



OFFICE OF THE PURCHASING AGENT
CITY OF KNOXVILLE, TENNESSEE

PROPOSAL TABULATION FORM

DATE: 8/17/2021	TITLE: RFP – Vision Benefits Program
DEPARTMENT: Benefits & Risk Management	

Proposers	Form S-1	Non-Collusion Affidavit	No Contact/No Advocacy Affidavit	Iran Divestment Act Certification	DBE Program Form	DBE Option A or B?	Exceptions to Term and Conditions
Equitable Advisors	✓	✓	✓	✓	✓	B	✓
Humana Insurance Company	✓	✓	✓	✓	✓	B	✓
MetLife Insurance Company	✓	✓	✓	✓	✓	A	✓
National Vision Administrators	✓	✓	✓	✓	✓	A	✓
Standard Insurance Company	✓	✓	✓	✓	✓	B	✓
Vision Service Plan Insurance Company	✓	✓	✓	✓	✓	B	✓

I CERTIFY THAT THIS IS A TRUE AND ACCURATE TABULATION OF THE BIDS THAT WERE RECEIVED