



BOARD OF SUPERVISORS AGENDA ITEM REPORT  
AWARDS / CONTRACTS / GRANTS

Award  Contract  Grant

Requested Board Meeting Date: 03/19/2024

*\*\* Mandatory, information must be provided*

or Procurement Director Award:

**\*Contractor/Vendor Name/Grantor (DBA):**

LexisNexis VitalChek Network Inc

**\*Project Title/Description:**

Ordering of Vital Records

**\*Purpose:**

Pima County Vital Records issues birth and death certificates for Pima County residents. Certificates can be obtained in-person, by mail and/or expedited service using VitalChek. VitalChek provides a service for all Arizona counties whereby the public anywhere in the country can contact them, pay a fee, and the County will send their certificate directly to them via UPS. After Pima County fulfills the orders, VitalChek sends the revenue to Pima County, and keeps the VitalCheck fee to pay for their services.

Amendment #1 extends the term for one year and adds an estimated \$1.6 million in revenue.

**\*Procurement Method:**

This Revenue Contract is a non-Procurement contract and not subject to Procurement rules.

**\*Program Goals/Predicted Outcomes:**

The LexisNexis VitalChek service provides a means for people to order Arizona birth and death certificates from anywhere in the country. Lexis Nexis collects the State-established administrative fee, shipping fee and certificate fee. Pima County receives the full certificate fee and bears no burden for the shipping expense. The revenue to the PCHD estimated to come from this agreement is the same per certificate as that collected from clients coming in to the Health Department. Over the years, more and more people are choosing the convenience of using this service rather than requesting certificates in person.

**\*Public Benefit:**

Utilizing VitalChek allows current and former Pima County residents to receive expedited copies of their birth/death certificates and allows the public to order from the convenience of their home.

**\*Metrics Available to Measure Performance:**

- Number of certificates issued by VitalChek
- Amount of revenue collected from VitalChek

**\*Retroactive:**

Yes. The Health Department has fallen behind on contract renewals. If the agreement is not approved, Pima County residents will not have the convenience available to them to obtain their certificates through the mail.

TO: COB 3-4-24(1)  
VERS 2  
PGS 3

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

Contract / Award Information

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_
Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_
Expense Amount \$ \_\_\_\_\_\* Revenue Amount: \$ \_\_\_\_\_

\*Funding Source(s) required: \_\_\_\_\_

Funding from General Fund? Yes No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Contract is fully or partially funded with Federal Funds? Yes No

If Yes, is the Contract to a vendor or subrecipient? N/A

Were insurance or indemnity clauses modified? Yes No

If Yes, attach Risk's approval.

Vendor is using a Social Security Number? Yes No

If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: CTN Department Code: HD Contract Number (i.e., 15-123): 23-110

Amendment No.: 01 AMS Version No.: 02

Commencement Date: 02/01/2024 New Termination Date: 01/31/2025

Prior Contract No. (Synergen/CMS): N/A

Expense Revenue Increase Decrease

Amount This Amendment: \$ 1,600,000.00

Is there revenue included? Yes No If Yes \$ \_\_\_\_\_

\*Funding Source(s) required: N/A

Funding from General Fund? Yes No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

Grant/Amendment Information (for grants acceptance and awards)

Award Amendment

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Grant Number (i.e., 15-123): \_\_\_\_\_

Commencement Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Amendment Number: \_\_\_\_\_

Match Amount: \$ \_\_\_\_\_ Revenue Amount: \$ \_\_\_\_\_

\*All Funding Source(s) required: \_\_\_\_\_

\*Match funding from General Fund? Yes No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

\*Match funding from other sources? Yes No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_

\*Funding Source: \_\_\_\_\_

\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature: \_\_\_\_\_ Date: 2/29/24

Deputy County Administrator Signature: \_\_\_\_\_ Date: 29 Feb 24

County Administrator Signature: \_\_\_\_\_ Date: 2/29/2024

**Pima County Department of Health**

**Project:** Ordering of Vital Records

**Contractor:** LexisNexis VitalChek Network Inc.

**Contract No.:** CTN-HD-23-110

**Contract Amendment No.:** 01



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<b>Orig. Contract Term:</b>	02/01/2023-01/31/2024	<b>Orig. Amount:</b>	\$1,500,000.00
<b>Termination Date Prior Amendment:</b>	N/A	<b>Prior Amendments Amount:</b>	\$ N/A
<b>Termination Date This Amendment:</b>	01/31/2025	<b>This Amendment Amount:</b>	\$1,600,000.00
		<b>Revised Total Amount:</b>	\$3,100,000.00

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**CONTRACT AMENDMENT**

The parties agree to amend the above-referenced contract as follows:

**1. Background and Purpose.**

1.1. Background. On February 1, 2023, County and Contractor entered into the above referenced agreement to provide a mail order service for County vital records.

1.2. Purpose. County requires to extend this Contract by one year.

**2. Term.** The County is exercising the first extension option to renew the contract for one additional year commencing on February 1, 2024 and terminating on January 31, 2025. If the commencement date is before the Effective Date of this amendment, the parties will, for all purposes, deem the amendment to have been in effect as of the commencement date.

**3. Rates; Fees.** Contractor will make payment to County in an amount equal to County's charges for all properly authorized requests in connection with services rendered by County and which are correctly processed through the Service. Such payments shall be made in a manner acceptable to both parties. Contractor will charge the consumer/applicant a convenience fee for the use of the Service as per the rates set forth in **Exhibit B** (1 page). The estimated amount of income for this year is \$1,600,000.00.

**THE REMAINDER OF THIS PAGE IS INTENTIONALLY LEFT BLANK**

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

**PIMA COUNTY**

**CONTRACTOR LexisNexis VitalChek Network Inc.**

\_\_\_\_\_  
Chair, Board of Supervisors

\_\_\_\_\_  
Date

Haywood Talcove  
Digitally signed by Haywood Talcove  
Date: 2024.02.21 10:02:59 -05'00'

\_\_\_\_\_  
Authorized Officer Signature

Haywood Talcove, CEO  
\_\_\_\_\_  
Printed Name and Title

02/21/2024  
\_\_\_\_\_  
Date

**ATTEST**

\_\_\_\_\_  
Clerk of the Board

\_\_\_\_\_  
Date

**APPROVED AS TO FORM**

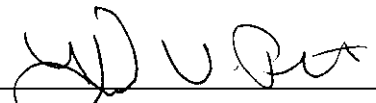
Jonathan Pinkney  
Digitally signed by Jonathan Pinkney  
Date: 2024.02.23 11:14:09 -07'00'

\_\_\_\_\_  
Deputy County Attorney

\_\_\_\_\_  
Print DCA Name

\_\_\_\_\_  
Date

**APPROVED AS TO CONTENT**

  
\_\_\_\_\_  
Department Representative - Health

2/23/24  
\_\_\_\_\_  
Date

## **EXHIBIT B COMPENSATION AND PAYMENT**

VitalChek will provide these services to County free of charge.

VitalChek will charge the consumer/applicant a convenience fee for the use of the Service, ("Fees"), and will accept payment of such fees through the use of a valid payment method then accepted by VitalChek, which may include, without limitation, Visa, MasterCard, Discover Card or American Express credit card, as well as major debit cards in VitalChek's reasonable discretion.

Consumer pricing is subject to change in future years based on transaction volumes, data costs and other market factors. Pima County will pay the prices agreed upon in VitalChek's contract CTR051322 with the Arizona Department of Health Services. A contract amendment will not be required if ADHS contracted pricing increases or decreases. The current fees for consumers are as follows:

All-inclusive charge per order	\$15.50
All-inclusive delivery rate: Express Courier 2-3 Day Delivery	\$17.50
All-inclusive delivery rate: Express Courier Standard Overnight	\$18.50
All-inclusive delivery rate: Express Courier Priority Overnight	\$19.50
All-inclusive delivery rate: UPS Alaska/Hawaii/Puerto Rico (Three (3) to Five (5) Days)	\$26.00
All-inclusive delivery rate: UPS Canada/Mexico (Three (3) to Five (5) Days)	\$27.00
All-inclusive delivery rate: UPS Saturday Delivery (Three (3) to Seven (7) Days)	\$33.00
All-inclusive delivery rate: UPS Worldwide Expedited (Three (3) to Five (5) Days)	\$37.75

For security purposes, signatures are required at time of delivery. The VitalChek fee includes Internet, toll-free phone & fax ordering.