

FILED

NOV 13 2020

Resolution # 7-1

Don Hany
Sangamon County Clerk

WHEREAS, County policies and procedures require both the assigned oversight committee and the County Board to approve all requests to procure goods and/or services costing \$30,000 or more; and,

WHEREAS, the Department of Auditor's Office wishes to procure goods and/or services from Triune Health Group for the purpose of Worker's Compensation Nurse Medical Case Management in the amount of approximately \$116,000; and

WHEREAS, this purchase will allow the Auditor's Office and Employee Services to provide substantial monitoring of the County's workers compensation claims; and

WHEREAS, as documented by the approval of this resolution, Finance Committee has approved the Auditor's Office Department's request to procure the items specified and the committee recommends that the County Board approve procurement of the same, and;

NOW, THEREFORE, BE IT RESOLVED that the Sangamon County Board, in session this 8th day of December, 2020, approves the procurement of the goods and/or services detailed above. The Elected Official/Department Head is authorized to sign required documents to execute the provision of this procurement.

Chairman, Sangamon County Board

ATTEST:

County Clerk

Approved by the Finance _____ Committee _____,

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2660

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_____, Chairman

Andy Goleman
SANGAMON COUNTY AUDITOR
Attachment: Purchase Order form

LIVE ** Sangamon County **LIVE Purchase Order Edit Listing

Department	P.O. Number	Type	Vendor/Vendor Address	Description/Bill to Address
AUD.ADMN Auditor,Administration		*Standard	29289-Triune Health Group, Ltd	2 Year Work Comp Nurse Case Management Premium
	G/L Date: 12/01/2020		Triune Health Group Ltd	Auditor
	Deliver By Date:		200 W. 22nd Street, Suite 250	200 S Ninth St, Room 204
	Expiration Date:		LOMBARD, IL 60148	Springfield, IL 62701
	Form Type: STND			
	Resolution Number: None			
	Assigned to: None			

Detail:	Description	Vendor Part Number	Quantity U/M	Amount/Unit	Total Amount
	Insurance Premium; Insurance Premium -- WC Medical Case Mgt. - Premium for Work Comp Medical Nurse Case Manager		2.0000 EA	58,000.0000	116,000.00
	Contract Number:	Confirming: No	Ordered For:	Ship To: Auditor	
	List Price Per Unit: 58,000.00	1099 Item: Yes	Ship Via:	200 S Ninth St, Room 204	
	Discount Percentage: 0%	Taxable Item: No	Freight Terms:	Springfield, IL 62701	
		Create Asset: No	Associate To Asset:		

Total Purchase Order Items: 1
 Purchase Order Amount: \$116,000.00
 Purchase Order Encumbrances: \$116,000.00

Total Purchase Orders: 1
 Purchase Order Amount: \$116,000.00
 Purchase Order Encumbrances: \$116,000.00