses section of this SOW shall require additional fees. Origami shall invoice Client, and Client shall pay for any additional licenses, hosting, service hours or other usage in excess of what is specified in this SOW.

If the parties agree to extend this Agreement for the Renewal Terms, then the Fees will be increased as follows.

In year 4: By an amount equal to the greater of (i) 3 percent of the total cost charged by Origami during the year 3 or (ii) the cumulative percentage increases in the Consumer Price Index (All Urban Consumers) (CPI-U) of the U.S. Department of Labor for the relevant geographical area from the Effective Date of the contract to the current year.

In Year 5: By an amount over the previous year equal to the greater of (i) 3 percent of the total cost charged by Origami during year 4 or (ii) the percentage increase in the Consumer Price Index (All Urban Consumers) (CPI-U) of the U.S. Department of Labor for the relevant geographical area over the previous year.

Exhibit B to this SOW provides a detailed breakdown of the components of the price.

STATEMENT OF WORK APPROVAL

The undersigned agree to this Statement of Work.

ORIGAMI RISK LLC	**[NAME OF CLIENT]**
By: _____	By: _____
Name: _____ (Print Name)	Name: _____ (Print Name)
Title: _____	Title: _____
Date: _____	Date: _____

EXHIBIT B
PRICING DETAIL

PROFESSIONAL SERVICES	Professional Service Hours			Professional Service Fee			Comments
	Year 1	Year 2	Year 3	Year 1	Year 2	Year 3	
System Implementation							
OCR Configuration & Testing	18			3,330			
OCR System Work Flow	20			3,700			
TOTAL Implementation Prof. Services	38			7,030			

Cost: 38 Service hours x $185 Service hour bundled rate = $7,030

Subtotal: $7,030

EXHIBIT C

FLORIDA TRAFFIC CRASH REPORT

LONG FORM ☐ SHORT FORM ☐ UPDATE ☐

HIGHWAY SAFETY & MOTOR VEHICLES
TRAFFIC CRASH RECORDS
NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0537

Crash Date	Time of Crash	Date of Report	Reporting Agency	Reporting Agency Case Number	HSMV Crash Report Number

CRASH IDENTIFIERS

County Code | City Code | County of Crash | Place or City of Crash | Within City Limits | Reported Date/Time | Dispatched Date/Time

On Scene Date/Time | Cleared Scene Date/Time | Investigation Complete | Reason (if Investigation Not Complete) | Notified By

ROADWAY INFORMATION

Crash Occurred on Street, Road, Highway | At Street Address # | At Latitude | And Longitude

At Feet | Of Miles | Direction | From Intersection With Street, Road, Highway | Or From Milepost Number

Road System Identifier | Type of Shoulder | Type of Intersection

CRASH INFORMATION ☐ Pictures Taken

Light Condition | Weather Condition | Roadway Surface Condition | School Bus Related | Manner of Collision

First Harmful Event Type | First Harmful Event Detail | First Harmful Event Location | Within Interchange | First Harmful Event's Relation to Junction

Contributing Circumstances: Road | Contributing Circumstances: Road | Contributing Circumstances: Road

Contributing Circumstances: Environment | Contributing Circumstances: Environment | Contributing Circumstances: Environment

Work Zone Related | Crash in Work Zone | Type of Work Zone | Workers in Work Zone | Law Enforcement in Work Zone

VEHICLE ☐ Commercial Motor Vehicle

Vehicle | Motor Vehicle Type | Hit & Run (by this vehicle) | License Number | State | Reg. Expires | Permanent Reg. | VIN

Year | Make | Model | Style | Color | Extent of Damage | Est. Damage | Towed Due to Damage | Vehicle Removed By | Rotation

Insurance Company N/A | Insurance Policy Number

Name of Vehicle Owner | Business ☐ | Current Address | City | State Zip Code | Phone Number(s)

Trailer License Number | State | Reg. Expires | Permanent Reg. | VIN | Year | Make | Length | Axles

Trailer License Number | State | Reg. Expires | Permanent Reg. | Year | Make | Length | Axles

Vehicle Traveling | Direction | On Street, Road, Highway | At Est. Speed | Posted Speed | Total Lanes

CMV Configuration | Cargo Body Type

Comm GVWR/GCWR | Trailer Type (Trailer One) | Trailer Type (Trailer Two)

Haz. Mat. Placard | Haz Mat Placard | Haz. Mat. Number | Haz. Mat. Class

Motor Carrier Name | US DOT Number

Motor Carrier Address | Address Other | City | State | Zip Code | Phone Number

Area of Initial Impact | Underbelly | Overturn | Windshield | Trailer | Most Damaged Area

Comm/Non-Commercial | Vehicle Body Type | Vehicle Defects (one) | Vehicle Defects (two) | Emergency Vehicle Use

Vehicle Maneuver Action | Trafficway | Roadway Grade | Roadway Alignment | Most Harmful Event | Most Harmful Event Detail

Traffic Control Device for this Vehicle | First (1) Sequence of Events | Second (2) Sequence of Events | Third (3) Sequence of Events | Fourth (4) Sequence of Events

VEHICLE ☐ Commercial Motor Vehicle

Vehicle | Motor Vehicle Type | Hit & Run (by this vehicle) | License Number | State | Reg. Expires | Permanent Reg. | VIN

Year | Make | Model | Style | Color | Extent of Damage | Est. Damage | Towed Due to Damage | Vehicle Removed By | Rotation

Insurance Company | Insurance Policy Number

Name of Vehicle Owner | Business ☐ | Current Address | City | State Zip Code | Phone Number(s)

Trailer License Number | State | Reg. Expires | Permanent Reg. | VIN | Year | Make | Length | Axles

Trailer License Number | State | Reg. Expires | Permanent Reg. | VIN | Year | Make | Length | Axles

Vehicle Traveling | Direction | On Street, Road, Highway | At Est. Speed | Posted Speed | Total Lanes

OFFICER COPY

Crash Date	Time of Crash	Date of Report	Reporting Agency	Reporting Agency Case Number	HSMV Crash Report Number
/ /	5:23	11/16/2018	JACKSONVILLE SHERIFFS OFFICE	79121212	88629452-01

CMV Configuration	Cargo Body Type	Area of Initial Impact		Most Damaged Area
Comm DV/MIC/CMR	Trailer Type (Trailer One) / Trailer Type (Trailer Two)		☐ Undercarriage ☐ Overturn ☐ Windshield ☐ Trailer	
Haz. Mat. Hazclass / Haz Mat Placard / Haz. Mat. Number / Haz. Mat. Class				
Motor Carrier Name / DS DOT Number				

Motor Carrier Address	Address Other	City	State	Zip Code	Phone Number

Commercial Commercial	Vehicle Body Type	Vehicle Details (year)	Vehicle Details (year)	Emergency Vehicle Use	Special Function of a/v

Vehicle Maneuver Action	Trafficway	Roadway Grade	Roadway Alignment	Most Harmful Event	Most Harmful Event Detail

Traffic Control Device for this Vehicle	First (1) Sequence of Events	Second (2) Sequence of Events	Third (3) Sequence of Events	Fourth (4) Sequence of Events

PERSON RECORD

#	Person Type	Name	Address	Phone Number

NON VEHICLE PROPERTY DAMAGE

Property Damage (Other than Vehicle)	Est. Damage	Business	Personal	Property Owner

NON VEHICLE PROPERTY DAMAGE

Property Damage (Other than Vehicle)	Est. Damage	Business	Personal	Property Owner

NON VEHICLE PROPERTY DAMAGE

Property Damage (Other than Vehicle)	Est. Damage	Business	Personal	Property Owner

NARRATIVE

ID Number	Rank	Name	Troop / Post	Officer Agency	Phone Number

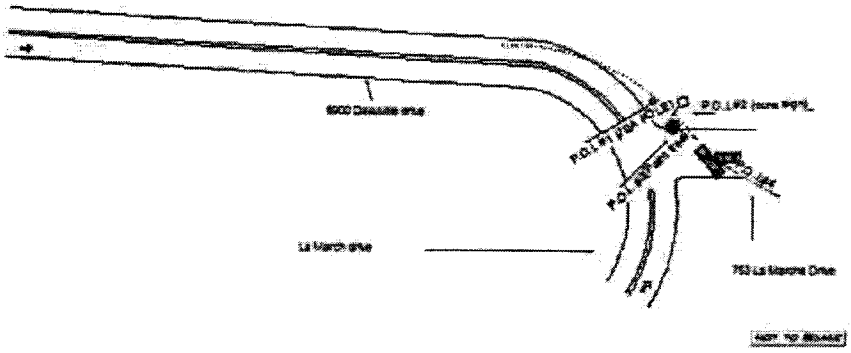
REPORTING OFFICER

ID Number	Rank	Name	Troop / Post	Officer Agency	Phone Number

OFFICER COPY

Crash Date	Time of Crash	Date of Report	Reporting Agency	Reporting Agency Case Number	HSMV Crash Report Number

DIAGRAM OF CRASH



SUBJECT: PIGGYBACK CHARLOTTE COUNTY RFQ #2017000070 FOR RISK MANAGEMENT INFORMATION SYSTEM

BID #: PSC-0506-18

OPEN DATE: 06/14/2018

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT: THREE (3) YEARS FROM CONTRACT EXECUTION

AGENCY: RISK MANAGEMENT DIVISION

BASIS OF AWARD: PIGGYBACK CHARLOTTE COUNTY RFQ #2017000070

NUMBER OF BIDS INVITED: ( ) NUMBER RECEIVED: ( ) OTHER ( )

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:
Recommend approval to piggyback Charlotte County RFQ #2017000070 with Origami Risk, LLC., to provide a risk management information system. The period of service will be three (3) years from contract execution. The total expenditure requested not-to-exceed $426,760.00.

To be executed by formal contract through the Office of General Counsel and encumbered by account AFRM581AD-03109.

ATTACHMENTS: Recommendation Memo, Risk Management Insurance Approval, Charlotte County RFQ, Charlotte County Contract, Statement of Work

ANALYST: CHELSEY FLEMING

RESPECTFULLY SUBMITTED GREGORY PEASE, CHIEF PROCUREMENT DIVISION

CONCURRENCE BY: Twane Duckworth, Chief of Risk Management

(ALL AWARD ACTIONS SUBJECT TO LAWFULLY APPROPRIATED FUNDS)
ACTION OF GGAC COMMITTEE ON RECOMMENDATIONS ABOVE

MEMBERS APPROVING 3 MEMBERS DISAPPROVING Ø DATE: 6/14/18

Teresa R Eilman

OTHER:

ACTION OF AWARDING AUTHORITY

DATE 6/14/18

APPROVED

DISAPPROVED

OTHER

SIGNATURE OF AUTHENTICATION

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

QWS3270X 1/14/2019 11:42 AM
FAML6350 V5.1 ** NW COJ FAMIS PRODUCTION ** 01/14/2019
LINK TO: ACCOUNT SUMMARY INQUIRY 11:42 AM

FISCAL MO/YEAR : 04 2019 CURRENCY CODE :
INDEX CODE : AFRM581AD RISK MANAGEMENT ADMINISTRATION
SUBOBJECT : 03109 PROFESSIONAL SERVICES
PROJECT :
PROJECT DETAIL :
GRANT :
GRANT DETAIL :
USER CODE :

S	JAN 2019	ANNUAL BALANCE	ALL YEARS BALANCE
ESTIMATED REVENUES	.00	.00	.00
REVENUES	.00	.00	.00
UNREALIZED REVENUES	.00	.00	.00
BUDGET	.00	644,945.01	644,945.01
EXPENDITURES	35,563.33	106,689.99	106,689.99
ENCUMBRANCES	-35,563.33	519,835.02	519,835.02
PRE-ENCUMBRANCES	.00	.00	.00
REMAINING BALANCE	.00	18,420.00	18,420.00

F1-HELP F2-SELECT F4-PRIOR F5-NEXT
F9-LINK F10-PRIOR-MO F11-NEXT-MO

G014 - RECORD FOUND