

Notice of Award Form

Agency and Awarded Vendor Information

Description:

Agency #: Agency:

Vendor Selected for Award:

Total Award Amount Number of unsuccessful bidders/offerors

<u>Terms (Add Renewal Terms as appropriate)</u>	<u>Length</u>	<u>Value</u>
Initial Term	Date of Execution 06/30/2026	\$29,439,081.80

Business Enterprise Program/Veterans Business Program

Awarded bidder/offeror BEP/VBP Utilization Plan Goals 30 ILCS 575/7 (6)

% of VBP Per Utilization Plan: % of BEP Per Utilization Plan:

List each bidder or offeror's name	Total bid amount	The name(s) of the certified BEP vendor(s) identified in the bidder's or offeror's submitted utilization plan	The Percentage of the bid's amount awarded to certified BEP vendor(s) identified in the utilization plan
MyOwnDoctor, LLC (Self-Fulfillment)	\$29,439,081.80	MyOwnDoctor, LLC (MBE)	100%

*NA indicates that the offeror's pricing remained sealed.



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Agency Contact

Contact Name:

Telephone Number:

Email Address:

Request for Application - Based on factors set forth in the Request for application, the contract has been awarded to the offeror whose proposal is most advantageous to the State.