CONTRACT

State of Oklahoma

Dispatch via Print

Contract ID			Page
00000000000000000000004900			1 of 1
Contract Dates	**Currency**	**Rate Type**	**Rate Date**
08/16/2017 to 12/31/2018	USD	CRRNT	PO Date
Description:		**Contract Maximum**	
REFERENCE REQ 0900009141		0.00	

Allow Open Item Reference

TYPE: AGENCY(S) - 09000

Supplier 0000014641
AETNA
2777 STEMMONS FWY STE 300
DALLAS TX 75207-2509
USA

Tax Exempt? Y Tax Exempt ID:736017987

Contract Lines:

Line #	Cat CD / Item ID / Item Desc	UOM	Minimum Order Qty	Minimum Order Amt	Maximum / Open Qty	Maximum / Open Amt
1	80111502 / HMO Contract for Oklahoma Employees HMO/Medicare Suppliment/MAPD Health Insurance for Calendar Year 2018	YR	1.00	0.01	0.00	0.00

Contract Base Pricing	0.00000	YR	0001

COMMENTS:

CONTRACT PERIOD:
January 1, 2018 through December 31, 2018.

Vendor Contact:
Louie Heerwagen
817-417-2530
heerwagenL@aetna.com

Agency Contact:
Lori Baer
(405) 717-8809
Lori.Baer@omes.ok.gov

Paul King
(405) 717-8880
Paul.King@omes.ok.gov

Final = The price is final after adjustments
Hard = Apply adjustments regardless of other adjustments
Skip = Skip adjustments if any other adjustments have been applied

Authorized Signature