

Dane County Contract Addendum Cover Sheet

Res 396 significant

Revised 06/2021

Contract # Admin will assign	14417A
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Dept./Division	Administration/Employee Relations	Vendor Name	Delta Dental of Wisconsin
Brief Addendum Title/Description	To provide Dental Coverage to Dane County employees, retirees and quasi groups	Vendor MUNIS #	2022
		Addendum Term	1/1/25-12/31/26
		Amount (\$)	\$ 319,158.00

Department Contact Information		Vendor Contact Information	
Contact	Amy Utzig	Contact	Sunshine Mikulak
Phone #	266-9253	Phone #	715-343-7668
Email	utzig@countyofdane.com	Email	Sunshine.Mikulak@deltadentalwi.com
Purchasing Officer	Pete Patten		

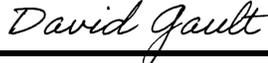
Purchase Order – Maintenance or New PO					
<input type="checkbox"/>	PO Maintenance Needed PO#	Org:	Obj:	Proj:	
		Org:	Obj:	Proj:	
<input type="checkbox"/>	No PO Maintenance Needed – this addendum does not change the dollar amount of the contract.				
<input type="checkbox"/>	New PO / Req. Submitted Req#	Org:	Obj:	Proj:	
		Org:	Obj:	Proj:	

Budget Amendment	
<input type="checkbox"/>	A Budget Amendment has been requested via a Funds Transfer or Resolution. Upon addendum approval and budget amendment completion, the department shall update the requisition in MUNIS accordingly.

Total Contracted Amount – List the Original contract info, then subsequent addenda including this new addendum					
A resolution is required when the total contracted amount first exceeds \$100,000. Additional resolutions are then required whenever the sum(s) of any additional addenda exceed(s) \$100,000	Addendum #	Term	Amount	Resolution	
	Original	1/1/22-12/31/24	\$ 9,703,251.00	<input type="checkbox"/> None	Res# 2021 RES-099
	A	1/1/25-12/31/26	\$ 319,158.00	<input type="checkbox"/> None	Res# 2023 RES-396
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
				<input type="checkbox"/> None	Res#
Total Contracted Amount			\$ 10,022,409.00		

Contract Language Pre-Approval – prior to internal routing, this contract has been reviewed/approved by:		
<input type="checkbox"/> Corporation Counsel:	<input type="checkbox"/> Risk Management:	<input type="checkbox"/> No Pre-Approval

APPROVAL	
Dept. Head / Authorized Designee	
Utzig, Amy	Digitally signed by Utzig, Amy Date: 2024.03.19 10:41:01 -05'00'

APPROVAL – Contracts Exceeding \$100,000	
Director of Administration	Corporation Counsel
	

APPROVAL – Internal Contract Review – Routed Electronically – Approvals Will Be Attached			
DOA:	Date In: 3/19/24	Date Out: _____	<input checked="" type="checkbox"/> Controller, Purchasing, Corp Counsel, Risk Management

Goldade, Michelle

From: Goldade, Michelle
Sent: Tuesday, March 19, 2024 12:42 PM
To: Hicklin, Charles; Patten (Purchasing), Peter; Gault, David
Cc: Stavn, Stephanie; Oby, Joe
Subject: Contract #14417A
Attachments: 14417A.pdf

Tracking:	Recipient	Read	Response
	Hicklin, Charles	Read: 3/19/2024 1:23 PM	Approve: 3/19/2024 1:23 PM
	Patten (Purchasing), Peter		Approve: 3/19/2024 12:46 PM
	Gault, David	Read: 3/19/2024 1:28 PM	
	Stavn, Stephanie		
	Oby, Joe		

Please review the contract and indicate using the vote button above if you approve or disapprove of this contract.

Contract #14417A
Department: Administration
Vendor: Delta Dental of Wisconsin
Contract Description: Addendum to provide dental insurance to Dane County employees, retirees and quasi agencies (Res 396)
Contract Term: 1/1/25 – 12/31/26
Contract Amount: \$319,158.00

Michelle Goldade

Administrative Manager
Dane County Department of Administration
Room 425, City-County Building
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703
PH: 608/266-4941
Fax: 608/266-4425
TDD: Call WI Relay 711

Please Note: I currently have a modified work schedule...I am in the office Mondays and Wednesdays and working remotely Tuesdays, Thursdays and Fridays.

Goldade, Michelle

From: Gault, David
Sent: Tuesday, March 19, 2024 1:29 PM
To: Goldade, Michelle
Subject: Approve: Contract #14417A

AWARD OF CONTRACT TO PROVIDE EMPLOYEE GROUP DENTAL INSURANCE

The Department of Administration solicited requests for proposals to provide dental insurance coverage for Dane County employees. The contract term began on January 1, 2022 through December 31, 2024 with the option to renew for an additional two years. The Department of Administration and the Employee-Management Insurance Advisory Committee recommend that the contract be renewed with Delta Dental of Wisconsin Company for years 2025 and 2026.

The current benefit level provides a \$2,750 annual dental benefit and a \$2,000 orthodontia lifetime benefit. The rates included in the contract for 2025 and 2026 are:

	2025	2026
Single	\$51.75	\$54.34
Family	\$145.51	\$152.79

NOW, THEREFORE, BE IT RESOLVED that Delta Dental of Wisconsin be awarded the extension of the dental contract from January 1, 2025 through December 31, 2026.

BE IT FINALLY RESOLVED that the Dane County Executive and Dane County Clerk are authorized to sign the contract documents.



DANE COUNTY CONTRACT

ADDENDUM #14417A

Revised 01/2022

THIS ADDENDUM, made and entered into effective as of the date by which both parties hereto have executed this document, by and between the County of Dane (hereinafter referred to as “County”) and Delta Dental Plan of Wisconsin (hereinafter, “Provider”).

WITNESSETH:

WHEREAS Provider and County, by a separate document (hereinafter, the “Master Agreement”), Dane County Contract # 14417, have previously entered into a contractual relationship pursuant to which Provider Delta Dental, and

WHEREAS County and Provider wish to amend the Master Agreement in order to extend the term of the contract.

NOW, THEREFORE, in consideration of the above premises and the mutual covenants of the parties hereinafter set forth, the receipt and sufficiency of which is hereby acknowledged by each party for itself, the parties do agree as follows:

1. The Master Agreement shall remain in full force and effect unchanged in any manner by this addendum except as changes are expressly set forth herein. This addendum shall control only to the extent of any conflict between the terms of the Master Agreement and this addendum.
2. The Master Agreement, and any amendment or addendum to it, may be executed and transmitted to any other party by legible facsimile reproduction or by scanned legible electronic PDF copy, and utilized in all respects as, an original, wet-inked manually executed document. Further, the Master Agreement and any amendment or addendum thereto, may be stored and reproduced by each party electronically, photographically, by photocopy or other similar process, and each party may at its option destroy any original document so reproduced. All parties hereto stipulate that any such legible reproduction shall be admissible in evidence as the original itself in any judicial, arbitration or administrative proceeding whether or not the original is in existence and whether or not such reproduction was made by each party in the regular course of business. This term does not apply to the service of notices under the Master Agreement, or any subsequent amendment or addendum.
3. The term of the contract is extended through 12/31/2026 to continue the program for Dental coverage to Dane County employees, retirees and quasi agencies, at an additional cost of \$319,158.

IN WITNESS WHEREOF, the parties, by their respective authorized representatives, have set their hands and seals as of the dates set forth below.

FOR PROVIDER:



March 18, 2024

NAME Kyle H. Humphrey
TITLE Chief Sales & Marketing Officer

Date

* * *

FOR COUNTY:

Joseph T. Parisi
Dane County Executive

Date

Scott McDonell
Dane County Clerk

Date