

Title:

Solicitation Number: RFP 17-27 Date: November 17, 2016 Time: 9:00 AM

HCC Representatives Present:

	NAME	DEPARTMENT
1	ART LOPEZ	PROCUREMENT OPERATIONS
2	VERONICA DOUGLASS	SBOP
3	Paul Fisher	
4	Judith Baxter-Aung Aco	
5	Jennifer Chiu	Procurement
6	Martha Trevino	Procurement
7	Bob McCracken	RISK mgmt
8	Aprilyn Vega	Procurement.
9	Kristalina Karsen	OLSO SA
10	Gwendolyn Drumgoode	RISK MANAGEMENT
11		
12		
13		
14		
15		



Title: International Students Health Insurance Services

Solicitation Number: RFP 17-27 Date: November 17, 2016 Time: 9:00 AM

Representatives Present:

HARCO Insurance Services 10777 Northwest Freeway 713-681-2500
 Company Name Address # 700 Phone
Chris Goff Houston, TX 77092 Cgoff@harco-ivs.com
 Rep. Name City, State Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES ___ or NO X
 2). ARE YOU A CERTIFIED SBE? YES ___ or NO X CERTIFICATION WITH _____
 3). ARE YOU BIDDING AS A PRIME? YES X or NO ___

Pinnacle Student Ins 414 Bond Hill #100
 Company Name Address Phone
Paul B Fisher SA TX paul@psihealthplans.com
 Rep. Name City, State Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES ✓ or NO ___
 2). ARE YOU A CERTIFIED SBE? YES ✓ or NO ___ CERTIFICATION WITH _____
 3). ARE YOU BIDDING AS A PRIME? YES ✓ or NO ___

Academic HealthPlans 3500 William D Tate Suite 200 Grapevine TX
 Company Name Address Phone 254 396 1644 76051
Judith Baxter-Auy judith@ahpcare.com
 Rep. Name City, State Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES X or NO ___
 2). ARE YOU A CERTIFIED SBE? YES ___ or NO ___ CERTIFICATION WITH _____
 3). ARE YOU BIDDING AS A PRIME? YES X or NO ___

Aetna 10260 Meanley Rd. 951-239-0412
 Company Name Address Phone
David Paragone San Diego, CA paragoned@aetna.com
 Rep. Name City, State Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES X or NO ___
 2). ARE YOU A CERTIFIED SBE? YES ___ or NO X CERTIFICATION WITH _____
 3). ARE YOU BIDDING AS A PRIME? YES X or NO ___ via tele conference

 Company Name Address Phone

 Rep. Name City, State Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES ___ or NO ___
 2). ARE YOU A CERTIFIED SBE? YES ___ or NO ___ CERTIFICATION WITH _____
 3). ARE YOU BIDDING AS A PRIME? YES ___ or NO ___



Title: International Students Health Insurance Services

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Representatives Present:

<u>VHC</u>	<u>2301 W. Plano Pkwy</u>	<u>806.237.0903</u>
Company Name	Address	Phone
<u>MIKE DOWDLE</u>	<u>PLANO TX</u>	<u>mdowdle@vhsr.com</u>
Rep. Name	City, State	Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES or NO

2). ARE YOU A CERTIFIED SBE? YES or NO CERTIFICATION WITH _____

3). ARE YOU BIDDING AS A PRIME? YES or NO

_____	_____	_____
Company Name	Address	Phone
_____	_____	_____
Rep. Name	City, State	Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES or NO

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_____	_____	_____
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_____	_____	_____
Rep. Name	City, State	Email

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_____	_____	_____
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_____	_____	_____
Rep. Name	City, State	Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES or NO

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3). ARE YOU BIDDING AS A PRIME? YES or NO

_____	_____	_____
Company Name	Address	Phone
_____	_____	_____
Rep. Name	City, State	Email

PLEASE ANSWER QUESTIONS WITH AN "X" 1). PRE-BID CONF. YES or NO

2). ARE YOU A CERTIFIED SBE? YES or NO CERTIFICATION WITH _____

3). ARE YOU BIDDING AS A PRIME? YES or NO

From: [Paragone, David F](#)
To: [Marilyn.VegaBurillo](#)
Subject: RE: RFP No. 17-27 International Students Health Insurance Services
Date: Thursday, November 17, 2016 10:20:47 AM

Hi Marilyn-

Per the conference call I was instructed to advise you that I attended.

Thank you,

David

David Paragone

National Senior Sales Executive

Aetna Student Health

CA License # 0614466

paragoned@aetna.com

[T- 951-239-0412](tel:951-239-0412)

[C- 951-719-4702](tel:951-719-4702)

[10260 Meanley Road](#)

San Diego , CA 92131



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