



Legislation Text

File #: 18-1033, **Version:** 1

TITLE

Approval of payment to MedImpact Healthcare Services, Inc. for the CY 2019.

BACKGROUND INFORMATION

On 11/22/2016 the board awarded a three calendar year contract for Pharmacy Claims Administration with Medimpact Healthcare Services, Inc for Pharmacy Claims Administration Services beginning 1/1/2017 and ending 12/31/2019. The current request is for approval of the final payment under this contract for the calendar year 1/1/2019 to 12/31/2019.

BUDGET INFORMATION

Item Budgeted? YES

Total Cost: \$ NTE \$850,000.00

Budget Coding: 0712 Fund

Requisition Attached? N/A

Contract Purpose / Description: Pharmacy Claims Administration Services

Contract Originator: Kathryn Flannery, extension 53342, Employee Benefits and Risk Manager

Board Meeting Date: 11/20/2018

RECOMMENDATION

Approve payment to MedImpact Healthcare Services, Inc for CY 1/1/2019 through 12/31/2019.