Notice



Identification

Reference Number: 22033804

14-000000086916 Request ID:

Date First Offered 12/17/2009

Title: THA - 09-0138 Employee Health Benefit Programs

Agency Reference

THA - 14-000000086916

Number:

Agency: THA - Toll Highway Authority Purchasing Agency: THA - Toll Highway Authority

Purchasing Agency Victoria Santiago

SPO:

Status: Published

Overview

Description and Specifications:

The Illinois Tollway is giving notice of intent to renew contract 09-0138 Employee Health Benefit Programs with Blue Cross Blue Shield/Health Care Services.

This renewal will continue to provide the services and insurance necessary for the Agency's employee preferred provider organization (PPO) medical benefit plan; employee health maintenance organization (HMO) medical plans; PPO dental plan and PPO optical plan.

The Tollway will execute the fifth renewal option.

Key Information

Notice Type: Contract Renewal

Published: 01/26/2015 Notice Expiration Date: 02/02/2015

Professional & Artistic: No Small Business Set-Aside: No Does this solicitation contain No a BEP or DBE requirement?: Does this solicitation contain No

a Veteran requirement?:

Relevant Category: **Employee Benefits**

Length of Renewal Term: 12

Contract Begin Date: 03/01/2015 Contract End Date: 02/29/2016

Remaining Renewal Terms: 4

Contract Renewal

\$22,500,000.00 (Total Dollar Amount of Initial Term) Cost of Initial Term:

Cost of this Renewal: \$17,500,000.00 (Total Dollar Amount of Renewal)

Renewal Increase/Decrease: The maximum dollar amount is \$21,000,000.00 for renewal

Change in Specifications: No Renewal Number: 5 of 9

Vendor(s) Selected for Award

Vendor Name

Amount of Award BEP Goal % DBE Goal %

Blue Cross Blue Shield / Health Care SVC Corp \$17,500,000.00 0% 0%

Notice Contact

Desiree Liberti Name: Street Address: 2700 Ogden Ave. **Downers Grove** City:

State: IL

Zip Code: 60515

Phone: 630-241-6800 Fax Number: 630-505-9270

EMail Address: dliberti@getipass.com

Class Code

Class Codes: S300 Health; Dental; Life Insurance; & Services

NIGP Code

NIGP Commodity/Service 948 28 Dental Services

Code: 948 46 Hospital Services; Inpatient and Outpatient

953 48 Health/Hospitalization (Including Dental and

Visual Insuranc

Attachments

To download file(s), click on filename(s) located below. Not all Notices will have files to download.

File Attachments:

◀ Back

Vendor Award Information



Help

Created Date: 01/26/2015 Created By: Julia Shaw

Identification

Reference Number: 22033804

Title: THA - 09-0138 Employee Health Benefit Programs

Vendor Selected for Award

Vendor Name: Blue Cross Blue Shield / Health Care SVC Corp

Vendor Contact Name: Sandra Gonzales Vendor Street Address: P O Box 1186 Vendor City Chicago

Vendor State: IL Vendor Zip Code: 60690

Vendor Phone Number: 312-653-2216 Vendor Fax Number: 312-540-0539

Key Information

Amount of Award: \$17,500,000.00 (Total Dollar Value Only)

Amount of \$0.00 (Dollar Value Only)

Increase/Decrease:

Indicate Increase or No Change

Decrease:

Renewal Options: 5 of 9 BEP Goal Amount 0.00%

(Percentage):

DBE Goal Amount 0.00%

(Percentage):

Will Sub-Contractors BeNo

Utilized?