



OFFICE OF THE PURCHASING AGENT  
CITY OF KNOXVILLE, TENNESSEE

RFP TABULATION FORM

DATE: May 17, 2018

TITLE: RFP for Self-Funded Medical Plan Administration

DEPARTMENT: Risk

Proposers	Form S-1	Non-Collusion Affidavit	No Contact	Iran Divestment	DBE	Drug Free
<i>Blue Cross Blue Shield</i>	✓	✓	✓	✓	✓	✓
<i>Cigna</i>	✓	✓	✓	✓	✓	✓

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

*[Signature]*