

BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

C Award C Contract C Grant	Requested Board Meeting Date: 04/04/2023	
* = Mandatory, information must be provided	or Procurement Director Award:	
*Contractor/Vendor Name/Grantor (DBA):		
CBIZ Benefit & Insurance Services, Inc. dba CBIZ Talent and Compe	nsation Solutions	
*Project Title/Description:		
Classification and Compensation Study	e ·	
*Purpose:	ă.	
	mendment No. 01. This Amendment is for a one-time increase in the amount f \$458,000.00, and appends the Forced Labor of Ethnic Uyghurs provision to	
*Procurement Method:		
NE NORMAN ENGLISH DE LEICHEANNE ENGLISHE EN FAMOUR FOR THE STATE OF THE PROPERTY OF THE PROPER	re sealed proposals, on 06/07/2022, the Board of Supervisors approved an ward amount of \$383,000.00 with two (2) one-year renewal options.	
The increase is needed to exercise the options to include drafting	of job classifications in the project.	
PRCUID: 440604 Attachment: Contract Amendment No. 01.		
*Program Goals/Predicted Outcomes:		
	ommendations to the Board of Supervisors for approval for changes to our of establishing a modern, efficient and equitable system for determining what red to adequately compensate employees.	
*Public Benefit:	v	
Improved processes in place to manage employment for County w	rill result in better services provided to the community.	
*Metrics Available to Measure Performance:		
Milestones and timelines to measure project progress and the pe	rformance of the vendor are built into the four phases of this project.	
*Retroactive:		
No		

10: COB 3-16-23(1)

Vers: 3 pgs: 2

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 O No If Yes \$	<u> </u>
Contract is fully or partially funded w		O No
Were insurance or indemnity clauses If Yes, attach Risk's approval.	s modified? C Yes	○ No
Vendor is using a Social Security Nur If Yes, attach the required form per Ad	unci:	O No □
Amendment / Revised Award Info	rmation	*
Document Type: MA	Department Code: <u>PO</u>	Contract Number (i.e., 15-123): <u>22-187</u>
Amendment No.: <u>01</u>		AMS Version No.: 3
Commencement Date: 04/04/23		New Termination Date:
		Prior Contract No. (Synergen/CMS):
90 SP-90 90 400 WY 40050 SP-00 50 50 50 50 50	crease O Decrease	Amount This Amendment: \$ 75,000.00
Is there revenue included?	Yes No If Yes \$	
*Funding Source(s) required: Gen		
Funding from General Fund?	Yes O No If Yes \$	% <u>100</u>
Grant/Amendment Information (for grants acceptance and awar	rds) C Award C Amendment
Document Type:	Department Code:	Grant Number (i.e., 15-123):
Commencement Date:	Termination Date	e; Amendment Number:
Match Amount: \$		Revenue Amount: \$
*All Funding Source(s) required:		
*Match funding from General Fur	nd? O Yes O No If Yes	s\$
*Match funding from other source *Funding Source:	L J.	s\$
*If Federal funds are received, is f	unding coming directly from t	he Federal government or passed through other organization(s)?
Contact: Procurement Officer: Kel	sey Braun-Shirley Digitally signed by Kelsr Date: 2023.03.15 11:40	ey Braun-Shirley 2:18-07:00* Division Manager: Ana Wilber Division Manager: Ana Wilber Division Manager: Ana Wilber
Department: Procurement Directo		Digitally signed by Terri Spencer Dete: 2023,03.15 13:31:03 -07'00' Telephone: (520) 724-7466
	Cathy Bohland 🔏	Digitally signed by Cathy Bohland Discredarby Bohland, on-Plina County, ou-Human Resources, angul-rathy-bohlandpipma gov, c-US Date: 2023.03.15 15.22.07-07:00
Deputy County Administrator Signatu	ire:	Date: 3/15/20 2 3
County Administrator Signature:	- (gur	Date: 3/15/2013

Pima County Department of Human Resources

Project: Classification and Compensation Study

Contractor: CBIZ Benefits & Insurance Services, Inc.

dba CBIZ Talent and Compensation Solutions

Contract No.: MA-PO-22-187

Contract Amendment No.: 01

Orig. Contract Term: 06/09/2022 - 06/08/2023

Termination Date Prior Amendment: N/A

Termination Date This Amendment: 06/08/2023

Orig. Amount:

\$383,000.00

Prior Amendments Amount: This Amendment Amount: 0.00

Davis ad Tatal Assault

\$ 75,000.00

Revised Total Amount:

\$458,000.00

CONTRACT AMENDMENT

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

- 1. Background and Purpose.
 - 1.1. <u>Background</u>. On June 9, 2022, County and Contractor entered into the above referenced agreement to provide compensation and classification study services.
 - 1.2. <u>Purpose</u>. County requires an increase to the maximum payment amount to exercise the option to include drafting of job classifications in the project.
- 2. Maximum Payment Amount. The maximum amount the County will spend under this Contract, as set forth in Section 5.2, is increased by \$75,000.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$458,000.00.
- 3. Forced Labor of Ethnic Uyghurs. Pursuant to A.R.S. § 35-394, if Contractor engages in forprofit activity and has 10 or more employees, Contractor certifies it is not currently using, and agrees for the duration of this Contract to not use (1) the forced labor of ethnic Uyghurs in the People's Republic of China; (2) any goods or services produced by the forced labor of ethnic Uyghurs in the People's Republic of China; and (3) any contractors, subcontractors or suppliers that use the forced labor or any goods or services produced by the forced labor of ethnic Uyghurs in the People's Republic of China. If Contractor becomes aware during the term of the Contract that the Company is not in compliance with A.R.S. § 35-394, Contractor must notify the County within five business days and provide a written certification to County regarding compliance within one hundred eighty days.

Contract No.: MA-PO-22*187

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

This contract template has been approved as to form by the Pima County Attorney's Office.

PIMA COUNTY	CONTRACTOR CBIZ Benefits & Insurance Services, Inc.
	Nancy M. Mellard
Chair, Board of Supervisors	AEnthonized Officer Signature
	Nancy M. Mellard - Executive Vice Presider
Date	Printed Name and Title
	3/14/2023
3	Date
ATTEST	
В	
Clerk of the Board	
4	to the
Date	
	APPROVED AS TO CONTENT
	Cathy Bohland District States of the Cathy Bohland District Cathy Bohland Option County, our Human Resources, Grail-Eastly Stohland Spima, ov., c= US Date: 2023, 31, 515-23,53, 40700'
	Department Head
	03/15/2023
	Date

Contract No.: MA-PO-22*187