

Resolution # 20-1

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 2-Year Worker's Compensation Medical Nurse Case Management in the amount of approximately 60,320\$; and

WHEREAS, this purchase will allow The Auditor's Office, HR and Employee Services to provide substantial monitoring of the County's worker's compensationa claims; and

WHEREAS, as documented by the approval of this resolution, Employee Servies 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 15 day of November, 2022, 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 Employee Servies Committee 11/7, 2022

**FILED**  
NOV 09 2022

Pam Deppa, Chairman

Don Hays  
Sangamon County Clerk

20-2

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

Department	P.O. Number	Type	Vendor/Vendor Address	Description/Bill to Address
AUD.EESV Auditor,Employee Services		*Standard	29289-Triune Health Group, Ltd	Premium for Work Comp Medical Nurse Case Management
	<b>G/L Date:</b> 12/01/2022		Triune Health Group Ltd	Auditor
	<b>Deliver By Date:</b>		200 W. 22nd Street, Suite 250	200 S Ninth St, Room 204
	<b>Expiration Date:</b>		LOMBARD, IL 60148	Springfield, IL 62701
	<b>Form Type:</b> STND			
	<b>Resolution Number:</b> None			
	<b>Assigned to:</b> 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 Management		1.0000	EA	60,320.0000	60,320.00

Contract Number:	Confirming: No	Ordered For:	Ship To: Auditor
List Price Per Unit: 60,320.00	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: \$60,320.00	Purchase Order Encumbrances: \$60,320.00
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Total Purchase Orders: 1	Purchase Order Amount: \$60,320.00	Purchase Order Encumbrances: \$60,320.00
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