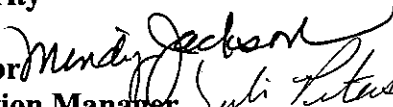
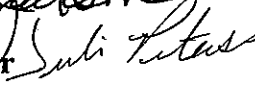


AGENDA ITEM 7 B
Action Item

MEMORANDUM

DATE: February 5, 2009

TO: El Dorado County Transit Authority

FROM: Mindy Jackson, Executive Director 
Julie Petersen, Fiscal Administration Manager 

SUBJECT: Purchase Order Revisions for Fiscal Year 2008/09

REQUESTED ACTION:
BY MOTION,

Approval of Revised Blanket Purchase Orders for Fiscal Year 2008/09;

- B14061 issued to Health Benefit Service Division, California Public Employees Retirement System (CalPERS) in the amount of \$257,000.
- B14062 issued to CoPower Administrators in the amount of \$51,500.
- B14063 issued to El Dorado County Risk Management in the amount of \$219,000.

BACKGROUND

El Dorado County Transit Authority (El Dorado Transit) Purchasing Procedures and the Joint Powers Agreement establishing El Dorado Transit require Board Approval for Purchase Orders over \$25,000 and Purchase Requisitions over \$5,000. The Executive Director certifies that these purchases have been processed within approved Purchasing Procedures.

DISCUSSION

The budget item for account 5020.02 Health Insurance was held static from the FY 2007/08 Mid Year Budget to the FY 2008/09 beginning budget. At the time of development of the FY 2008/09 budget, premium increases for policies on the calendar year cycle were not known. The requested action includes recognizing rate increases and employee shifts from one provider to another.

Salary & Benefits Accounts

Purchase Order # B14061 – CalPERS Health Benefits Division

5020.02	Health Insurance	\$235,000.	\$257,000.
Purchase Order # B14062 – CoPower Administrators			
5020.02	Health Insurance	\$50,000.	\$51,500.
Purchase Order # B14063 – El Dorado County Risk Management			
5020.02	Health Insurance	\$168,000.	\$219,000.

FISCAL IMPACT

Approval of revised health insurance blanket purchase orders is contingent upon approval of February 5, 2009 agenda item 7A. Item 7A incorporates budgets transfers to fund the increased blanket purchase order amounts.

Budget line item increase of \$21,951 included in agenda item 7A reflects premium increases; employees moving from one (1) form of medical coverage to another and the under projection of premium expense in the preliminary FY 2008/09 budget.

**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454
(530) 642-5383**

REVISED 02/05/09

PURCHASE ORDER NO. B14061

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, PACKAGES, AND BILLS OF LADING.

DATE: 07/01/08

ACCOUNT: 5020.02

CLASS: 125

TO: HEALTH BENEFIT SERVICE DIVISION
CALIFORNIA PUBLIC EMPLOYEES
RETIREMENT SYSTEM
PO BOX 4032
SACRAMENTO, CA 95812-4032

SHIP & INVOICE TO:

**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454**

Contact: Robert Sharp

Vendor Phone No: (888) 225-7377

FAX No: (916) 795-7901

PROMISED DELIVERY DATE		TERMS: Net 30 Days		
		F.O.B. DESTINATION		
QTY	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED TOTAL
		<p align="center">EDCTA SPONSORED HEALTH INSURANCE COVERAGE FOR UNREPRESENTED AND MANAGEMENT EMPLOYEES FOR FISCAL YEAR 07/01/08 THROUGH 06/30/09</p> <p align="center">NOTE: PURCHASE ORDER REFLECTS TOTAL PREMIUM CHARGED. EDCTA ACTUAL COST IS REDUCED BY PAYROLL DEDUCTION OF EMPLOYEE PORTION.</p>		NOT TO EXCEED: \$257,000.00
I hereby certify that this purchase order is in accordance with procedures in the purchase manual governing of such items for El Dorado County Transit Authority.			SUBTOTAL	\$257,000.00
			SHIPPING	
			SALES TAX	
			TOTAL	NTE: \$257,000.00
PURCHASING AGENT				

PLEASE NOTE CONDITIONS ON REVERSE SIDE

"This Purchase Order expressly limits acceptance to the terms and conditions stated herein, set forth on the reverse side and any supplementary or additional terms and conditions annexed hereto or incorporated herein by reference. Any additional or different terms and conditions proposed by seller are objected to and hereby rejected."

Circle Distributing: Vendor - Accounting - Requestor - Purchasing

**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454
(530) 642-5383**

REVISED 02/05/09

PURCHASE ORDER NO. B14062

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, PACKAGES, AND BILLS OF LADING.

DATE: 07/01/08

ACCOUNT: 5020.02

CLASS: 125

TO: COPOWER ADMINISTRATORS
DELTA DENTAL & VISION SERVICE PLAN
3100 ZINFANDEL, STE. #285
RANCHO CORDOVA, CA 95670

SHIP & INVOICE TO:
**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454**

Contact: Charlie Knoblauch

Vendor Phone No: (530) 621-3118

FAX No: (530) 621-4286

PROMISED DELIVERY DATE		TERMS: Net 10 Days		
		F.O.B. DESTINATION		
QTY	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED TOTAL
		<p align="center">EDCTA SPONSORED HEALTH INSURANCE FOR DENTAL AND VISION CARE FOR UNREPRESENTED AND MANAGEMENT EMPLOYEES FOR FISCAL YEAR 07/01/08 THROUGH 06/30/09</p> <p align="center">NOTE: PURCHASE ORDER REFLECTS TOTAL PREMIUM CHARGED. EDCTA ACTUAL COST IS REDUCED BY PAYROLL DEDUCTION OF EMPLOYEE PORTION.</p>		NOT TO EXCEED: \$51,500.00
I hereby certify that this purchase order is in accordance with procedures in the purchase manual governing of such items for El Dorado County Transit Authority.			SUBTOTAL	\$51,500.00
			SHIPPING	
			SALES TAX	
			TOTAL	NTE: \$51,500.00
PURCHASING AGENT				

PLEASE NOTE CONDITIONS ON REVERSE SIDE

"This Purchase Order expressly limits acceptance to the terms and conditions stated herein, set forth on the reverse side and any supplementary or additional terms and conditions annexed hereto or incorporated herein by reference. Any additional or different terms and conditions proposed by seller are objected to and hereby rejected."

Circle Distributing: Vendor - Accounting - Requestor - Purchasing

**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454
(530) 642-5383**

REVISED 02/05/09

PURCHASE ORDER NO. B14063

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, PACKAGES, AND BILLS OF LADING.

DATE: 07/01/08

ACCOUNT: 5020.02

CLASS: 125

TO: EL DORADO COUNTY
RISK MANAGEMENT
330 FAIR LANE
PLACERVILLE, CA 95667

SHIP & INVOICE TO:
**EL DORADO COUNTY TRANSIT AUTHORITY
6565 COMMERCE WAY
DIAMOND SPRINGS, CA 95619-9454**

Contact:

Vendor Phone No: (530) 621-5568

FAX No:

PROMISED DELIVERY DATE		TERMS: Net 30 Days		
		F.O.B. DESTINATION		
QTY	UNIT	DESCRIPTION	UNIT PRICE	EXTENDED TOTAL
		<p>EL DORADO COUNTY PROVIDED HEALTH INSURANCE PLAN TO INCLUDE; MEDICAL, DENTAL, CHIROPRACTIC, AND VISION COVERAGE FOR FISCAL YEAR 07/01/08 THROUGH 06/30/09</p> <p>NOTE: PURCHASE ORDER REFLECTS TOTAL PREMIUM CHARGED. EDCTA ACTUAL COST IS REDUCED BY PAYROLL DEDUCTION OF EMPLOYEE PORTION.</p>		NOT TO EXCEED: \$219,000.00
I hereby certify that this purchase order is in accordance with procedures in the purchase manual governing of such items for El Dorado County Transit Authority.			SUBTOTAL	\$219,000.00
			SHIPPING	
			SALES TAX	
			TOTAL	NTE: \$219,000.00
PURCHASING AGENT				

PLEASE NOTE CONDITIONS ON REVERSE SIDE

"This Purchase Order expressly limits acceptance to the terms and conditions stated herein, set forth on the reverse side and any supplementary or additional terms and conditions annexed hereto or incorporated herein by reference. Any additional or different terms and conditions proposed by seller are objected to and hereby rejected."

Circle Distributing: Vendor - Accounting - Requestor - Purchasing