

# Notice



## Identification

Reference Number:	22038839
Request ID:	16-000000099719
Date First Offered	08/19/2009
Title:	THA - 09-0138 Employee Health Benefit Programs
Agency Reference Number:	THA - 16-000000099719
Agency:	THA - Toll Highway Authority
Purchasing Agency:	THA - Toll Highway Authority
Purchasing Agency SPO:	Victoria Santiago
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 contract was originally awarded under reference #22017783. The current contract will expire on 2/28/2017.

This renewal term shall not exceed \$23,606,400.00 without a formal change order.

The Tollway will execute the seventh renewal option.

## Key Information

Notice Type:	Contract Renewal
Published:	01/27/2017
Notice Expiration Date:	02/10/2017
Professional & Artistic:	No
Small Business Set-Aside:	No
	No

Does this solicitation contain  
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: 03/01/2017

Contract End Date: 02/28/2018

Remaining Renewal Terms: 2

### Contract Renewal

Cost of Initial Term: \$129,716,000.00 (Total Dollar Amount of Initial Term)

Cost of this Renewal: \$19,672,000.00 (Total Dollar Amount of Renewal)

Renewal Increase/Decrease: 0.00

Change in Specifications: No

Renewal Number: 7 of 9

### Vendor(s) Selected for Award

Vendor Name	Amount of Award	BEP	Goa
<a href="#">BLUE CROSS BLUE SHIELD / HEALTH CARE SVC CORP</a>	\$19,672,000.00		0%

### Notice Contact

Name: Mary Hart  
Street Address: 2700 Ogden Avenue  
City: Downers Grove  
State: IL  
Zip Code: 60515  
Phone: 630-241-6800  
Fax Number: 630-795-7908  
EMail Address: mhart@getipass.com

### Class Code

Class Codes:

### NIGP Code

NIGP	918 40 Employee Benefits Consulting
Commodity/Service	946 45 Employee Benefit Funds
Code:	948 48 Health Care Services (Not Otherwise Classified)
	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:

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## Vendor Award Information

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Help

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Created Date: 01/27/2017  
Created By: Julia Shaw

### Identification

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Reference Number: 22038839  
Title: THA - 09-0138 Employee Health Benefit Programs

### Vendor Selected for Award

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Vendor Name: BLUE CROSS BLUE SHIELD / HEALTH CARE SVC CORP  
Vendor Contact Name: SANDRA GONZALES  
Vendor Street: P O BOX 1186  
Address:  
Vendor City: CHICAGO  
Vendor State: IL  
Vendor Zip Code: 60690  
Vendor Phone: 312-653-2216  
Number:  
Vendor Fax Number: 312-540-0539

### Key Information

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Amount of Award: \$19,672,000.00 (Total Dollar Value Only)  
Amount of: \$0.00 (Dollar Value Only)  
Increase/Decrease:  
Indicate Increase or: No Change  
Decrease:  
Renewal Options: 7 of 9  
BEP Goal Amount: 0.00%  
(Percentage):  
DBE Goal Amount: 0.00%  
(Percentage):  
Will Sub-Contractors: No  
Be Utilized?