

117 Putnam Drive, Suite A ◊ Eatonton, GA 31024

Agenda Friday, May 3, 2019 ◊ 9:00 AM

<u>Putnam County Administration Building – Room 203</u>

Opening

- 1. Welcome Call to Order
- 2. Invocation Pastor James Smith
- 3. Pledge of Allegiance (BW)
- 4. Special Presentations
 - a. 21st Century Partnership
 - b. Preliminary Report by Courthouse Landscaping Committee
 - c. Departmental Report-Finance Department

Regular Business Meeting

- 5. Public Comments
- 6. Approval of Agenda
- 7. Consent Agenda
 - a. Approval of Minutes April 16, 2019 Regular Business Meeting (staff-CC)
 - b. Approval of Minutes April 16, 2019 Executive Session (staff-CC)
 - c. Approval of Minutes April 26, 2019 Work Session (staff-CC)
 - d. Approval of 2019 Alcohol Licenses (staff-CC)
 - e. Approval of Resolution requesting Sales Tax Information from DOR and Naming a Designated Officer (staff-Finance)
- 8. Approval of 2019 Budget Amendment #1 (staff-Finance)
- 9. Approval of 2020 Budget and 2019 Mill Rate Schedule (staff-Finance)
- 10. Appointments to the 2020 Census Complete Count Committee (staff-CC)
- 11. Approval of 2019-2020 Employee Insurance Benefits (staff-CM)
- 12. Authorization for Chairman to sign Supplemental Agreement #1 between GDOT and Putnam County for Local Bridge Replacement Project PI #0015658 CR 29 (Martins Mill Road) at Little River (staff-CM)

Reports/Announcements

- 13. County Manager Report
- 14. County Attorney Report
- 15. Commissioner Announcements

Closing

16. Adjournment

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.

Item Attachment Documents:

- 4. Special Presentations
 - a. 21st Century Partnership
 - b. Preliminary Report by Courthouse Landscaping Committee
 - c. Departmental Report-Finance Department

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Ms. Chrissy Miner



Ms. Miner wears many hats in the middle Georgia community. She currently serves as the President/CEO of the 21st Century Partnership and the Museum of Aviation Foundation. She is also a reservist in the U.S. Air Force Reserve.

At the Partnership, she is responsible for the planning and execution of strategies required to enhance the military value of both Robins Air Force Base and the middle Georgia community. She works closely with community leaders, legislators and senior military officials to make middle Georgia as conducive as possible to build on current missions and accept new missions; thereby enhancing the 70-plus year partnership between the base and community.

As the President/CEO of the Museum of Aviation Foundation, She is responsible for the day-to-day operations of the Museum of Aviation at Robins Air Force Base - the 2nd largest Air Force museum in the nation. She leads all fundraising efforts and a staff of 44 team members in overseeing Science Technology Engineering and Math (S.T.E.M.) educational programs to more than 52K students and teachers annually in the National STEM Academy ™, coffee and gift shop retail operations, facility and event management services, special events management, marketing and public relations as well as information technology under a combined operating budget of more than \$4.4 Million annually.

Finally, she continues to serve as a part-time Public Affairs Officer in the U.S. Air Force Reserve after more than two decades wearing the uniform.

Prior to joining the museum, she was the Chief Operating Officer for the 21st Century Partnership. She has also worked for the Department of the Air Force as the Chief of Media Operations and the primary spokesperson for Robins Air Force Base.

She is a graduate of the University of Georgia Fanning Institute's Middle Georgia Regional Leadership Champions program, the Georgia Academy for Economic Development and the Robins Regional Chamber of Commerce's Leadership Robins Region program. She currently serves as an appointed member of the Air Force Materiel Command's (AFMC) Civic Leader Program, the Middle Georgia State University President's Advisory Council, the United Way's Mission United Leadership Council and is also an active board member of the FireStarter Fab lab.

Ms. Miner graduated with a Bachelor of Science degree in Business and Information Technology from Columbia College and earned a Master of Science degree in Management with a concentration in Public Affairs from the University of Maryland University College.



Mr. Daniel Rhoades, Chief Operations Officer 21st Century Partnership



Mr. Rhoades joined the Partnership as the Director of Strategy in August of 2017 and became the Chief Operations Officer in August 2018. Dan discovered the Middle Georgia area after having spent summers in Macon as a child, choosing this location to settle after he retired from the US Navy. He began his military career in the Army Reserve National Guard, transitioning to full time service with the U.S. Navy. He retired in 2006 with 24 years of service, most of them in the Intelligence community. He built his strategic portfolio at U.S. Space Command, U.S. Strategic Command and U.S. Transportation Command. He spent over two years in Iraq providing intelligence analysis to the Iraqi government and other U.S. Allies. During his time in

Iraq, and on his return, he worked with L3, SAIC and X-Technologies as a contractor. He then joined Air Force Reserve Command as a civil service employee working the 2005 BRAC. He participated in the founding of the Air Force Strategic Basing and Total Force programs.

As the Chief Operations Officer, Dan is responsible for development and execution of strategies and action plans to enable achievement of the Partnership's goals. The 21st Century Partnership is a Georgia nonprofit corporation and is the only enterprise dedicated solely to actively support the current missions of Robins Air Force Base and ensure that both the base and the Middle Georgia community are best postured to accept new base missions. The Partnership accomplishes these goals principally by working closely with national, regional and local leadership along with community organizations to positively influence those primary factors that will likely be considered under a future Base Realignment and Closure (BRAC) process. For more than 20 years, the Partnership has been a key participant in all large-scale Department of Defense decision-making of impact to Robins Air Force Base.

Item Attachment Documents:

- 7. Consent Agenda
 - a. Approval of Minutes April 16, 2019 Regular Business Meeting (staff-CC)
 - b. Approval of Minutes April 16, 2019 Executive Session (staff-CC)
 - c. Approval of Minutes April 26, 2019 Work Session (staff-CC)
 - d. Approval of 2019 Alcohol Licenses (staff-CC)
 - e. Approval of Resolution requesting Sales Tax Information from DOR and Naming a Designated Officer (staff-Finance)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.



117 Putnam Drive, Suite A ◊ Eatonton, GA 31024

Minutes Tuesday, April 16, 2019 ◊ 6:30 PM

<u>Putnam County Administration Building - Room 203</u>

The Putnam County Board of Commissioners met on Tuesday, April 16, 2019 at approximately 6:30 PM in the Putnam County Administration Building, 117 Putnam Drive, Room 203, Eatonton, Georgia

PRESENT

Chairman Billy Webster Commissioner Kelvin Irvin Commissioner Daniel Brown Commissioner Bill Sharp Commissioner Trevor Addison

STAFF PRESENT

County Attorney Adam Nelson County Manager Paul Van Haute Deputy County Manager Lisa Jackson County Clerk Lynn Butterworth

Opening

- 2. Invocation Dr. Velde Hardy from Mt. Pleasant Baptist Church gave the invocation.
- 3. Pledge of Allegiance (TA) Commissioner Addison led the Pledge of Allegiance.

- 4. Special Presentations
 - a. Presentation by Brianna Williams on Scouting

Ms. Brianna Williams, Oconee District Executive for Boy Scouts of America spoke on the scouting program in Putnam County. She reported there are four scouting units serving in Putnam County and they are in the process of forming a new girl's troop. She shared some of what they are doing and explained that volunteers are always welcome.

b. Proclamation for Child Abuse Prevention Month

A proclamation declaring April as Child Abuse Prevention month was presented to members of Mt. Pleasant Baptist Church.

(Copy of proclamation made a part of the minutes on minute book page _____.)

Zoning Public Hearing

5. Request by Charles McMichael to rezone 3.603 acres at 862 Pea Ridge Road from AG-1 to R-2 [Map 092, part of Parcel 025, District 2] (staff-P&D)

Chairman Webster opened the Zoning Public Hearing at approximately 6:41 p.m.

Mr. Clayborn McMichael spoke in support of this request. No one signed in to speak against this item. Planning & Development staff recommendation was for approval with the following conditions: (1) the remaining 5.197 acres must be combined with the adjacent parcel: Map 092, Parcel 023, the acreage cannot be used or sold as a standalone parcel (2) this rezoning shall be conditioned upon the resurveying and recordation of the plat as stated in Section 66-165 (e)(3) of the Putnam County Code of Ordinances.

Chairman Webster closed the Zoning Public Hearing at approximately 6:45 p.m.

Motion to approve the request by Charles McMichael to rezone 3.603 acres at 862 Pea Ridge Road from AG-1 to R-2 [Map 092, part of Parcel 025] with the following conditions: (1) the remaining 5.197 acres must be combined with the adjacent parcel: Map 092, Parcel 023, the acreage cannot be used or sold as a standalone parcel (2) this rezoning shall be conditioned upon the resurveying and recordation of the plat as stated in Section 66-165 (e)(3) of the Putnam County Code of Ordinances.

Motion made by Commissioner Brown, Seconded by Commissioner Addison. Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

Regular Business Meeting

6. Public Comments None

7. Approval of Agenda

Motion to approve the agenda.

Motion made by Commissioner Addison, Seconded by Commissioner Sharp.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

- 8. Consent Agenda
 - a. Approval of Minutes March 18, 2019 Called Meeting (staff-CC)
 - b. Approval of Minutes March 19, 2019 Regular Meeting and Executive Session (staff-CC)
 - c. Approval of Minutes April 12, 2019 Work Session (staff-CC)
 - d. Approval of Final Plat-Harmony Farms Subdivision (staff-P&D)

Commissioner Irvin asked to withdraw item b from the Consent Agenda.

Motion to approve Consent Agenda items a., c., and d. Motion made by Commissioner Addison, Seconded by Commissioner Irvin. Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

Motion to approve Consent Agenda item b.

Motion made by Commissioner Sharp, Seconded by Commissioner Addison. Voting Yea: Commissioner Brown, Commissioner Sharp, Commissioner Addison Voting Abstaining: Commissioner Irvin (he was not present at the March 19, 2019 meeting)

9. Approval of Appointment of Karen P. Owen as Associate Probate Judge (Probate Court) Judge Underkofler explained that she has decided to appoint Karen Owen as Associate Judge and it requires BOC approval. Ms. Karen Owen commented that she would love the opportunity to serve in this role.

Motion to approve the appointment of Karen Owen as Associate Probate Judge.

Motion made by Commissioner Addison, Seconded by Commissioner Irvin.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp,

Commissioner Addison

(Copy of documents made a part of the minutes on minute book pages _______ to ______.)

Chairman Webster called Mr. Wes Peters to speak on item 8d as he forgot earlier. Mr. Peters spoke in support of the Final Plat approval for Harmony Farms Subdivision.

10. 2020 Census Complete Count Committee Presentation and Approval of formula for committee appointments (BW)

Mr. Bob Landau, Chairman of the Complete Count Committee, thanked the board for making him chairman. He explained his proposal for filling the committee was to appoint six people recommended by the City Council and 15 people recommended by the Board of Commissioners, for a total of 21 committee members. This equals one committee member per 1000 citizens. He requested that the appointments be made at the May 3, 2019 BOC meeting and advised that he will call the first committee meeting shortly thereafter. He also explained the five phases of the census program: 1. education; 2. awareness; 3. motivation; 4. reminder; 5. recognition and distributed a handout. Mr. Landau also introduced Mr. Tyrone Smith, Recruiting Assistant for US Census Bureau. Mr. Smith informed the board that he is assigned to Putnam County and other counties in the area and he is here to let everyone know that the Census Bureau is hiring people from the community. The positions pay \$14.50 per hour and responsibilities will including going in neighborhoods and confirming addresses. They are looking for about 36 people fulltime and part-time.

Motion to approve the formula for Complete Count Committee appointments, presented by Mr. Bob Landau, of one committee member per 1000 citizens.

Motion made by Commissioner Addison, Seconded by Commissioner Irvin.

Motion amended by Commissioner Addison to include, specifically 21 members with 15 from the county and six from the city.

Amended motion seconded by Commissioner Sharp.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

11. Authorization for Chairman to sign Resolution to Revoke Consent to Amendment to the By-Laws of EPWSA (BW)

Chairman Webster explained that a resolution was passed by the county in 2010 to allow EPWSA to make changes to their bylaws without approval from the BOC. A similar resolution was needed from the city and one was never passed.

Motion to authorize the Chairman to sign the Resolution to Revoke Consent to Amendment to the By-Laws of EPWSA.

Motion made by Commissioner Addison, Seconded by Commissioner Irvin.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

(Copy of resolution made a part of the minutes on minute book page ______.)

12. Authorization to construct an Improved Landing Zone on the Administration Building property (staff-CM)

County Manager Van Haute advised that the field next to the Administration Building has been used several times for emergency helicopter landings. The rain keeps that area very damp, so he was requesting a 35x35 slab with a six-foot-wide walkway to be a designated site for air medivac use.

Motion to authorize construction of an Improved Landing Zone on Administration Building property not to exceed \$3000.

Motion made by Commissioner Sharp, Seconded by Commissioner Irvin.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

The board requested that the location be verified.

13. Authorization for Chairman to sign Resolution accepting Willow Forest Subdivision Roads (BW)

County Attorney Nelson explained that citizens had asked about the ownership of the roads in Willow Forest Subdivision. He advised that he reviewed records and it appears they are county roads and the resolution just clarifies that position.

Motion to authorize the Chairman to sign the Resolution accepting Willow Forest Subdivision Roads.

Motion made by Commissioner Addison, Seconded by Commissioner Irvin.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

(Copy of resolution made a part of the minutes on minute book page ______.)

Meeting recessed	l at a	pproxima	itely 8	3:02 1	p.m.

Meeting reconvened at approximately 8:12 p.m.

14. Appointment to the Putnam Development Authority (staff-CC)

Mr. John Wojtas was nominated for appointment to the Putnam Development Authority. Nomination made by Commissioner Sharp, Seconded by Commissioner Addison. Voting for Mr. Wojtas: Commissioner Irvin, Commissioner Brown, Commissioner Sharp,

Commissioner Addison

15. Appointment to the Lake Oconee Area Development Authority (staff-CC)

Mr. Michael Feldman was nominated for appointment to the Lake Oconee Area Development Authority.

Nomination made by Commissioner Brown, Seconded by Commissioner Irvin.

Voting for Mr. Feldman: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

16. Appointment to the Putnam County Department of Family & Children Services Board (staff-CC)

Ms. Lucille Feldman was nominated for appointment to the Putnam County Department of Family & Children Services Board.

Nomination made by Commissioner Irvin, Seconded by Commissioner Addison.

Voting for Ms. Feldman: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

17. Appointment to the Central Georgia Joint Development Authority (staff-CC)

Commissioner Bill Sharp was nominated for appointment to the Central Georgia Joint Development Authority.

Nomination made by Commissioner Addison, Seconded by Commissioner Irvin.

Voting for Commissioner Sharp: Commissioner Irvin, Commissioner Brown,

Commissioner Addison

Voting Abstaining: Commissioner Sharp

18. Confirmation of PDA appointments to the Central Georgia Joint Development Authority (staff-CC)

Motion to confirm the appointments of Patty Burns and Walt Rocker III to the Central Georgia Joint Development Authority

Motion made by Commissioner Sharp, Seconded by Commissioner Addison.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

19. Recommendation for Appointment to the Hospital Authority - Post 1 (staff-CC)

Motion to recommend Glenda Ridley, Nancy Chaklos, and David Owens for appointment to the Hospital Authority.

Motion made by Commissioner Addison, Seconded by Commissioner Irvin.

Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

Reports/Announcements

20. County Manager Report

County Manager Van Haute reported the following:

- paving has fallen behind and it's come to recent attention that Womack Paving is no longer part owner of the asphalt plant. He's trying to get a meeting with Womack to discuss the situation but can't get hold of them – we might have to call the bond
- our IT system has been actively hacked recently and we have upped security measures; we need to encourage lawmakers to put IT security under the same executive session privileges as real estate, legal, and personnel
- wellness program is working, our insurance renewal will reflect a 4.11% decrease
- Ask the FCC event will be here at the Administration Building on May 8
- he will not be attending the ACCG Annual Conference in Savannah, he is instead going to Stephanie's college graduation

21. County Attorney Report

County Attorney Nelson advised that an Executive Session is needed.

22. Commissioner Announcements

Commissioner Irvin: reported on the first courthouse landscape committee meeting-multiple types of grass is growing, will need to figure out which is best and get it the same all over-also need to verify the operation of the irrigation system.

Commissioner Brown: also reported on the landscape committee meeting-first step will be to establish good grass to build on.

Commissioner Sharp: invited everyone to Holy Week services this week at 1st Baptist Church at 12:00 followed by lunch at 12:30.

Commissioner Addison: reminded everyone about the Child Abuse Prevention proclamation and pinwheel ceremony tomorrow morning at 9:30 on the courthouse square.

Chairman Webster: none

Executive Session

23. Motion to enter closed session as allowed by O.C.G.A. 50-14-4, if necessary, for personnel, litigation or real estate

Motion to enter closed session as allowed by O.C.G.A. 50-14-4 for litigation & real estate purposes.

Motion made by Commissioner Addison, Seconded by Commissioner Sharp. Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

Meeting closed at approximately 8:37 p.m.

24. Motion to reopen meeting and execute affidavit concerning the subject matter of the closed portion of the meeting

Motion to reopen the meeting and execute the affidavit concerning the subject matter of the closed portion of the meeting.

Motion made by Commissioner Addison, Seconded by Commissioner Sharp. Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

(Copy of affidavit made a part of the minutes on minute book page ______.)

Meeting reopened at approximately 9:30 p.m.

25. Action, if any, resulting from closed session No action was taken.

Closing

26. Adjournment

Motion to adjourn the meeting. Motion made by Commissioner Sharp, Seconded by Commissioner Addison. Voting Yea: Commissioner Irvin, Commissioner Brown, Commissioner Sharp, Commissioner Addison

Meeting adjourned at approximately 9:31 p.m.

ATTEST:

Lynn Butterworth County Clerk Billy Webster Chairman



Office of the County Clerk
117 Putnam Drive, Suite A & Eatonton, GA 31024
706-485-5826 (main office) & 706-485-1877 (direct line) & 706-923-2345 (fax)
lbutterworth@putnamcountyga.us & www.putnamcountyga.us

The draft minutes of the April 16, 2019 Executive Session are available for Commissioner review in the Clerk's office.



117 Putnam Drive, Suite A ◊ Eatonton, GA 31024

Work Session Minutes Friday, April 26, 2019 ◊ 12:00 PM

<u>Savannah Marriott Riverfront – Mercer Room</u> <u>100 General McIntosh Boulevard</u> Savannah, GA 31401

The Putnam County Board of Commissioners met on Friday, April 26, 2019 at approximately 12:00 PM at the Savannah Marriott Riverfront, Mercer Room, 100 General McIntosh Boulevard, Savannah, Georgia

PRESENT

Chairman Billy Webster Commissioner Daniel Brown Commissioner Bill Sharp Commissioner Trevor Addison

ABSENT

Commissioner Kelvin Irvin

STAFF PRESENT

Deputy County Manager Lisa Jackson County Clerk Lynn Butterworth HR Director Cynthia Miller

Opening

1. Call to Order

Chairman Webster called the work session to order at approximately 12:02 p.m. He also led the Pledge of Allegiance.

(Copy of agenda made a part of the minutes on minute book page ______.)

Work Session

2. Employee Insurance Discussions

Chairman Webster introduced Mr. Johnathan Shaw of ShawHankins. Mr. Shaw commented on the recent merger with NFP, the sixth largest broker in the world, and explained that there will not be any changes to the people, offices or services, but will be more resources available. Lunch was served and during that time Mr. Shaw went over the employee insurance proposal booklet and answered questions. No action was taken.

(Copy of benefits renewal booklet made a part of the minutes on minute book pages	
to	

Closing

3. Adjournment

Motion to adjourn the work session.

Motion made by Commissioner Sharp, Seconded by Commissioner Addison.

Voting Yea: Commissioner Brown, Commissioner Sharp, Commissioner Addison.

Work Session adjourned at approximately 12:59 p.m.

ATTEST:

Lynn Butterworth County Clerk Billy Webster Chairman



Office of the County Clerk
117 Putnam Drive, Suite A & Eatonton, GA 31024
706-485-5826 (main office) & 706-485-1877 (direct line) & 706-923-2345 (fax)

lbutterworth@putnamcountyga.us & www.putnamcountyga.us

Approval of 2019 Alcohol Licenses

The following alcohol license applications (which are available for review in the County Clerk's office) have been approved by the Sheriff, Fire Marshal, Building Inspector, and Tax Commissioner and are ready for BOC approval:

Individual Name	Business Name	Address	License Type
Travis	44 Draft House	1122 Lake	Retail Consumption on Premises: Beer, Wine & Liquor
Williamson	Growler Bar	Oconee Parkway	
Travis	44 Draft House	1122 Lake	Permanent Caterer
Williamson	Growler Bar	Oconee Parkway	
Ashley Pruett	The Pizza Place	1133 Lake Oconee Parkway	Retail Consumption on Premises: Beer, Wine & Liquor



Putnam County Board of Commissioners Agenda Item Request Form

DATE OF MEETING REQUESTED: April 5, 2019
REQUEST BY: Linda Cook
AGENDA ITEM: Resolution requesting sales tax information from the
Georgia Department of Revenue
AGENDA ITEM TYPE: Presentation
*ACTION REQUESTED: Pass Resolution
SUPPORTING DOCUMENTATION PROVIDED: Yes No
BUDGET/FUNDING INFORMATION: \$50 to be charged to Finance Dept.
FACTS AND/OR ISSUES: Please see attached information which explains
the reason for the resolution.



Georgia Department of Revenue Policy Bulletin ADMIN-2019-02 Sales and Use Tax Information Available to Political Subdivision Designees

Purpose: The purpose of this Policy Bulletin is to clarify the process for political subdivisions to request and receive sales and use tax information in accordance with 2018 Senate Bill 371 ("SB 371"), which was signed into law on May 7, 2018 and became effective on July 1, 2018. Additionally, this Policy Bulletin addresses the confidentiality obligations which political subdivisions must comply with after receipt of any such information.

Issue Date: January 14, 2019.

Authority: O.C.G.A. §§ 48-2-1 and 48-2-15.

Scope: A Policy Bulletin is intended to provide guidance to the public and to Department personnel. It is a written statement issued to apply principles of law to a specific set of facts or a general category of taxpayers. A Policy Bulletin is the Department's position and is binding on agency personnel until superseded or modified by a change in statute, regulation, court decision, or subsequent Policy Bulletin.

Discussion:

1. SB 371 Summary

SB 371 allows counties, municipalities, and consolidated governments (collectively, "political subdivisions") in Georgia to: (1) request a report of vendors who filed a sales tax return with amounts attributable to the political subdivision for a designated period (the "Report"); and (2) after receiving the Report, the political subdivision may request that the Department validate that a taxpayer within the political subdivision is remitting sales tax to the appropriate political subdivision.

2. Sales and Use Tax Filer Report

Before the Department can provide the Report, the political subdivision must request the Report by sending an official resolution to <u>public.disclosure@dor.ga.gov</u>. The resolution must contain the contact information (name, address, phone number, and e-mail address) of a designated official, who must be a finance officer or taxing official of the political subdivision (the "Designee"). The resolution must also state a "designated period" of tax information the Designee wishes to receive, such designated period not to exceed one year. Please note that the Department is only able to include information of vendors for tax periods occurring after July 1, 2018, the effective date of SB 371. The Designee will be the only individual authorized to receive the Report from the Department.

Reports provided by the Department will include the sales tax certificate information for vendors who have reported sales tax attributable to the requesting political subdivision in the designated period. Please note that, due to statutory sales and use tax reporting requirements, the Department only has county-level information to provide to municipalities and consolidated governments.

Each political subdivision may make one Report request per year. The Department will charge a fee of \$50.00 to the requesting political subdivisions for providing each Report.

3. Validation of the Report

The initial Report provided to a Designee will list all vendors remitting any sales tax to the requesting political subdivision. After receiving the initial Report, the Designee of each political subdivision may request that the Department validate up to 10 vendors which are located within their political subdivision, whether or not such vendors appeared on the Report.

All validation requests must come from the Designee and contain the business name and location address of each vendor being validated. Additionally, if available, the validation request should include the taxpayer identification number, the reason the validation is being requested, and any other additional information the Designee wishes to include. Validation requests must be emailed to public.disclosure@dor.ga.gov.

Within 30 days of receipt of each validation request, the Department will provide the Designee with a response validating whether each vendor is reporting sales tax attributable to the proper county. For any vendors which the Department was unable to validate, the Department will take other appropriate action as provided by law. The Department will charge a fee of \$50.00 to the requesting political subdivision for providing the validation.

4. Confidentiality of Reports and Validation

Any information furnished pursuant to O.C.G.A. § 48-2-15(d.1) is strictly privileged and confidential. The political subdivision Designee may **NOT** contact any of the taxpayers identified in the confidential information.

It is unlawful for any person to divulge confidential tax information in violation of O.C.G.A. § 48-2-15(d.1). Any person who violates this law is subject to the same penalties that would apply to an employee of the Department of Revenue for the improper divulgence of confidential tax information.

FOR MORE INFORMATION

For more information on this subject, please email <u>public.disclosure@dor.ga.gov</u> or visit the Department's website at <u>dor.georgia.gov</u>.



RESOLUTION REQUESTING SALES TAX INFORMATION FROM THE GEORGIA DEPARTMENT OF REVENUE PURSUANT TO O.C.G.A. § 48-2-15(d.1) AND NAMING A DESIGNATED OFFICER FOR ALL RELATED PURPOSES

WHEREAS, Georgia Code (O.C.G.A.) § 48-2-15, as amended in 2018, authorizes the Commissioner of the Georgia Department of Revenue (hereinafter the "DOR Commissioner") to provide certain confidential sales tax information to the "designated finance officer or taxing official" of counties and other local governments; and

WHEREAS, more specifically, O.C.G.A. § 48-2-15(d.1) authorizes the DOR Commissioner to provide to a local government's designated officer, upon request, certain information relating to vendors that have submitted sales tax reports within the period of time set forth in that request; and

WHEREAS, O.C.G.A. § 48-2-15(d.1) further allows the local government's designated officer to request that the DOR Commissioner validate, from time to time, the political subdivision to which sales taxes are being remitted by taxpayers with a business location within that local government's boundaries; and

WHEREAS, Putnam County desires to obtain the sales tax information described in the above Georgia Code Section;

NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners of Putnam County, as follows:

1. The Board of Commissioners hereby designates the following finance or tax official as Putnam County's Designated Officer for all purposes described in O.C.G.A. § 48-2-15(d.1):

Linda Cook 117 Putnam Drive, Suite A Eatonton, GA 31024 lcook@putnamcountyga.us 706-485-1879

2. The Board of Commissioners hereby requests that the DOR Commissioner (or his/her designee) furnish to the above-named Designated Officer all vendor sales tax information described in O.C.G.A. § 48-2-15(d.1)(1) for Putnam County for the following time period: 7/1/18 to 4/30/19.

- 3. In accordance with O.C.G.A. § 48-2-15(d.1)(2)(B) and following receipt of the information described in Paragraph 2, above, the Designated Officer is hereby authorized to request validation by the DOR Commissioner of the political subdivision to which one or more vendors/taxpayers with a business location in Putnam County have remitted sales taxes for the designated period, with such validation request to contain the business name and location address of each such vendor/taxpayer and such other information as may assist the DOR Commissioner in responding to such validation request;
- 4. The Designated Officer shall use such information only in the discharge of his/her duties and shall maintain the confidentiality of such information as required by O.C.G.A. § 48-2-15(d.1); and
- 5. The Board of Commissioners shall comply with all confidentiality requirements of O.C.G.A. § 48-2-15(d.1), including, but not limited to, the requirements that 1) such information may only be discussed by members of the Board of Commissioners in executive session and 2) members of the Board of Commissioners shall recuse themselves from such executive session discussions in the event of a conflict of interest as described in the above Georgia Code Section.

BE IT FURTHER RESOLVED, that this Resolution shall become effective upon its approval by the Putnam County Board of Commissioners, and the official named above shall remain Putnam County's Designated Officer for all purposes under O.C.G.A. § 48-2-15(d.1) until further action of the Board of Commissioners.

BE IT FURTHER RESOLVED, that the Putnam County Clerk is hereby directed to provide a certified copy of this Resolution to the Georgia Department of Revenue via email (public.disclosure@dor.ga.gov) or to otherwise transmit a copy of this Resolution as may be directed by the Georgia Department of Revenue.

PASSED AND RESOLVED this 3rd day of May 2019.

PUTNAM COUNTY BOARD OF COMMISSIONERS

By:	Billy Webster, Chairman
ATTEST:	Lynn Butterworth, County Clerk

[Affix Seal]

8. Approval of 2019 Budget Amendment #1 (staff-Finance)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.

	Increase	
General Fund Revenues:	(Decrease) to Current Budget	Total
Interest & Miscellaneous:		
Interest Earned	40,000	
Reimb - Damaged Property	45,425	
Miscellaneous Revenue	31,075	
Donations	9,252	
Total Interest & Miscellaneous	125,752	
Transfer from Other Funds	12,000	
Appropriation from Fund Balance	199,124	
Total General Fund Revenue Adjustment		336,876
General Fund Expenses:		
District Commissioners	12,265	
General Administration	283,994	
Magistrate Court	13,280	
Sheriff and Jail Operations	12,000	
Fire Stations & Rescue	250	
Recreation	4,002	
Planning & Development	6,085	
Putnam Development Authority	5,000	
Total General Fund Expenditure Adjustment		336,876
Special Service District Revenues:		
Transfer from Other Funds		314,124
LMIG Fund:		
Revenues		528,955
Expenditures		528,955

9. Approval of 2020 Budget and 2019 Mill Rate Schedule (staff-Finance)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.

2020 Budget & 2019 Mill Rate Schedule (Fiscal Year Oct. 2019 - Sept. 2020)

May June July

S	М	Т	W	Т	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	<mark>15</mark>	16	17	18
19	20	21	22	23	<mark>24</mark>	25
26	27	28	29	30	31	

S	М	Т	W	Т	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	<mark>24</mark>	25	26	27	28	29
30						

S	M	Т	w	Т	F	s
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August

S	М	Т	W	Т	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	<mark>30</mark>	31

			_			
S	M	Т	W	Т	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

September

Meetings dates are in green, other major dates are in yellow

- May 15 Assessment notices mailed by Tax Assessor's Office
- May 24 Distribute budget packages
- June 24- Budget packages due to the Finance Department
- July 1 Estimated last day to appeal assessments (45 days after estimated mailing date)
- July 5 Preliminary digest available
- July 9 Budget requests submitted to the Board of Commissioners
- July 11 Advertise all budget work sessions
- July 19 First budget work session
- July 22 First budget work session continued and guidance to County Manager on proposed budget
- July 31 Proposed budget submitted to the Board of Commissioners
- August 1 Advertise proposed budget, public hearing on budget, meeting to adopt budget, and Advertise First mill rate public hearing
- August 8 Advertise second mill rate public hearing
- August 9 Second budget work session (for comments from departments on proposed budget) and First mill rate public hearing
- August 20 Public Hearing on budget (with regular meeting) and Second mill rate public hearing
- August 22 Advertise final public hearing on mill rate, 5 Year History of Mill Rate, and meeting to adopt budget
- August 30 Adopt budget

September 6 – Final (third) public hearing on mill rate

Adopt mill rate in regular meeting

10. Appointments to the 2020 Census Complete Count Committee (staff-CC)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.

				APPLICATION
NAME	ADDRESS	DISTRICT	BACKGROUND	DATE
	100 Barrington Hall		Retired Military Officer;	
Walter Hatcher	Drive	3	College grad	4/12/2019
			Retired Healthcare	
			Management; BS-	
			Geography & Education, BS-	
			Environmental Health,	
	116 Rock Springs		Masters-Health Science; 9	
David J. Owens	Road	3	years in Public Health	4/15/2019
			Retired; BS-Clemson; MS-	
Charles Pate	88 Whitney Street	3	UGA	4/15/2019
			Retired; High School; Some	
	144 Rock Springs		College; 22 years Putnam	
Donnald Cottrell	Road	3	Board of Assessors	4/17/2019
			Retired; Northside HS-	
			Atlanta; 1 year University	
	101 S. Bay Road		of Tennessee; Certified	
Gail Farmer	#1004	3	Employee Benefits Specialist	4/18/2019
			Retired Military (USAF); MS-	
			Industrial Mgmt, BS-	
			Accounting; worked with	
John T. Mitchell Sr.	195 Lakeshore Drive	4	P&D	4/24/2019
	267 Possum Point			
Tammy Lankford	Drive	4	Real Estate Broker	4/30/2019
			Retired; High School, 2	
			years College; served on	
			Hospital Authority, Board of	
	249 Carter Dearman		Tax Assessors, former	
Larry G. Manley	Road	2	County Surveyor	5/2/2019
City Amazainta				
City Appointees:	205 Davidousana Datas	\\/ a.g 1 1		
Janelle Reid	305 Parkway Drive	Ward 1		
Leila Williams	101 Redbud Drive	Ward 2		
Janie Reid	103 Beech Avenue	Ward 3		
Melissa Williams	209 Tecumseh Avenue			
Lynsol Terrell	100 Candler Court	Ward 4		
Eugene Hubert	405 Church Street	Ward 4		



117 Putnam Drive, Suite A ◊ Eatonton, GA 31024 706-485-5826 www.putnamcountyga.us

NOTICE

The Putnam County Board of Commissioners is seeking individuals interested in serving on the **2020 Census Complete Count Committee**. To be eligible to serve on the committee, individuals must be residents of Putnam County.

The Complete Count Committee plans and implements locally-based outreach campaigns that raise awareness of the census and encourage participation. Members of the committee serve without compensation.

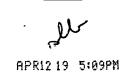
Interested persons should submit an <u>application</u> to the Putnam County Board of Commissioners, 117 Putnam Drive, Suite A, Eatonton, Georgia 31024. Applications will be accepted until the positions are filled. The board application form can be found on the county website at <u>www.putnamcountyga.us</u> (in the "How Do I?" section) or by calling 706-485-5826.

04/04/2019 & 04/11/2019

30

PUTNAM COUNTY BOARD OF COMMISSIONERS





117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: WALTER HATCHER HO	ome Phone:(706) 485-9816
Address: 100 BARRINGTON HALL DR W	ork Phone:
· •	ell Phon
Occupation: Retired Military OFFICER E-	-mail:
I would like to apply for appointment to the following Boar 2020 Census Complete Count Committee	rd, Committee, or Authority:
Which district do you live in? 1 2	√ 3
Briefly explain your educational backgroundCollege	Grad
Are you an owner or officer in any business or corporation?	
If yes, please list the name and activity of the business or co	orporation:
Please explain any previous experience with State or Local	Government: NONE
Briefly explain why you seek this appointment: To be	se helpful to our Local
33.17	
If appointed, I agree to serve.	
X hat the	11 19- 19
Signature	Application Date

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.



APR15 19 11:46AM

117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: David J. Owens	Home Phone: 706 - 484 - 5193
Address: 116 Rock Springs Rd	Work Phone:
Egtonton, Ga. 39024	Cell Pho
Occupation: <u>Retired Healthcare Management</u>	E-mail:
I would like to apply for appointment to the following E 2020 Census Complete Count Committee	Board, Committee, or Authority:
Which district do you live in? 1 2	√ 3
Briefly explain your educational background BS Sec Health (Bothauga) Masters - Health	rgraphy + Edgcation; BS. Environmenta th Science (Admin) (Med. Uning SC.)
Are you an owner or officer in any business or corporat	ion? Yes No
If yes, please list the name and activity of the business or corporation:	
Please explain any previous experience with State or Lo Health in Charleston S.C.; Operation	e for 3 county Authority Hospitals
Briefly explain why you seek this appointment: Sering hospital succeed. Use my educate economic success of my county.	re my community and help my local ion and experience to help the
If appointed, I agree to serve. Signature	Application Date

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEÊS, & AUTHORITIES

Name: Charles Pate	Home Phone:	
Address: 88 Whitney Street	Work Phone:	
Eatonton, GA 31024	Cell Phone	
Occupation: Retired	E-mail:	
		~
I would like to apply for appointment to the followin 2020 Census Complete Count Committee	g Board, Committee, or Authority:	
Which district do you live in?1	34	
Briefly explain your educational background	S. Clenson Univer	sity
M,:	s. University of	Georgia
Are you an owner or officer in any business or corpo	, 	No No
If yes, please list the name and activity of the business	ss or corporation:	-
Please explain any previous experience with State or	Local Government:	
Briefly explain why you seek this appointment: to help Putnan County and Federal Funds due	get their fair sha	get involved
of residents in our cou	inty.	NUMBER
If appointed Lagree to serve.	4-//- Application Date	19
Signature	Application Date	

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: Donald Cottrell 144 Rock Springs Rd Eatonton, GA 31024 Occupation: ReTired	Home Phone: 706 485 3928 Work Phone:
Occupation: Kelirea	E-mail:
I would like to apply for appointment to the following the second	owing Board, Committee, or Authority:
Which district do you live in?	2 3 4
Briefly explain your educational background _	High School + some
Are you an owner or officer in any business or c	corporation? Yes No
If yes, please list the name and activity of the bu	siness or corporation:
Please explain any previous experience with Sta PuTnam Board of	te or Local Government: 22 years Assessors
Briefly explain why you seek this appointment: + 2010 and for Th The experence	I served both 2000 e Most part enjoyed
If appointed, I agree to serve. Signature Ouvell	

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





APR18 19 3:01PM

117 Putnam Drive, Suite A ◊ Eatonton, GA 31024 706-485-5826 ◊ 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: GAIL FARMER Address: 101 5. BAY RD #1004 EATONTON, GA 31024 Occupation: RETIRED	Home Phone: <u>239 - 560 - 3543</u> Work Phone: —— Cell Ph E-mail:
I would like to apply for appointment to the following E 2020 Census Complete Count Committee	Board, Committee, or Authority:
Which district do you live in? 1 2 Briefly explain your educational background NORTH / YR. UNIVESTRY OF TENNESSEE Are you an owner or officer in any business or corporat If yes, please list the name and activity of the business of	ب ب
Please explain any previous experience with State or Lo	ocal Government: Nowe.
Briefly explain why you seek this appointment: I have census.	ope to be able to help with
If appointed, I agree to serve. Signature	Application Date

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





117 Putnam Drive, Suite A ♦ Eatonton, GA 31024 706-485-5826 ♦ 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: John T. Mitchell Sr.	Home Phone: 706 816 7090	
Address: 195 Lakeshore Drive	Work Phone:	
Eatonton GA	Cell Phc	
Occupation: Retired Military (USAF)	E-mail:	
I would like to apply for appointment to the following E 2020 Census Complete Count Committee	loard, Committee, or Authority:	
Which district do you live in? 1 2	3 4 4	
Briefly explain your educational background MS Industrial Management, FIT; BS Accounting FSU		
Are you an owner or officer in any business or corporation? Yes 4 No If yes, please list the name and activity of the business or corporation:		
Please explain any previous experience with State or Local Government: Worked multiple times with Putnam Planning and Development		
Briefly explain why you seek this appointment: To ensuin 2020 US Census	re maximum Putnam residents participation	
Mappointed, Lagree to serve. Signature	4/24/19 Application Date	

*This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: Tammy Lankford	Home Phone: 478-456-5161	
Address: 267 Possum Point Drive	Work Phone: 706-485-9668	
Eatonton, GA 31024	Cell Pho	
Occupation: real estate broker	E-mail:	
I would like to apply for appointment to the following census committee	g Board, Committee, or Authority:	
Which district do you live in? 1	□ 3 ✓4	
Briefly explain your educational background Owned	and run real estate business since 1995, back	
in marketing as well both radio and print		
Are you an owner or officer in any business or corporation? ✓ Yes No If yes, please list the name and activity of the business or corporation: Lane Realty		
Please explain any previous experience with State or Local Government: none		
Briefly explain why you seek this appointment:said yes, when asked by my commissioner		
Salu yes, when asked by my commissioner		
If appointed, I agree to serve.		
tammy l lankford dottoop verified 04/24/19 5:30 PM EDT BKY-7WUE-MNM6-QAYA	4/24/19	
Signature	Application Date	

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.

PUTNAM COUNTY BOARD OF COMMISSIONERS



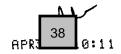


117 Putnam Drive, Suite A & Eatonton, GA 31024 706-485-5826 & 706-923-2345 fax www.putnamcountyga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: <u>LARRY G. MANLEY</u> Home Phone: <u>706 473-0967</u>
Name: LARRY G. MANLEY Home Phone: 706 473-0967 Address: 249 Carter Dearman R. Work Phone: " " "
Eatonton, CiA, 31024 Cell Phone: " "
Occupation: Rofined E-mail: No Emay (
I would like to apply for appointment to the following Board, Committee, or Authority: 2020 Census Complete Count Committee
Which district do you live in? $\boxed{}$ 1 $\boxed{}$ 2 $\boxed{}$ 3
Briefly explain your educational background High School + 2 415 college
Are you an owner or officer in any business or corporation? Yes No If yes, please list the name and activity of the business or corporation: Hospital Authority, Search of Tax Assesors, Co. Surveyor. Please explain any previous experience with State or Local Government:
Briefly explain why you seek this appointment: To help get everyone counted
If appointed, I agree to serve.
Signature Signature 5-2-19 Application Date

^{*}This application should be submitted to the Putnam County Board of Commissioners. Any additional information may be included on a separate page.





City of Eatonton.

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgia 31024 www.eatontonga.us



WALTER C. ROCKER, JR. - MAYOR

MARIA S. JIMÈNEZ - CITY CLERK

GARY M. SANDERS - CITY ADMINISTRATOR

TELEPHONE: MAYOR'S OFFICE - (706) 485-9240 CLERK'S OFFICE - (706) 485-3311 FACSIMILE: (706) 485-7912

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Name: Janelle Reid	Home Phone: 106-473 - 7300
Address: 305 Parking Drive	Work Phone:
Faturdon Cz. 31024	Cell Phone:
Occupation: Police County DFCS	E-mail:
I would like to apply for appointment to the following E	<i>1</i>
Which City Ward do you live in?	□ 2 □ 3 □ 4
Briefly explain your educational background	School Graduates CGIC 2000
17. Years employment & Petram (country DFCS
Are you an owner or officer in any business or corporat	ion? 🗆 Yes 📆 No
If yes, please list the name and activity of the business	or corporation:
	11 1 11 1 11 1
Please explain any previous experience with State or L	ocal Government: Not directly in volve
Or Opponence but I have	withted on several compaigns we
In very invested in local of	forecament.
Briefly explain Why you seek this appointment:	Ha Nilhall & Jal
	The first hand knowledge
& Done 11 whats relain in	1
	his conning to resp in
to be status as citizens. So the community and it he	
To be chattagra citizes. So	I that this is important

*This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 3 1024. Any additional information may be included on a separate page.



APR30 19 10:11F



City of Eatonton

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgia 31024 www.eatontonga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES

Home Phone: 706-485-8496

TELEPHONE:

MAYOR'S OFFICE - (706) 485-9240 CLERK'S OFFICE - (706) 485-3311

> **FACSIMILE:** (706) 485-7912

WALTER C. ROCKER, JR. - MAYOR

MARIA S. JIMÈNEZ – CITY CLERK

If appointed, I agree to serve.

GARY M. SANDERS – CITY ADMINISTRATOR

ela Williams

Address:	Work Phone):	
	Cell Phone:		
Occupation: Rotifod	E-mail:		
I would like to apply for appointment to the fo	llowing Board, Commi		ty:
Complete Census C	aunt Comm	ittee	
Which City Ward do you live in?	12/2	a 3	- 4
Briefly explain your educational background High School Gradueta			
Are you an owner or officer in any business or	corporation?	□ Yes	₽-No
If yes, please list the name and activity of the b	business or corporation		
Please explain any previous experience with S W. H. Eu ton ton Police Dep	itate or Local Governm	ent: <u>30+</u> 4	eurs emplyment
Printly avalois why you coals this appointment			

*This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 31024. Any additional information may be included on a separate page.



Signature

City of Eatonton

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgia 31024 www.eatontonga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES



WALTER C. ROCKER, JR. - MAYOR

MARIA S. JIMÈNEZ - CITY CLERK

GARY M. SANDERS - CITY ADMINISTRATOR

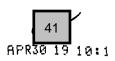
TELEPHONE: MAYOR'S OFFICE -- (706) 485-9240 CLERK'S OFFICE -- (706) 485-3311 FACSIMILE:

(706) 485-7912

Name: B. Reid	Home Phone:
Address: 103 Beech Avenue	Work Phone:
Eatouton Ga. 3/024	Cell Ph
Occupation: Middle Georgia Ore Stop Operator.	E-mail
I would like to apply for appointment to the following E	Board, Committee, or Authority:
Census Complete Court Con	mittee
Which City Ward do you live in?	o 2 p 3 o 4
Briefly explain your educational background 60	
Certified leadership Management	Specia list
, , , , , ,	
Are you an owner or officer in any business or corporat	ion?
If yes, please list the name and activity of the business of	or corporation:
RZ Management Consulting 1.LC	· · · · · · · · · · · · · · · · · · ·
Ų	^
Please explain any previous experience with State or Le	ocal Government: 12 Jeurs as a Putram
County Commissioner in 2th year	as Entorion City Council Member
Briefly explain why you seek this appointment: As a	
and as an elected applical I am	concerned that is our afficers
are not adequitely counted	during this cease Here we would
102 duline that could do some	for The Community. I Do
want to be able to help Entertain	
If appointed, I agree to serve.	

Application Date

^{*}This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 31024. Any additional information may be included on a separate page.





City of Eatonton

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgia 31024 www.eatontonga.us



WALTER C. ROCKER, JR. - MAYOR

MARIA S. JIMÈNEZ - CITY CLERK

GARY M. SANDERS - CITY ADMINISTRATOR

TELEPHONE: MAYOR'S OFFICE - (706) 485-9240 CLERK'S OFFICE - (706) 485-3311 FACSIMILE: (706) 485-7912

APPLICATION FOR BOARD	S, COMMITTEES, & AUTHORITIES
Name: Melissa Williams	Home Phone: 706-473-8366
Address: 209 Tecumsen Ave.	Work Phone: 706 991-5444
Ealulus Cra 31024	Cell Phone:
Occupation: Peace Ful purpose Hospio QF GA	E-mail:
I would like to apply for appointment to the following Be	_
Which City Ward do you live in?	□ 2 □ 3 □ 3 4
Briefly explain your educational background PCH	S Graduate OF 1989
4 Maketny Wass For to	sing unline and CNA
Are you an owner or officer in any business or corporation	on? 🗆 Yes 👨 🕶 🗸
If yes, please list the name and activity of the business or	corporation:
Please explain any previous experience with State or Loc	al Government: Tiust
According becane a ment	
Manstreet. I have enjuged	
Briefly explain why you seek this appointment:	am interested
in bling a part of th	of Connecty tion are
Chy. It is a gud ne	
to be apat of all	that is going an in the
C. M	5 5
If appointed, I agree to serve.	
Milina Wh	4.24-19
Signature	Application Date

^{*}This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 31024. Any additional information may be included on a separate page.





City of Eatonton

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgía 31024 www.eatontonga.us

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES



TELEPHONE:

MAYOR'S OFFICE - (706) 485-9240 CLERK'S OFFICE - (706) 485-3311

FACSIMILE:

(706) 485-7912

WALTER C. ROCKER, JR. - MAYOR

MARIA S. JIMÈNEZ - CITY CLERK

If appointed, I agree to serve.

GARY M. SANDERS - CITY ADMINISTRATOR

Name: Lynsol J-gith 1817911	Home Phone:
Address: 100 Candler Court	Work Phone:
Eutonfon GA 31024	Cell Ph
Occupation:	E-mail:
I would like to apply for appointment to the follow Census Commu He	ring Board, Committee, or Authority:
Which City Ward do you live in?	02 03
Briefly explain your educational background As	ssociate in Science/General Studies
Are you an owner or officer in any business or con If yes, please list the name and activity of the busin	
genis	or Local Government: Putnam County School System
Ifalize That State and local	I seek this appointment to help importance of the Census. I funds are often clists, buted advocating for funding. I also have

*This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 31024. Any additional information may be included on a separate page.





MARIA S. JIMÈNEZ – CITY CLERK

City of Eatonton

201 N. Jefferson Ave. P.O. Box 3820 Eatonton, Georgía 31024 www.eatontonga.us



TELEPHONE:

MAYOR'S OFFICE - (706) 485-9240

CLERK'S OFFICE - (706) 485-3311

FACSIMILE: (706) 485-7912

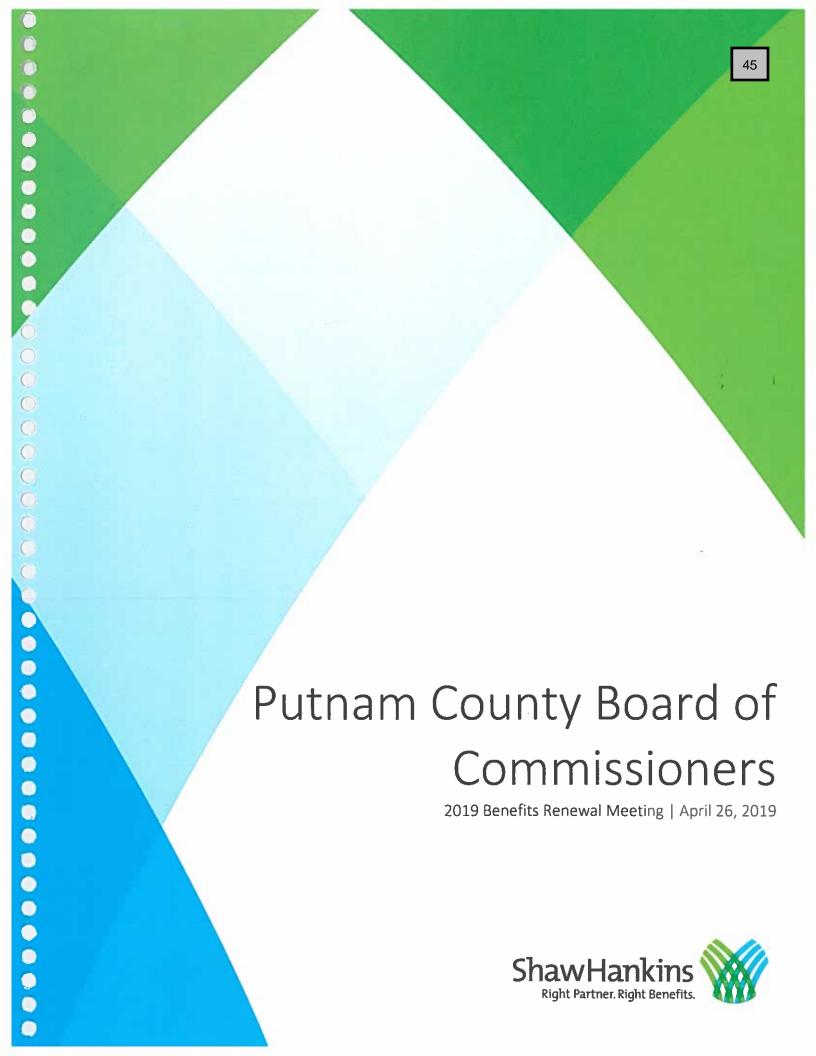
GARY M. SANDERS - CITY ADMINISTRATOR

APPLICATION FOR BOARDS, COMMITTEES, & AUTHORITIES Home Phone: Work Phone: Cell Phone: E-mail: Occupation: I would like to apply for appointment to the following Board, Committee, or Authority: Which City Ward do you live in? □ 2 **a** 3 **a** 4 Briefly explain your educational background _ Are you an owner or officer in any business or corporation? □ Yes □ No If yes, please list the name and activity of the business or corporation: Towny & Wrecker Service Please explain any previous experience with State or Local Government: Briefly explain why you seek this appointment: If appointed, I agree to serve

^{*}This application should be submitted to the City of Eatonton, 201 N. Jefferson Avenue | P.O. Box 3820, Eatonton, GA 31024. Any additional information may be included on a separate page.

11. Approval of 2019-2020 Employee Insurance Benefits (staff-CM)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.



Renewal and Marketing Analysis

July 1, 2019



Renewal and Marketing Analysis

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Texas Life Renewal	100000000



July 1, 2019

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Carrier Marketing Survey					
Medical Carriers	Status	% Change from Curren			
Aetna	Quoted Fully Insured	-0.7%			
Aetna (Meritain)	Declined to Quote - Uncompetitive	N/A			
Anthem Blue Cross Blue Shield	Current - Renewal Received	-4.1%			
Anthem Blue Cross Blue Shield	Quoted	+178.5%			
Cigna	Declined to Quate - Uncompetitive	N/A			
Humana	Declined to Quote - Network	N/A			
United Healthcare	Quoted	+9.6%			
Dental Carriers	Status	% Change from Curren			
Aetna	Quoted	-5.1%			
Anthem Blue Cross Blue Shield	Current - Renewal Received	+5.6%			
Guardian	Quoted	-1.5%			
Lincoln	Quoted	-5.8%			
MetLife	Quoted	+0.0%			
Principal	Quoted	-19.2%			
United Concordia	Quoted	-6.3%			
United Healthcare	Quoted but Uncompetitive	+3.5%			
ision Carriers	Status	% Change from Curren			
EyeMed	Current Carrier (Renews 2020)	N/A			
ife and Disabilty Carriers	Status	% Change from Curren			
Anthem Blue Cross Blue Shield	Current Life Carrier (Renews 2020)	N/A			
OneAmerica	Current Disability Carrier (Renews 2020)	N/A			
Vorksite	Status	% Change from Curren			
AFLAC	Current Accident, Critical Illness, and Hospital Indemnity Carrier (Renews 2021)	N/A			
Texas Life	Current Universal Life Carrier				



Medical Renewal Analysis July 1, 2019

			Anthe	m BCBS	Anthem BCBS		
			Current		Renewal		
The state of the s			Low Plan	High Plan	Low Plan	High Plan	
Plan Name			NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAPS 3.5K/30	OAP12 2.5K/30 7.9K C	OAP5 3.5K/30 7.9K AE	
Provider Network			OAPOS	OAPOS	Open Access POS	Open Access POS	
n Network Benefits							
Office Visits (PCP/Specialist)			\$30 / \$60	\$25 / \$50	\$30 / \$60	\$30 / \$60	
Deductible	Si	ngle	\$2,500	\$3,500	\$2,500	\$3,500	
	Fa	mily	\$7,500	\$10,500	\$7,500	\$10,500	
Coinsurance (Plan/Member)			70% / 30%	70% / 30%	70% / 30%	70% / 30%	
Out-of-Pocket Maximum	Si	ngle	\$7,150	\$7,150	\$7,900	\$7,900	
	Fa	mily	\$14,300	\$14,300	\$15,800	\$15,800	
lospital and Emergency							
Inpatient Hospital			\$500 then Ded & Coinsurance	Deductible & Coinsurance	\$500 then Ded & Coinsurance**	Deductible & Coinsurance	
Outpatient Hospital			Deductible & Coinsurance*	Deductible & Coinsurance*	Deductible & Coinsurance***	Deductible & Coinsurance	
Jrgent Care			\$60	\$60	\$75	\$75	
Emergency Room			\$150 then Coinsurance	\$150 then Coinsurance	\$350	\$350	
rescription Drugs							
tx Deductible			None	None	None	None	
ier 1 (Preferred Value/Generic)			\$15	\$15	\$15	\$15	
ier 2 (Preferred Brand)			N/A	\$35	100% Coinsurance	\$35	
ier 3 (Nonpreferred)			N/A	\$60	100% Coinsurance	\$60	
ier 4 (Preferred Specialty)			N/A	30% up to \$300 per Rx	100% Coinsurance	25% to \$350	
ier S (Nonpreferred Specialty)			N/A	N/A	N/A	N/A	
Out of Network Benefits							
Deductible (Single/Family)			\$7,500 / \$22,500	\$10,500 / \$31,500	\$7,500 / \$22,500	\$10,500 / \$31,500	
Out of Pocket Maximum (Single/Fam	ily)		\$21,450 / \$42,900	\$21,450 / \$42,900	\$23,700 / \$47,400	\$23,700 / \$47,400	
oinsurance (Plan/Member)			50% / 50%	50% / 50%	50% / 50%	50% / 50%	
ates by Plan	Low	High	Current	Current	Low Plan	High Plan	
mployee	34	53	\$527.23	\$631.38	\$516.26	\$595.38	
mployee + Spouse	6	9	\$1,107.20	\$1,325 92	\$1,084.16	\$1,250.31	
mployee + Child(ren)	8	6	\$1,028.11	\$1,231,21	\$1,006.71	\$1,161.00	
amily	18	13	\$1,608.08	\$1,925.74	\$1,574.60	\$1,815.92	
Monthly Premium by Plan			\$61,739	\$77,818	\$60,454	\$73,381	
Annual Premium by Plan			\$740,872	\$933,820	\$725,451	\$880,571	
			Cu	rrent	Rene	wal	
Combined Annual Plan Totals			\$1,67	74,692	\$1,606	,022	
Combined Annual Cost Difference (\$)					(\$68,	570)	
Combined Annual Cost Difference (%	1			• 1	-4.1	%	



^{*}in a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

^{**} Deductible applies to doctor and other services, not to facility fees.

^{***} In a hospital setting; Outpatient surgery is \$150 then 0% coinsurance and no deductible at a freestanding surgical center.

Medical Marketing Analysis - Aetna July 1, 2019

			Anthe	m BCBS	Aet	na	
			Current		Proposed		
		0.0	Low Plan	High Plan	Low Plan	High Plan	
Plan Name			NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAP5 3.5K/30	OAMC \$2500 100/70% SJ RX 6	OAMC \$3500 80/60% RX 2	
Provider Network			OAPOS	OAPOS	OAMC	DAMC	
n Network Benefits							
Office Visits (PCP/Specialist)			\$30 / \$60	\$25 / \$50	\$20 No Ded / \$40 after Ded	\$30 / \$60	
Deductible	Si	ngle	\$2,500	\$3,500	\$2,500	\$3,500	
	Fa	mily	\$7,500	\$10,500	\$5,000	\$7,000	
Coinsurance (Plan/Member)			70% / 30%	70% / 30%	100% / 0%	80% / 20%	
Out-of-Pocket Maximum	Si	ngle	\$7,150	\$7,150	\$6,850	\$6,850	
	Fa	mily	\$14,300	\$14,300	\$13,700	\$13,700	
lospital and Emergency							
npatient Hospital			\$500 then Ded & Coins	Deductible & Coinsurance	\$500 after Deductible	Deductible & Coinsurance	
Outpatient Hospital			\$150 Freestanding*	\$150 Freestanding*	\$250 after Deductible	Deductible & Coinsurance	
Jrgent Care			\$60	\$60	\$75 after Deductible	\$75	
mergency Room			\$150 then Coinsurance	\$150 then Coinsurance	\$500	\$250 then Coinsurance	
rescription Drugs							
x Deductible			None	None	Subject to Medical Deductible	None	
Tier 1 (Preferred Value/Generic)			\$15	\$15	\$3 after Ded / \$15 after Ded	\$3 / \$15	
Tier 2 (Preferred Brand)			N/A	\$35	\$35 after Deductible	\$35	
Ger 3 (Nonpreferred)			N/A	\$60	S65 after Deductible	\$65	
Ter 4 (Preferred Specialty)			N/A	30% up to \$300 per Rx	20% up to \$250 after Deductible	20% up to \$250	
Tier 5 (Nonpreferred Specialty)			N/A	N/A	20% up to \$500 after Deductible	20% up to \$500	
Out of Network Benefits					apropries propries	2010 (1) 10 3300	
Deductible (Single/Family)			\$7,500 / \$22,500	\$10,500 / \$31,500	\$10,000 / \$20,000	\$6,000 / \$12,000	
Out of Pocket Maximum (Single/Fam	Hel		\$21,450 / \$42,900	\$21,450 / \$42,900	\$20,000 / \$40,000	\$16,000 / \$32,000	
Coinsurance (Plan/Member)			50% / 50%	50% / 50%	70% / 30%	60% / 40%	
lates by Plan	Low	High	Current	Current	Low Plan	High Plan	
mployee	34	53	\$527.23	S631.38	\$538.47	S612.79	
imployee + Spause	6	9	\$1,107.20	\$1,325.92	\$1,130.81	\$1,286.87	
		6	\$1,028.11	\$1,325.92	\$1,150.01	\$1,286.87	
Employee + Child(ren)	8	_	\$1,608.08				
amily	18	13		\$1,925.74	\$1,642.37	\$1,869.03	
Monthly Premium by Plan			\$61,739	\$77,818	\$63,056	\$75,527	
innual Premium by Plan	_		\$740,872	\$933,820	\$756,670	\$906,321	
			Current		Proposed		
Combined Annual Plan Totals			\$1,67	4,692	\$1,662		
	bined Annual Cost Difference (\$)			(\$11,700)			
Combined Annual Cost Difference (%)	-		•	-0,7	%	



This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms and conditions.

^{*}In a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

Aetna quote includes MBR guarantee, \$5,000 wellness allowance, and onsite biometric screening. 2% discount available if medical is sold with dental.

Medical Marketing Analysis - United Healthcare July 1, 2019

		Anthem BCBS Current		United Healthcare Proposed		
		Low Plan	High Plan	Low Plan Alternate	High Plan	
Plan Name		NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAP5 3.5K/30	Choice Plus Direct BN7X Mod Rx 793	Choice Plus Direct BN73 Mod Rx 2	
Provider Network		OAPOS	OAPOS	Choice Plus	Choice Plus	
In Network Benefits						
Office Visits (PCP/Specialist)		\$30 / \$60	\$25 / \$50	\$30 / \$60	\$25 / \$50	
Deductible 5	ingle	\$2,500	\$3,500	\$2,500	\$3,500	
F	amily	\$7,500	\$10,500	\$5,000	\$10,500	
Coinsurance (Plan/Member)		70% / 30%	70% / 30%	70% / 30%	70% / 30%	
Out-of-Pocket Maximum S	ingle	\$7,150	\$7,150	\$7,150	\$7,150	
	amily	\$14,300	\$14,300	\$14,300	514,300	
Hospital and Emergency						
Inpatient Hospital		\$500 then Ded & Coins	Deduct ble & Coinsurance	\$500 then Ded & Coins	Deductible & Coinsurance	
Outpatient Hospital		\$150 Freestanding*	\$150 Freestanding*	Deductible & Coinsurance**	Deductible & Coinsurance**	
Urgent Care		\$60	\$60	\$60	\$60	
Emergency Room		\$150 then Coinsurance	\$150 then Coinsurance	\$150 then Coinsurance	\$150 then Coinsurance	
Prescription Drugs						
Rx Deductible		None	None	None	None	
Tier 1 (Preferred Value/Generic)		\$15	\$15	\$15	\$10	
Tier 2 (Preferred Brand)		N/A	\$35	30%	\$35	
Tier 3 (Nonpreferred)		N/A	\$60	30%	\$60	
Tier 4 (Preferred Specialty)		N/A	30% up to \$300 per Rx	N/A	N/A	
Tier 5 (Nonpreferred Specialty)		N/A	N/A	N/A	N/A	
Out of Network Benefits						
Deductible (Single/Family)		\$7,500 / \$22,500	\$10,500 / \$31,500	\$7,500 / \$22,500	\$10.500 / \$31.500	
Out of Pocket Maximum (Single/Family)		\$21,450 / \$42,900	\$21,450 / \$42,900	\$21,450 / \$42,900	\$21,450 / \$42,900	
Coinsurance (Plan/Member)		50% / 50%	50% / 50%	50% / 50%	50% / 50%	
Rates by Plan Lov	/ High	Current	Current	Low Plan Alternate	High Plan	
Employee 34		\$527.23	\$631.38	\$624.18	\$647.51	
Employee + Spouse 6	9	\$1,107.20	\$1,325.92	\$1,310.80	\$1,359.79	
Employee + Child(ren) 8	6	\$1,028.11	\$1,231.21	\$1,217.16	\$1,262.66	
Family 18	_	\$1,608.08	\$1,925.74	\$1,903.78	\$1,974.94	
Monthly Premium by Plan		\$61,739	\$77,818	\$73,092	\$79,806	
Annual Premium by Plan		\$740,872	\$933,820	\$877,107	\$957,676	
ANTONIO POLITICISTA DE CONTE		· · · · · · · · · · · · · · · · · · ·	rent	Propi		
Combined Annual Plan Totals			4,692	\$1,834		
Combined Annual Cost Difference (\$)		\$1,01		\$1,03-		
Combined Annual Cost Difference (%)						
Combined Annual Cost Difference (%)	_		· Andrews Committee of the Committee of	9.6	%	



^{*}In a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

^{**}At an umbulatory surgical center. In a hospital setting, outpatient surgery is \$500 per occurrence then deductible & coinsurance.

Medical/Rx Marketing Analysis - Self-Funded July 1, 2019

	Anthem BCBS	Anthem BCBS
CONTRACTOR OF THE PARTY OF THE	Current Fully Insured	Proposed Self-Funded
Network	OAPOS	OAPOS
Benefits	Medical, Rx	Medical, Rx
itop Loss Carrier	N/A	Anthem BCBS
PBM Vendor	N/A	Anthem BCBS
Specific Deductible		\$75,000
Lasers		None
Aggregating Specific	-	Not Included
Specific Contract Basis	-	12/15
Specific Run In Limit		
Specific Includes	-	Medical & Rx
Aggregate Contract Basis		12/15
Aggregate Run In Limit	**	
Aggregate Includes	(-	Medical & Rx
EIXED COSTS		
ixed Administrative Costs		
Medical Administration		
Medical Administration		\$9.15
Broker Fee	-	\$43.00
Total Monthly	\$0.00	\$52.15
Total Monthly Cost	\$0	\$7,666
Total Annual Cost	\$0	\$91,993
Percentage Change from Current		#DIV/0!
Stop Loss Premium		
Specific Premium		- emoder = 3
Composite	120	\$245.66
Aggregate Premium		
Composite		\$49.24
Fotal Stop Loss Premium		110
Fotal Monthly Cost	\$0	\$43,350
Fotal Annual Cost	\$0	\$520,204
Claims Liability		602
Expected Claims Liability		
Composite		\$747.77
Total Monthly Cost	\$0	\$109,922
Total Annual Cost	ŚO	\$1,319,066
Maximum Claims Liability	• •	+-,,
Composite		\$822.55
Total Monthly Cost	\$61,739	\$120,915
Total Annual Cost	\$740,868	\$1,450,978
Percentage Change from Current	7-10,000	95.85%
Annual Change from Current		\$710,110
Total Annual Costs		\$110,110
Medical Administration		\$91,993
itop Loss Premium		\$520,204
expected Claims Liability	100	\$1,319,066
otal Annual Costs with Expected Claims	\$0	
Annual Change from Current	şu.	\$1,931,262
otal Annual Costs		\$1,931,262
		604.003
Aedical Administration	-	\$91,993
top Loss Premium	A1 5 A	\$520,204
additional Laser Liability	N/A	N/A
Maximum Claims Liability	\$740,868	\$1,450,978
otal Annual Costs with Maximum Claims	\$740,868	\$2,063,174
Percentage Change from Current		178.5%
Annual Change from Current		\$1,322,306



Dental Renewal Analysis July 1, 2019

		Anthe	m BCBS
		Current	/Renewal
Deductible			
Individual		9	550
Family		\$	150
Coinsurance			
Type A: Preventive Services		10	00%
Type B: Basic Services		8	10%
Type C: Major Services		5	0%
Type D: Orthodontia		-	0%
Maximums			
Annual Per Member		\$1	,000
Lifetime Orthodontia			i/A
Annual Roll-Over Amount		1	I/A
Maximum Roll-Over		N	I/A
Procedures			
Oral Exams		Ту	pe A
Bitewing X-rays			pe A
Bitewing X-rays Frequency		1 in 12	Months
Full Mouth/Panoramic X-rays		Ту	pe A
Full Mouth/Panoramic X-rays	Frequency	1 in 36	Months
Fluoride		Ту	pe A
Fluoride Age Limit		To A	Nge 19
Sealants			pe A
Sealants Age Limit			lge 16
Space Maintainers			ре В
Simple Extractions			pe B
Complex Extractions			ре В
Simple Periodontics			pe C
Periodontal Surgery			pe C
Simple Endodontics		•	pe C
Complex Endodontics		*	pe C
Crowns		=	pe C
Crown Frequency		-	7 Years
Implants			pe C
Orthodontics (Child and/or Adul	1	-	overage pe c
UCR Percentage	·		Oth
_			00%
Employer Contribution			
Participation Requirement		10	00%
Waiting Periods			
Current		No	one
Late Entrants		Ni	one
Rate Guarantee		11	/ear
	Census	Current	Renewal
Employee	106	\$32.80	\$34.62
amily	67	\$88.76	\$93.69
Total Monthly Premium By Plan		\$9,424	\$9,947
Total Annual Premium By Plan		\$113,085	\$119,363
		Current	Renewal
Annual Change from Current (\$)	A		\$6,279
Annual Change from Current (%)			5.6%



Vision - Current Benefits July 1, 2019

	EyeMed Proposed	
Network	EyeMed Insight	W -LEVE
	In Network	
Copays (Exams/Materials)	\$20 / \$25	
Exam	\$20 Copay	
Frequency		
Exam	Every 12 Months	
Lenses	Every 12 Months	
Frames	Every 24 Months	
Frame Allowance	\$130	
Eyeglass Lenses (Single/Bifocal/Trifocal)	\$25 Copay	
Contact Lenses		
Contact Lens Fit and Follow-up	Standard up to \$55; 10% off Premium	Premium
Elective Contact Lenses	\$130 Allowance	
Necessary Contact Lenses	\$0 Copay; Covered in I	Futl

		Out of Network Reimbursement
Exam		Up to \$40
Eyeglass Lenses (Single/Bifocal/Trifocal)		Up to \$30/\$50/\$70
Frames		Up to \$91
Elective Contact Lenses		Up to \$130
Necessary Contact Lenses		Up to \$210
ER Contribution Requiremen	nt	0%
Participation Requirement		10 Enrolled
Rate Guarantee	250.07	Renews 7/1/2020
Rates		EyeMed
Single	65	\$5.52
EE + Spouse	24	\$10.47
EE + Child(ren)	13	\$12.28
Family	22	\$17.26
Monthly Premium		\$1,149
Annual Premium		\$13,793



Basic Life - Current Benefits July 1, 2019

	Anthem Curre		
Eligibility	Working 30 Ho	urs per Week	
Life and AD&D Amounts			
Employee	\$30,0	\$30,000	
Guaranteed Issue	\$30,0	000	
Reduction Schedule			
Benefits Reduced to	Percentage	Age	
	65%	65	
	50%	70	
Plan Provisions			
Waiver of Premium	Inclu	ded	
Living Benefit Rider	Inclu		
Conversion	Inclue	ded	
Participation Requirement	100	%	
Rate Guarantee	Renews 7	/1/2020	
Rate per \$1,000			
Basic Employee Life	\$0.2	25	
Basic Employee AD&D	\$0.0	20	
Volume	\$5,095,500		
Total Monthly Premium	\$1,248		
Total Annual Premium	\$14,9	81	

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to



Voluntary Life and AD&D - Current Benefits
July 1, 2019

	Anthen	BCBS
	Curr	
Eligibility	Working 30 Ho	
Definition of Earnings	Base S	alary
Benefit Amount		
Employee	\$10,000 Increments up to	o \$500,000 or 5x Salary
Spouse	\$5,000 Increments up to \$250,000, Not	•
Children	\$5,000 or	
Guarantee Issue		
Employee	\$100,	.000
Spouse	\$30,0	
Children	\$10,0	
Reduction Schedule	200,	
neadeball delicable	Percentage	Age
Benefits Reduced To	65%	65
benefits reduced to	50%	70
Coverage Termination	JUN	/0
Employee	At Retire	present
100 1 100		
Spouse	At Employee's	netirement
Contract Features	to the	4-4
Waiver of Premium	Inclu	
Accelerated Benefit	Inclus	
Portability	Includ	
Conversion	Included	
True Open Enrollment Year 1?	N/A	
Annual Increase Available without EOI	Not Inc	
Enroll via bswift?	Ye	=
SSO with bswift?	No)
Rate Based on Spouse Age	No)
Volume	\$5,630	0,000
# of Employees	73	<u> </u>
Employee Life Rates per \$1,000	Curre	ent
and the states bet outlood	Employee	Spouse
<25	\$0.057	\$0.057
25-29	\$0.064	\$0.064
30-34	\$0.071	\$0.071
35-39	\$0.097	\$0,097
40-44	\$0.146	\$0,146
45-49	\$0.229	\$0.229
50-54	\$0.365	\$0.365
55-59	\$0.564	\$0.564
60-64	\$0.768	\$0.768
65-69	\$1,235	\$1.235
70-74	\$2.078	\$2.078
75+	\$6.153	\$6.153
AD&D Rate per \$1,000	N/A	N/A
EE Only Monthly Premium	\$1,55:	
Child Life Coverage	Life	AD&D
Child Rates	\$0.170	N/A
Participation Requirement	Greater of 20%	
Rate Guarantee	Renews 7,	/1/2020

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits NOTE: EE Only Monthly Premium is an illustration based on current elections and volume is subject to change.



Voluntary Short Term Disability - Current Benefits July 1, 2019

	OneAmerica Current
Coverage Type	Non-Occupational
Benefit Percentage	60%
Maximum Weekly Benefit	\$1,000
Elimination Period	
Accident	14 Days
Sickness	14 Days
Plan Provisions	
Duration of Benefits	24 Weeks
Definition of Disability	Loss of Duties and Earnings
Pre-Existing Condition Limits	3/12
Benefit is offset by sick leave	Yes
W-2 Issuance	Included
FICA Match	Included
Enroll via bswift?	Yes
SSO with bswift?	No
Employer Contribution	0%
Participation Requirement	Greater of 10 Employees or 20%
Rate Guarantee	Renews 7/1/2020
Rate per \$10 of Weekly Benefit	
Age	
0-19	\$0.490
20-24	\$0.490
25-29	\$0.520
30-34	\$0.540
35-39	\$0.490
40-44	\$0.540
45-49	\$0.680
50-54	\$0.830
55-59	\$1.050
60-64	\$1.210
65-69	\$1.320
70+	\$1.400



Voluntary Long Term Disability - Current Benefits July 1, 2019

	OneAmerica	
	Current	
Eligibility	Working 30 Hours per Week	
Earnings Definition	Base Salary	
Benefit Outline		
Benefit Percentage	60.00%	
Maximum Benefit	\$5,000	
Elimination Period	180 Days	
Own Occupation Period	2 Years	
Benefit Duration	SSFRA	
Benefit Offset by Sick Leave?	No	
Contract Features		
Definition of Disability	Loss of Duties and Earnings	
Pre-Existing Condition Limit	3/12	
Mental & Nervous	24 Months	
Alcohol & Drug	24 Months	
Self-Reported Limitation	No Limitation	
Specific Conditions Limitation	24 Months	
Recurrent Disability	Included	
Residual Disability	Included	
Return to Work	Included	
Survivor Benefit	3 Months	
Waiver of Premium	Included	
24 Hour Coverage	Included	
W-2 Issuance	Included	
FICA Match	Included	
Enroll via bswift?	Yes	
SSO with bswift?	1	
	No 0%	
Employer Contribution		
Participation Requirement	Greater of 10 Employees or 25%	
Rate Guarantee	Renews 7/1/2020	
Rate per \$100 of Covered Payroll		
Age	¢0.000	
0-19	\$0.090	
20-24	\$0.150	
25-29	\$0.160	
30-34	\$0.290	
35-39	\$0.410	
40-44	\$0.630	
45-49	\$0.900	
50-54	\$1.250	
55-59	\$1.560	
60-64	\$1.370	
65-69	\$0.690	
70+	\$0.480	



HRA Renewal Analysis
July 1, 2019

	Admin America	
	Current	Renewal
Set Up and Annual Fees		
Initial Enrollment Fee	\$0	\$0
Annual Renewal Fee	\$0	\$0
Administration Fee		
Admin Fee	\$3.00	\$3.00
Debit Card	Included	Included
Minimum Monthly Charge	\$100	\$100
Monthly Compliance Fee	N/A	N/A
Number of Participating Employees	147	147
Total Monthly Cost	\$441	\$441
Total Annual Cost	\$5,292	\$5,292
Difference from Current (\$)		\$0
Difference from Current (%)		0.0%



Voluntary Group Accident - Current Benefits July 1, 2019

Summary of Benefits	AFLAC
Accidental Death	Group Accident Insurance
Employee	\$50,000
Spouse	\$20,000
Children	\$10,000
Burns	
2nd Degree (35+ square inches)	\$1,000
3rd Degree	\$1,000 - \$20,000
Skin Grafts for 2nd and 3rd Degree Burn	Included in Surgery Benefit
atastrophic Accident Dismemberment (loss of sight, hearing, speech, arms, or leg-	(2
Employees < 65 years	Up to \$15,000
Spouse < 65 years	Up to \$7,500
Children	Up to \$7,500
Age 65-69	Up to \$15,000
Age 70+	Up to \$15,000
mergency and Initial Care	
Doctor's Office Initial Visit	\$50
Emergency Room Treatment	\$150
Major Diagnostic Testing	\$100
Follow Up Doctor Visits	\$50
lospitalization	
Hospital Admission	\$750
Hospital Stay	\$200 per Day
Hospital (Intensive Care)	\$200 per Day
Maximum Benefit Period	365 Days Hospital, 30 Days ICU
Appliances	\$100
eye Injury (Requiring surgery or removal of foreign object)	Not Included
ractures (Open/Closed/Chip)	Up to \$7,500
Dislocations	Up to \$6,000
(nee Cartilage (torn)	Included in Surgery Benefit
aceration	Up to \$600
Paralysis	Up to \$30,000
urgery	Up to \$750
endon/Ligament/Rotator Cuff	Included in Surgery Benefit
	meladea in surgery denent
Dental Work (Emergency Only) Extraction	\$100
Crown	\$300
Ambulance	
Ambulance Ground	\$400
Ambulance Air	\$1,500
ravel	
Personal Medical Travel	Not Included
Lodging (up to 30 days per accident)	\$150 per Day
Veliness	Not Included
nroll via bswift?	Yes
SO with bswift?	SSO to Enrollment Platform
Participation Requirements	25 Enrolled for Group Billing
late Guarantee	2 Years Remaining (Renews 7/1/2021
Monthly Rate	AFLAC
implayee	\$12.89
Employee + Spause	\$21.05
Employee + Child(ren)	\$25.71
amily	\$33.87



Voluntary Group Critical Illness - Current Benefits July 1, 2019

60-69

	AFLAC Critical Illness with Cancer		
Issue Age or Attained Age	Issue Age		
Covered Conditions (lump sum and first occurrence)	Heart Attack (Myocardial Infarction), Sudden Cardiac Arrest, Coronary Bypass Surgery (25%), Major Organ Transplant, Bone Marrow Transplant Cell Transplant), Kidney Failure (End-Stage Renal Failure), Stroke (Ische Hemorrhagic), Cancer (Internal or Invasive), Non-Invasive Cancer (25% Cancer (\$250 per Calendar Year), Coma, Severe Burns, Paralysis, Loss of Speech, Loss of Hearing		
Optional Benefits Rider	Advanced Alzheimer's Disease (25%), Benign Bra		
Benefit Amount			
Employee	Up to \$	50,000	
Spouse	Up to 50% of Em	ployee Amount	
Child(ren)	Up to 50% of Employee Amount		
Separation Period for Additional Diagnosis	6 Consecutive Months		
Recurrence Benefit	6 Consecutive Months		
Guaranteed Issue	\$30,000 Employee	e; \$15,000 Spouse	
Benefit Reduction	At Ag	e 70	
Pre-Existing Condition	None		
Wellness Benefit (optional)			
Employee & Spouse	\$50 per Cal	endar Year	
Children	Not Inc	luded	
Waiver of Premium	No	ne	
Enroll via bswift?	Ye	es ·	
SSO with bswift?	SSO to Enrollm	nent Platform	
Minimum Enrollment	25 Enrolled to Esta	blish Group Billing	
Rate Guarantee	1 Year Remaining (I	Renews 7/1/2020)	
Monthly Rates	Rates per	\$10,000	
Age	Non-Tobacco	Tobacco	
18-29	\$5.39	\$7.03	
30-39	\$7.94	\$11.64	
40-49	\$14.24	\$21.61	
50-59	\$25.11	\$39.68	

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms and conditions.



\$62.64

\$40.65

Voluntary Group Hospital Indemnity - Current Benefits July 1, 2019

	AFLAC
	Group Hospital Indemity
Hospital Admission	\$500
Hospital Confinement	\$100 per Day (31 Days per Incident)
Major Diagnostic Exam	\$250
Inpatient Surgery (per Day)	\$500
Calendar Year Max	No Maximum
Outpatient Surgery	\$50
Wellness Benefit	Not Included
Anesthesia Benefit	Included in Surgical Benefit
Well Baby Care	Not Included
Emergency Room Treatment	\$75
Ambulance Transport	Not Included
Air Ambulance Transport	Not included
Portability	Class I/II
Family Coverage Options	Employee, Spouse, Child
Guarantee Issue	Included
Evidence of Insurability (Health Questions)	None
Pre-existing Condition Period	None
Waiting Period	None
Enrollment Frequency	Once Every 12 Months
Minimum Hours for Eligibility	16 Hours per Week
Enroll via bswift?	Yes
SSO with bswift?	SSO to Enrollment Platform
Required Participation	25 Enrolled for Group Billing
Rate Guarantee	2 Years Remaining (Renews 7/1/2021)
Monthly Rates	AFLAC
Employee	\$24.52
Employee + Spouse	\$46.82
Employee + Child(ren)	\$33.90
Family	\$56.20



Voluntary Universal Life - Current Benefits July 1, 2019

Proposed
Ages 17-34 \$25,000; Ages 35-39 \$15,000; Ages 40-70 \$10,000
Ages 17-49 \$100,000; Ages 50-65 \$50,000; Ages 66-70 \$10,000
Ages 17-49 \$50,000; Ages 50-60 \$25,000
\$25,000
Ages 17 to 70
Up to \$100,000
Ages 17 to 60
Up to \$50,000
15 Days to Age 26; Grandchildren 15 Days to Age 18
\$25,000
Accelerated Death Benefit
Children's Term Life (Employee Elected)
No
Greater of 5 Lives or 10% for Express Issue

ple			Employee N	Monthly Premium	with Waiver		
		Non-Tobacco			Tobacco		Guaranteed Age
Issue Age	\$25,000	\$50,000	\$100,000	\$25,000	\$50,000	\$100,000	
25	\$8.54	\$15.51	\$29.51	\$13.52	\$25.52	\$49.53	63
35	\$11.79	\$22.01	\$42.51	\$18.76	\$36.01	\$70.50	64
45	\$24.01	\$46.54	\$91.52	\$37.53	\$73.54	\$145.51	74
55	\$53.52	\$105.52	\$209.52	\$74.53	\$147.51	\$293.54	86

This comparison is intended to illustrate the carrier's proposed services and rates and should not be relied upon to fully determine benefits and rates. Refer to carrier's renewal/proposal for a complete representation of coverage terms and conditions.

Note: New enrollees will be enrolled in the refreshed PUreLife-plus product as of April 1,2019. The refreshed producty will hav longer rate guarantees at most ages and a slightly higher premium at most ages.



^{*}Express issue (Contingent Guaranteed Issue) determines insurability based on the answers to three work- and health-related questions).

2019 Medical Plan Changes



We are pleased to present you with our 2019 Large Group plan changes. These modifications optimize the value of our plans while controlling costs for you and your employees. Your dedicated Anthem account team is happy to assist with any questions pertaining to the information provided below.

- GA 2018 SB118 mandate increased the age limit on autism applied behavior analysis from 6 to 20
- LiveHealth Online benefit changed to \$0 copay for the first 12 medical visits, additional visits to match the primary care provider (PCP) copay
 *Excludes CDHP plans
- Office visit copays increased on plans currently set at \$25 PCP/\$50 specialist (SPEC) to \$30 PCP/\$60 SPEC
- Urgent care copay increased on plans currently set at \$60 to \$75
- Emergency room copay increased on plans currently at \$150/\$250 to \$350
- **Essential formulary** is utilized by all standard plans
- Rxcostsharechanges (see below in red)

Option AE	\$15/35/60 /25% to \$350
Option KE	\$200/\$400 deductible \$15/45/85/25% to \$350
Option N	\$300/\$600 deductible
	Level 1 \$5/20/45/90/25% to \$450
	Level 2 \$15/30/55/100/35% to \$550
OAP12/OAP9, Option C	\$15/NC/NC move to Essential Drug List
OAP12, Option L	\$500/\$1,000deductible\$15/40/75 /25% to \$350
OAP2F	\$500/\$1,000 deductible \$15 /50/100 /30% to \$500
OAP2H	\$750/\$1,500 \$15/50/100/30% to \$500
ОАР3В	\$15/40/80/25% to \$350 move to Essential
OAP14	\$250/\$500 deductible \$15/40 /90/25% to \$350
OAP15	\$1,000/\$2,000 deductible \$15/50/100/25% to \$350

- Rebranding to Anthem Blue Cross and Blue Shield
- Home health care visit limit decreased from 120 visits to 100 visits
- Out of pocket (OOP) increased to \$2,500 on plans with < \$2,500 OOP
- OOP on HDHP plans currently set at \$6,550/\$13,100 increased to \$6,750/\$13,500 *Also impacts OON OOP max
- OOP maximums increased on plans currently set at \$7,150/\$14,300 to \$7,900/\$15,800 (INN) *Also impacts OON OOP max
- Due to low enrollment, some plans have been eliminated from our portfolio Benefits will be mapped to the closest standard option
- NEW track 6 (OAP6) plans mirror OAP5 plans, but include a \$500 inpatient/outpatient/high-cost diagnostic copay



NEW Wellness Program: Anthem Get Strong

Our new program replaces the incentives previously offered on the Healthy Support plans (OAP 2, 14 & 15) and replaces the incentives for Future Moms and the Online Toolkit that was offered to all other fully insured plans. *Anthem Get Strong* empowers employees with information necessary to make healthy choices and rewards them for engaging with their doctor and taking key preventive care steps. These include:

Getting Preventive Care

- \$100 reward for flu shot + wellness exam Living Healthy
- \$50 reward for completing an online Health Assessment
- \$50 reward for being Tobacco Free



NEW Anthem Health Guide: Enhanced Service Model providing caring, high-tech, one-touch, service with extended hours Mon – Fri 7 a.m. - 7 p.m. and **NOW Saturday 8 am-5pm est**.

Alternate 1

Medical Renewal Analysis July 1, 2019

			Anthe	m BCBS	Anthem BCBS Renewal		
			Cui	rrent			
			Low Plan	High Plan	Low Plan	High Plan	
lan Name			NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAP5 3.5K/30	OAP12 2.5K/30 7.9K C	OAP5 3.5K/30 7.9K AE	
Provider Network			OAPOS	OAPOS	Open Access POS	Open Access POS	
n Network Benefits							
Office Visits (PCP/Specialist)			\$30 / \$60	\$25 / \$50	\$30 / \$60	\$30 / \$60	
eductible	Sir	ngle	\$2,500	\$3,500	\$2,500	\$3,500	
	Fa	mily	\$7,500	\$10,500	\$7,500	\$10,500	
Coinsurance (Plan/Member)			70% / 30%	70% / 30%	70% / 30%	70% / 30%	
Out-of-Pocket Maximum	Sir	ngle	\$7,150	\$7,150	\$7,900	\$7,900	
	Fa	mily	\$14,300	\$14,300	\$15,800	\$15,800	
lospital and Emergency							
npatient Hospital			\$500 then Ded & Coinsurance	Deductible & Coinsurance	\$500 then Ded & Coinsurance**	Deductible & Coinsurance	
Outpatient Hospital			Deductible & Coinsurance*	Deductible & Coinsurance*	Deductible & Coinsurance***	Deductible & Coinsurance	
Jrgent Care			\$60	\$60	\$75	\$75	
mergency Room			\$150 then Coinsurance	\$150 then Coinsurance	\$350	\$350	
rescription Drugs							
x Deductible			None	None	None	None	
ier 1 (Preferred Value/Generic)			\$15	\$15	\$15	\$15	
ier 2 (Preferred Brand)			N/A	\$35	100% Coinsurance	\$35	
ier 3 (Nonpreferred)			N/A	\$60	100% Coinsurance	\$60	
ier 4 (Preferred Specialty)			N/A	30% up to \$300 per Rx	100% Coinsurance	25% to \$350	
ier 5 (Nonpreferred Specialty)			N/A	N/A	N/A	N/A	
Out of Network Benefits			.4				
Peductible (Single/Family)			\$7,500 / \$22,500	\$10,500 / \$31,500	\$7,500 / \$22,500	\$10,500 / \$31,500	
Out of Pocket Maximum (Single/Fam	ilv)		\$21,450 / \$42,900	\$21,450 / \$42,900	\$23,700 / \$47,400	\$23,700 / \$47,400	
oinsurance (Plan/Member)	••		50% / 50%	50% / 50%	50% / 50%	50% / 50%	
lates by Plan	Low	High	Current	Current	Low Plan	High Plan	
mployee	34	53	\$527.23	\$631.38	\$516.26	\$595.38	
mployee + Spouse	6	9	\$1,107.20	\$1,325.92	\$1,084.16	\$1,250.31	
imployee + Child(ren)	8	6	\$1,028.11	\$1,231.21	\$1,006.71	\$1,161.00	
amily	18	13	\$1,608.08	\$1,925.74	\$1,574.60	\$1,815.92	
Monthly Premium by Plan			\$61,739	\$77,818	\$60,454	\$73,381	
Annual Premium by Plan			\$740,872	\$933.820	\$725,451	\$880.571	
			, ,	rrent	Rene	1 7 -	
ombined Annual Plan Totals			\$1,674,692		\$1,606,022		
Combined Annual Cost Difference (\$			7-7	-	(\$68,		
Combined Annual Cost Difference (%				-	-4.:	•	



^{*}In a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

^{**} Deductible applies to doctor and other services, not to facility fees.

^{***}In a hospital setting; Outpatient surgery is \$150 then 0% coinsurance and no deductible at a freestanding surgical center.

Alternate 2

Putnam County Board of Commissioners

Medical Renewal Analysis
July 1, 2019

			m BCBS rrent	Anthem BCBS Alternate		
		Low Plan	High Plan	Low Plan (Renewal)	High Plan (Alternate)	
lan Name		NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAP5 3.5K/30	OAP12 2.5K/30 7.9K C	OAP5 3.5K/0 7.9K AE	
rovider Network		OAPOS	OAPOS	Open Access POS	OAPOS	
n Network Benefits		5, 11 55	37.11.03	Spe 7.00033 1 00	<i>Gr. G</i>	
Office Visits (PCP/Specialist)		\$30 / \$60	\$25 / \$50	\$30 / \$60	\$30 / \$60	
Deductible	Single	\$2,500	\$3,500	\$2,500	\$3,500	
	Family	' '	\$10,500	\$7,500	\$10,500	
Coinsurance (Plan/Member)	,	70% / 30%	70% / 30%	70% / 30%	100% / 0%	
Out-of-Pocket Maximum	Single	\$7,150	\$7,150	\$7,900	\$7,900	
occe Maximum	Family		\$14,300	\$15,800	\$15,800	
lospital and Emergency	,	ψ1.J333	\$1. ,555	\$15,000	¥13,666	
npatient Hospital		\$500 then Ded & Coinsurance	Deductible & Coinsurance	\$500 then Ded & Coinsurance**	Deductible & Coinsurance	
Outpatient Hospital		Deductible & Coinsurance*	Deductible & Coinsurance*	Deductible & Coinsurance***	Deductible & Coinsurance	
Jrgent Care		\$60	\$60	\$75	\$75	
mergency Room		\$150 then Coinsurance	\$150 then Coinsurance	\$350	\$350	
rescription Drugs		y130 then comparative	\$150 then comparance	, 550	-	
x Deductible		None	None	None	None	
ier 1 (Preferred Value/Generic)		\$15	\$15	\$15	\$15	
ier 2 (Preferred Brand)		N/A	\$35	100% Coinsurance	\$35	
ier 3 (Nonpreferred)		N/A	\$60	100% Coinsurance	\$60	
ier 4 (Preferred Specialty)		N/A	30% up to \$300 per Rx	100% Coinsurance	30% up to \$300 per Rx	
ier 5 (Nonpreferred Specialty)		N/A	N/A	N/A	N/A	
out of Network Benefits		IN/A	IN/A	N/A	N/A	
Deductible (Single/Family)		\$7,500 / \$22,500	\$10,500 / \$31,500	\$7,500 / \$22,500	\$10,500 / \$31,500	
Out of Pocket Maximum (Single/Family)		\$21,450 / \$42,900	\$10,300 / \$31,300	\$23,700 / \$47,400	\$23,700 / \$47,400	
		50% / 50%	50% / 50%	50% / 50%	\$23,700 / \$47,400 50% / 50%	
oinsurance (Plan/Member)		· ·	SUW / SUW	,		
•		gh Current 3 \$527.23		Low Plan (Renewal)	High Plan (Alternate)	
mployee		· · · ·	\$631.38	\$516.26	\$630.84	
mployee + Spouse	-	\$1,107.20	\$1,325.92	\$1,084.16	\$1,324.78	
mployee + Child(ren)		\$1,028.11	\$1,231.21	\$1,006.71	\$1,230.15	
amily	18 1	3 \$1,608.08	\$1,925.74	\$1,574.60	\$1,924.09	
Monthly Premium by Plan		\$61,739	\$77,818	\$60,454	\$77,752	
nnual Premium by Plan		\$740,872	\$933,820	\$725,451	\$933,019	
12. 12. 12.		Current		Alternate		
combined Annual Plan Totals		\$1,6	74,692	\$1,658,471		
combined Annual Cost Difference (\$)			- (\$16,22		•	
Combined Annual Cost Difference (%)			•	-1.0	0%	



^{*}In a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

^{**} Deductible applies to doctor and other services, not to facility fees.

^{***}In a hospital setting; Outpatient surgery is \$150 then 0% coinsurance and no deductible at a freestanding surgical center.

Alternate 3

Medical Renewal Analysis July 1, 2019

		Anthe	m BCBS	Anthem BCBS Alternate		
		Cui	rrent			
		Low Plan	High Plan	Low Plan (Renewal)	High Plan (Alternate)	
lan Name		NS Blue Essential OAP12 2.5K/30	NS Blue Open Access OAP5 3.5K/30	OAP12 2.5K/30 7.9K C	OAP5 3.5K/0 5.75K AE	
Provider Network		OAPOS	OAPOS	Open Access POS	OAPOS	
n Network Benefits						
Office Visits (PCP/Specialist)		\$30 / \$60	\$25 / \$50	\$30 / \$60	\$30 / \$60	
Peductible Sir	ngle	\$2,500	\$3,500	\$2,500	\$3,500	
Fai	mily	\$7,500	\$10,500	\$7,500	\$10,500	
Coinsurance (Plan/Member)		70% / 30%	70% / 30%	70% / 30%	100% / 0%	
Out-of-Pocket Maximum Sir	ngle	\$7,150	\$7,150	\$7,900	\$5,750	
Fai	mily	\$14,300	\$14,300	\$15,800	\$11,500	
lospital and Emergency						
npatient Hospital		\$500 then Ded & Coinsurance	Deductible & Coinsurance	\$500 then Ded & Coinsurance**	Deductible & Coinsurance	
Outpatient Hospital		Deductible & Coinsurance*	Deductible & Coinsurance*	Deductible & Coinsurance***	Deductible & Coinsurance	
Irgent Care		\$60	\$60	\$75	\$75	
mergency Room		\$150 then Coinsurance	\$150 then Coinsurance	\$350	\$350	
rescription Drugs						
x Deductible		None	None	None	None	
ier 1 (Preferred Value/Generic)		\$15	\$15	\$15	\$15	
ier 2 (Preferred Brand)		N/A	\$35	100% Coinsurance	\$35	
ier 3 (Nonpreferred)		N/A	\$60	100% Coinsurance	\$60	
ier 4 (Preferred Specialty)		N/A	30% up to \$300 per Rx	100% Coinsurance	30% up to \$300 per Rx	
ier 5 (Nonpreferred Specialty)		N/A	N/A	N/A	N/A	
Out of Network Benefits						
eductible (Single/Family)		\$7,500 / \$22,500	\$10,500 / \$31,500	\$7,500 / \$22,500	\$10,500 / \$31,500	
Out of Pocket Maximum (Single/Family)		\$21,450 / \$42,900	\$21,450 / \$42,900	\$23,700 / \$47,400	\$17,250 / \$34,500	
oinsurance (Plan/Member)		50% / 50%	50% / 50%	50% / 50%	50% / 50%	
ates by Plan Low	High	Current	Current	Low Plan (Renewal)	High Plan (Alternate)	
mployee 34	53	\$527.23	\$631.38	\$516.26	\$643.11	
mployee + Spouse 6	9	\$1,107.20	\$1,325.92	\$1,084.16	\$1,350.56	
Employee + Child(ren) 8	6	\$1,028.11	\$1,231.21	\$1,006.71	\$1,254.09	
amily 18	13	\$1,608.08	\$1,925.74	\$1,574.60	\$1,961.53	
Monthly Premium by Plan		\$61,739	\$77,818	\$60,454	\$79,264	
Annual Premium by Plan		\$740,872	\$933,820	\$725,451	\$951,172	
		Cui	rrent	Alter	nate	
ombined Annual Plan Totals		\$1,67	74,692	\$1,676,623		
ombined Annual Cost Difference (\$)			-	\$1,931		
ombined Annual Cost Difference (%)			0.1%			



^{*}In a hospital setting; Outpatient surgery is \$150 then any applicable coinsurance and no dedutible at a freestanding surgical center.

^{**} Deductible applies to doctor and other services, not to facility fees.

^{***}In a hospital setting; Outpatient surgery is \$150 then 0% coinsurance and no deductible at a freestanding surgical center.

Item Attachment Documents:

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12. Authorization for Chairman to sign Supplemental Agreement #1 between GDOT and Putnam County for Local Bridge Replacement Project PI #0015658 CR 29 (Martins Mill Road) at Little River (staff-CM)

The Board of Commissioners reserves the right to continue the meeting to another time and place in the event the number of people in attendance at the meeting, including the Board of Commissioners, staff, and members of the public exceeds the legal limits. The meeting cannot be closed to the public except by a majority vote of a quorum present for the meeting. The board can vote to go into an executive session on a legally exempt matter during a public meeting even if not advertised or listed on the agenda. Individuals with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting or the facilities are required to contact the ADA Compliance Officer, at least three business days in advance of the meeting at 706-485-2776 to allow the County to make reasonable accommodations for those persons.



Russell R. McMurry, P.E., Commissioner One Georgia Center 600 West Peachtree Street, NW Atlanta, GA 30308 (404) 631-1000 Main Office



APRIL 19 4:51PM

April 5, 2019

Billy Webster Chairman Putnam County Board of Commissioners 117 Putnam Drive, Suite A Eatonton, GA 31024

RE: Local Bridge Replacement Project Pl 0015658

CR 29 (Martins Mill Road) at Little River

Dear Mr. Webster:

The Local Bridge Replacement Program (LOCBR), established by the Georgia Department of Transportation to assist in the replacement of deficient locally owned bridges, has updated its guidance for estimating right-of-way (ROW) contributions by local governments.

Previously, Putnam County was asked to participate in the LOCBR by providing half of the ROW cost estimate. This amount was reflected in the MOA executed by both parties in October of 2018 (see Attachment A). The attached, executed MOA was not returned to Putnam County in 2018, as the project missed the requested response date to proceed with project activities. The Martins Mill Road project was held until the next round of LOCBR projects were prepared, at which time, the updated guidance was provided to the Bridge Office.

The updated guidance (Attachment B) provides for a Tiered or Level of Complexity assignment for each LOCBR project along with a corresponding local government contributing amount. The bridge located on Martins Mill Road over Little River has been assigned a Tier 1 Level of Complexity. A Supplemental Agreement (SA) has been included with this letter (Attachment C) requesting that Putnam County agree to the tiered assignment and the corresponding contributing amount. The Department's responsibility to fund the preliminary engineering, reimbursable utility relocations, the remainder of the ROW costs and construction remain the same.

The Department requests that the County return all three executed SAs to the attention of Bill DuVall, State Bridge Engineer, by May 31, 2019. Once fully executed, the Department will return one signed Agreement to the County and an invoice will be sent to the County for remittance. As stated in Section I, Part a. of the SA, the County will be

responsible for providing payment of their contributing amount to the Department within 30 business days of notification that the Agreement is fully executed.

If you have any questions or comments concerning this request, please contact Carol Kalafut of the Office of Bridge Design at ckalafut@dot.ga.gov or 404-631-1882. Thank you for your attention and cooperation in this matter.

Sincerely,

State Bridge Engineer

WMD: CIK

CC:

Jamie Boswell, Honorable Board Member Congressional District 10 Kimberly Nesbitt, State Program Delivery Administrator, ATTN: Sean Pharr

Corbett Reynolds, P.E., District Engineer

Attachments

Attachment A

MEMORANDUM OF AGREEMENT BY AND BETWEEN GEORGIA DEPARTMENT OF TRANSPORTATION AND PUTNAM COUNTY FOR RIGHT OF WAY

This Memorandum of Agreement is made and entered into this 15th day of October., 2018; by and between the GEORGIA DEPARTMENT OF TRANSPORTATION, an agency of the State of Georgia (hereinafter called the "DEPARTMENT" or "GDOT"), and Putnam County, Georgia, acting by and through its Mayor and City Council or Board of Commissioners (hereinafter called the "LOCAL GOVERNMENT").

WHEREAS, <u>PI No. 0015658 CR 29 (MARTINS MILL ROAD) AT LITTLE RIVER</u>
<u>4.5 MI NW OF EATONTON</u> (herinafter called "PROJECT") has been added to the Statewide Transportation Improvement Plan; and

WHEREAS, the DEPARTMENT policy requires, and the LOCAL GOVERNMENT has agreed, that the LOCAL GOVERNMENT shall fund a portion of the DEPARTMENT expenses associated with Right of Way Phase Funding (hereinafter called "Right of Way Phase") for the PROJECT; and

WHEREAS, the estimated amount for the Right of Way Phase is <u>one hundred twenty six</u> thousand dollars (\$126,000) ("Preliminary Right of Way Phase Estimate"); and

WHEREAS, the LOCAL GOVERNMENT has agreed to pay fifty percent (50%) of the Preliminary Right of Way Phase Estimate in the amount of <u>sixty three thousand dollars (\$63,000)</u> to the DEPARTMENT within thirty (30) days of notification of this fully executed Agreement; and

WHEREAS, the Constitution authorizes intergovernmental agreements whereby state and local entities may contract with one another "for joint services, for the provision of services, or for the joint or separate use of facilities or equipment; but such contracts must deal with activities, services or facilities which the parties are authorized by law to undertake or provide." Ga. Constitution Article IX, §III, ¶I(a).

NOW THEREFORE, in consideration of the mutual promises made and of the benefits to flow from one to the other, the DEPARTMENT and the LOCAL GOVERNMENT hereby agree each with the other as follows:

1. PAYMENT BY THE LOCAL GOVERNMENT TO THE DEPARTMENT

a. Subject to the provisions of this section, the LOCAL GOVERNMENT will be responsible for providing payment of fifty percent (50%) of the Preliminary Right

of Way Phase Estimate, or <u>sixty three thousand dollars (\$63,000)</u> to the DEPARTMENT within thirty (30) days of notification of this fully executed Agreement.

b. All payments by the LOCAL GOVERNMENT to the DEPARTMENT shall be sent to the following address:

For payments made by check: Georgia Department of Transportation P.O. Box 117138 Atlanta, GA 30368-7138

- c. If there is an unused balance after completion of all tasks and phases of the PROJECT, then pending a final audit by the DEPARTMENT, the remainder will be refunded to the LOCAL GOVERNMENT.
- d. The DEPARTMENT will prepare Specific Activity Agreements for funding applicable to other PROJECT activities, such as right of way, utilities and construction phases, when appropriate.
- e. Both the LOCAL GOVERNMENT and the DEPARTMENT hereby acknowledge that Time is of the Essence.

If, for any reason, the LOCAL GOVERNMENT does not make payment to the DEPARTMENT pursuant to Paragraph 1 above, the DEPARTMENT reserves the right, where applicable, to delay or cancel the PROJECT.

2. <u>COMPLIANCE WITH APPLICABLE LAWS</u>.

- The undersigned, on behalf of the LOCAL GOVERNMENT, certifes that the provisions of Section 45-10-20 through 45-10-28 of the Official Code of Georgia Annotated relating to Conflict of Interest and State employees and officials trading with the State have been complied with in full.
- b. The provisions of Section 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated relating to the "Drug Free Workplace Act" have been complied with in full, as stated in Appendix A of this Agreement.
- c. The LOCAL GOVERNMENT has read and understands the regulations for STATE AUDIT REQUIREMENT and will comply in full with said provisions of O.C.G.A. § 36-81-7.

- d. By execution of this Agreement, I, on behalf of the LOCAL GOVERNMENT, certify under penalty of law that the LOCAL GOVERNMENT is in compliance with the service delivery strategy law (O.C.G.A. Sec. 36-70-1 et seq.) and is not debarred from receiving financial assistance from the State of Georgia.
- e. The LOCAL GOVERNMENT hereby agrees that it shall comply with all applicable requirements of the American with Disabilities Act of 1990 (ADA), 42 U.S.C. 12101, et seq. and 49 U.S.C. 322; Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 791; and regulations and amendments thereto.
- f. The LOCAL GOVERNMENT hereby agrees that it shall comply with Official Code of Georgia Annotated Title 25, Section 9, Georgia Utility Facility Protection Act, CALL BEFORE YOU DIG 1-800-282-7411.
- g. Pursuant to O.C.G.A. § 13-10-91, the LOCAL GOVERNMENT is and shall be at all times, in compliance with the Federal Work Authorization Program.
- h. The LOCAL GOVERNMENT hereby agrees that it shall not discriminate on the basis of age, race, color, sex, national origin, religion or disability and that it shall comply, at a minimum, with the following Georgia laws: the Georgia Age Discrimination Act (O.C.G.A. § 34-1-2 et seq.); the Georgia Equal Employment for Persons with Disabilities Code (O.C.G.A. 34-6A-1 et seq.); and the Sex Discrimination in Employment (O.C.G.A. 34-5-1 et seq.). The LOCAL GOVERNMENT further agrees that it will comply with any and all state and federal laws not specifically stated herein addressing discrimination to the extent that such is applicable.
- i. LOCAL GOVERNMENT acknowledges and agrees that failure to complete appropriate certifications or the submission of a false certification shall result in the termination of this Agreement.
- 3. It is mutually agreed between the parties hereto that this Agreement shall be deemed to have been executed in Fulton County, Georgia, and that all questions of interpretation and construction shall be governed by the laws of the State of Georgia.
- 4. The covenants herein contained shall, except as otherwise provided, accrue to the benefit of and be binding upon the successors and assigns of the parties hereto.
- 5. If any provision of this amendment is determined to be invalid or unenforceable, the remaining provisions shall remain in force and unaffected to the fullest extent permitted by law and regulation.
- 6. Nothing contained herein shall be construed as conferring upon or giving to any person, other than the parties hereto, any rights or benefits under or by reason of this Agreement.

- 7. The above "Whereas" clauses are hereby incorporated by reference as though fully set forth herein.
- 8. This Agreement supersedes all prior negotiations, discussion, statements and agreements between the parties and constitutes the full, complete and entire agreement between the Parties with respect hereto; no member, officer, employee or agent of either party has authority to make, or has made, any statement, agreement, representation or contemporaneous agreement, oral or written, in connection herewith, amending, supplementing, modifying, adding to, deleting from, or changing the terms and conditions of this Agreement. No modification of or amendment to this Agreement will be binding on either Party hereto unless such modification or amendment will be properly authorized, in writing, properly signed by both Parties and incorporated in and by reference made a part hereof.

IN WITNESS WHEREOF, the DEPARTMENT and the LOCAL GOVERNMENT have caused these presents to be executed under seal by their duly authorized representatives.

GEORGIA DEPARTMENT OF TRANSPORTATION

BY: Commissioner

ATTEST:

Treasurer

PUTNAM COUNTY, GEORGIA

BY: OCan Soster BOAR

Name Alan Foster SouthAM

Title Vice Chairman S SE

Lisa Ondson

Stepanie memul-

This Agreement approved by Local Government, the day of September, 2018.

Attest

Rym Butterath
Name and Title County Clerk
Lynn Butterworth

FEIN: 58-6000878

P.I. 0015658

APPENDIX A CERTIFICATION OF LOCAL GOVERNMENT DRUG-FREE WORKPLACE

I hereb whose	address is 117 Putsan Dr Extentos GA 31027 and it is also certified that:
1.	The provisions of Section 50-24-1 through 50-24-6 of the Official Code of Georgia Annotated, relating to the "Drug-Free Workplace Act" have been complied with in full; and
2.	A drug-free workplace will be provided for the LOCAL GOVERNMENT's employees during the performance of the contract; and
3.	Each subcontractor hired by the LOCAL GOVERNMENT shall be required to ensure that the subcontractor's employees are provided a drug-free workplace. The LOCAL GOVERNMENT shall secure from that subcontractor the following written certification: "As part of the subcontracting agreement with,
	certifies to the LOCAL GOVERNMENT that a drug-free workplace will be provided for the subcontractor's employees during the performance of this contract pursuant to paragraph (7) of subsection (b) of the Official Code of Georgia Annotated Section 50-24-3"; and
4.	It is certified that the undersigned will not engage in unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana during the performance of the contract.
	18-2018 Signature Signature

APPENDIX B

CERTIFICATION OF COMPLIANCES

I hereby certify that I am a principal and duly authorized re	presentative of Putas	- Count whose address
is 117 Putnam Do and it is also certified that:		7
Estrator GA 31024		

I. PROCUREMENT REQUIREMENTS

The below listed provisions of State Procurement requirements shall be complied with throughout the contract period:

(a) Provisions of Chapters 2 and Chapters 4 of the Title 32 of the Official Code of Georgia Annotated. Specifically as to the County the provisions of O.C.G.A. § 32-4-40 et seq. and as to the Municipality the provisions of O.C.G.A. § 32-4-92 et seq.

II. STATE AUDIT REQUIREMENT

The provisions of Section 36-81-7 of the Official Code of Georgia Annotated, relating to the "Requirement of Audits" shall be complied with throughout the contract period in full, including but not limited to the following provisions:

- (a) Each unit of local government having a population in excess of 1,500 persons or expenditures of \$300,000.00 or more shall provide for and cause to be made an annual audit of the financial affairs and transactions of all funds and activities of the local government for each fiscal year of the local government.
- (b) The governing authority of each local unit of government not included above shall provide for and cause to be made the audit required not less often than once every two fiscal years.
- (c) The governing authority of each local unit of government having expenditures of less than \$300,000.00 in that government's most recently ended fiscal year may elect to provide for and cause to be made, in lieu of the biennial audit, an annual report of agreed upon procedures for that fiscal year.
- (d) A copy of the report and any comments made by the state auditor shall be maintained as a public record for public inspection during the regular working hours at the principal office of the local government. Those units of local government not having a principal office shall provide a notification to the public as to the location of and times during which the public may inspect the report.
- (e) The audits of each local government shall be conducted in accordance with generally accepted government auditing standards.

III. SERVICE DELIVERY STRATEGY REQUIREMENT

The provisions of Section 36-70-20 et seq. of the Official Code of Georgia, relating to the "Coordinated And Comprehensive Planning And Service Delivery By Counties And Municipalities", as amended, have been complied with throughout the contract period.

9-18-2018 Clan Loston
Date Signature

Appendix C Georgia Security and Immigration Compliance Act Affidavit

GEORGIA SECURITY AND IMMIGRATION COMPLIANCE ACT AFFIDAVIT

	Putnam County	
Solicitation/Contract No./ Call No. or Project Description:	PI NO. 0015658	CR29 at Little River

CONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, entity or corporation which is engaged in the physical performance of services on behalf of the Georgia Department of Transportation has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91.

Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

49222	10-17-2010
Federal Work Authorization User Identification Number (EEV/E-Verify Company Identification Number)	Date of Authorization
Putnan County	
Name of Contractor	
I hereby declare under penalty of perjury that the foregoing is true and correct	
Alan Foster	Vice Chairman
Printed Name (of Authorized Officer or Agent of Contractor)	Title (of Authorized Officer or Agent of Contractor)
Clan foston	3-18-2018
Signature (of Authorized Officer or Agent)	Date Signed
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE	MINIMU.
18 DAY OF September 20 18	BUTTERW MISSION
Lynn Buttewith	(NOT ARY SEAS) TARL
NotaryPublic	PUBLIC 5
My Commission Expires: 7-5-2022	CON 5, 2022 O
	William Control

Attachment B



Interoffice Memo

DATE:

January 17, 2019

FROM:

Bill DuVall, State Bridge Engineer

TO:

File

RE:

Local Bridge Replacement Program (LOCBR) - Guidance for Estimating

Right-of-Way Contributions by Local Governments

The Local Bridge Replacement Program (LOCBR) relies on a commitment of the local government contributing to the project in the right-of-way phase. The Department funds preliminary engineering, utility coordination, construction, and a portion of the right-of-way phase in this Program. After the local government's initial letter of support is received, a Memorandum of Agreement (MOA) is drafted to include the local government's portion of the right-of-way phase. Guidance for estimating the amounts will be based on a project's anticipated complexity as defined in the following table:

Level of complexity	Local Government Contributing Amount to ROW Phase ¹	Notes
Tier 1	\$50,000	Utilizes offsite detour with candidate bridge restored in-place.
Tier 2	\$75,000	Likely on-site detour or potentially stage construction with greater footprint than Tier 1.
Tier 3	TBD (\$100,000 or as determined by ROW recommendation)	Defined as more complex bridge replacement, (potentially off-set alignment) with larger impacts than Tier 2.

¹Right-of-way impacts will be minimized by way of practical bridge design and any additional right-of-way costs or needs determined after the execution of the MOA will be the Department's responsibility. <u>Any unused portion of the requested amount will be refunded to the local government.</u>

Local Bridge Replacement Program (LOCBR) Letter January 17, 2019 Page 2

Tiers are determined by committee of the State Bridge Engineer, Bridge Program Specialist and Bridge Program Manager with recommendation from the Bridge Program Management Team. Based on the tier assigned to the candidate bridge, the local government will be required to submit the requested amount as provided in the MOA. Both the letter of support and contributed amount must be received prior to the initiation of the project development. The Department will acquire the necessary right-of-way and let the project to construction.

Guidance for estimating the right-of-way costs will be re-evaluated periodically for subsequent batches of LOCBR projects. The values in the table may be modified based on observed trends with current and previous LOCBR projects.

If you have any questions or comments concerning this project, please contact Carol Kalafut of the Office of Bridge Design at ckalafut@dot.ga.gov or (404) 631-1882.

cc: Kim Nesbitt, Office of Program Delivery Attn.: Chandria Brown and Sean Phar

WMD:CIK

Concur: Hulling

Director of Engineering

Approved: Wee

Chief Engineer

Attachment C

SUPPLEMENTAL AGREEMENT NO.: 1

BETWEEN

DEPARTMENT OF TRANSPORTATION

STATE OF GEORGIA

AND

PUTNAM COUNTY

P.I. # 0015658

SUPPLEMENTAL AGREEMENT NO. 1

This Agreement is made and entered into this	day of	_, 201, by and
between the DEPARTMENT OF TRANSPORTATION	ON, an agency of the State of C	eorgia, hereinafter
referred to as the "DEPARTMENT" and PUTNAM CO	OUNTY, hereinafter called the "	SPONSOR."

WHEREAS, the DEPARTMENT and the SPONSOR heretofore on OCTOBER 15, 2018, entered into a Memorandum of Agreement, hereinafter called the "MOA", whereby the SPONSOR agreed to pay fifty percent (50%) of the Preliminary Right of Way Phase Estimate to the DEPARTMENT; and

WHEREAS, PI No. 0015658 CR 29 (MARTINS MILL ROAD) AT LITLLE RIVER 4.5 MI NW OF EATONTON (hereinafter called "PROJECT") has been added to the Statewide Transportation Improvement Plan; and

WHEREAS, the DEPARTMENT has determined new guidance for estimating Right of Way Contributions for the PROJECT. This new guidance will provide for a Level of Complexity / Tier Assignment, that will correspond to a "Local Government Contributing Amount to ROW Phase" as explained in Exhibit B; and

WHEREAS, the DEPARTMENT has assigned a Tier 1 to the PROJECT. This Supplemental Agreement will decrease the amount the SPONSOR is required to pay to the DEPARTMENT; and

NOW, THEREFORE, THE PARTIES HERETO mutually agree that for and in consideration of the mutual benefits to flow from each to the other, the MOA dated OCTOBER 15, 2018, is hereby modified as follows:

- I. The third and fourth WHEREAS clauses are deleted in their entirety.
- II. Paragraph 1.a. is hereby deleted in its entirety and the following is substituted in lieu thereof:
 - a. Subject to the provisions of this section, the LOCAL GOVERNMENT will be responsible for providing payment of the assigned Local Government Contributing Amount to ROW Phase –Tier 1, of <u>fifty thousand dollars (\$50,000)</u> to the DEPARTMENT within thirty (30) days of notification of this fully executed agreement.

Except as modified, changed, or amended, all terms and conditions of the MOA dated OCTOBER 15, 2018, as amended by Supplemental Agreement No. 1 shall remain in full force and effect. The covenants herein contained shall, except as otherwise provided, accrue to the benefit of and be binding upon the successors and assigns of the parties hereto.

60 \$

IN WITNESS WHEREOF, the DEPARTMENT and the LOCAL GOVERNMENT have caused these presents to be executed under seal by their duly authorized representatives.

GEORGIA DEPARTMENT OF TRANSPORTATION	PUTNAM COUNTY, GEO	<u>ORGIA</u>
BY: Commissioner	BY: Name	(SEAL)
	Title	
ATTEST:		
Treasurer	This Agreement approved by theday of	
	Attest	
	Name and Title	
	FEIN:	

GEORGIA SECURITY AND AFFIDAVIT

IMMIGRATION COMPLIANCE ACT



Contractor's Name:	Putnam County
Solicitation/Contract No./ Call No.	PI 0015658, CR 29 (Martins Mill Road) at Little River 4.5 MI
or Project Description:	NW of Eatonton

CONTRACTOR AFFIDAVIT

By executing this affidavit, the undersigned contractor verifies its compliance with O.C.G.A. § 13-10-91, stating affirmatively that the individual, entity or corporation which is engaged in the physical performance of services on behalf of the Georgia Department of Transportation has registered with, is authorized to use and uses the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-91.

Furthermore, the undersigned contractor will continue to use the federal work authorization program throughout the contract period and the undersigned contractor will contract for the physical performance of services in satisfaction of such contract only with subcontractors who present an affidavit to the contractor with the information required by O.C.G.A. § 13-10-91(b). Contractor hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number (EEV / E-Verify User Identification Number)	Date of Authorization
Name of Contractor	
I hereby declare under penalty of perjury that the foregoing is true and correct	
Printed Name (of Authorized Officer or Agent of Contractor)	Title (of Authorized Officer or Agent of Contractor)
Signature (of Authorized Officer or Agent)	Date Signed
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE	
DAY OF, 20	
Notary Public	
My Commission Expires:	[NOTARY SEAL]

Page 4 of 4 PI 0015658, Putnam County