



BlueCross BlueShield of Western New York  
257 West Genesee Street • Buffalo, New York 14202

July 27, 2020

NYS Department of Civil Service  
Agency Building #1, 17th Floor  
Empire State Plaza  
Albany, New York 12239

**RE: “Health Maintenance Organizations Specifications for the New York State Health Insurance Program”  
Firm Offer to the State of New York**

HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York hereby submits this firm and binding offer to the State of New York in response to the Department’s specifications request, entitled “Health Maintenance Organizations Specifications for the New York State Health Insurance Program”. The Proposal hereby submitted meets or exceeds all terms, conditions, and requirements set forth in the above-referenced specifications and in the manner set forth in the specifications.

HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York accepts the terms and conditions as set forth in the specifications, Section 8 and Appendices A, B, and C, as modified by the Department and Offeror’s negotiations in response to the *Non-Material Deviations Template* (Attachment 8) and agrees to satisfy the comprehensive programmatic duties and responsibilities outlined in the specifications in the manner set forth in the specifications.

HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York agrees to execute a contractual agreement that includes the terms and conditions set forth in Section 8 of these specifications, and accepts as non-negotiable the terms and conditions set forth in Appendix A. Offeror agrees to only submit for consideration non-material deviations to these specifications and Appendices B, and C using the *Non-Material Deviations Template* (Attachment 8).

HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York further agrees, if selected as a result of these specifications, to comply with 1) the provisions of Tax Law Section 5-a, Certification Regarding Sales and Compensating Use Tax; and 2) the Workers’ Compensation Law as set forth in Section 4.6 and 4.7 of the specifications.

This formal offer will remain firm and non-revocable for a minimum period of 365 days from the Proposal Due Date as set forth in the specifications. In the event that a contract is not approved by the NYS Comptroller within the 180 day period, this offer shall remain firm and binding beyond the 365 day period and until a contract is approved by the NYS Comptroller, unless HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York delivers to the Department of Civil Service written notice of withdrawal of its Proposal.

HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York's complete offer is set forth as follows:

*Administrative and Technical Proposal:*

Total of eight (8) electronic copies on a USB drive that each contain the Administrative and Technical Proposal and three (3) hard copy volumes, including one ORIGINAL hard copy.

*Complete Electronic Master Proposal:*

One (1) USB drive containing all two sections (Administrative and Technical) of the Offeror's Proposal and electronic copies of all materials and documents present in the Original hard copies.

**Offeror's Senior Officer Responsible for Account contact information**

Name:

Dr. Michael Edbauer

Address:

257 West Genesee Street, Buffalo, NY 14202

Phone number:

716-887-7931

Email address:

edbauer.michael@bcbswny.com

The undersigned affirms and swears s/he has the legal authority and capacity to sign and make this offer on behalf of, HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York and possesses the legal authority and capacity to act on behalf of HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York to execute a contract with the State of New York.

The Offeror certifies that all information provided to the Department with respect to State Finance Law §139-k is complete, true and accurate. The undersigned affirms and swears as to the truth and veracity of all documents included in this offer.

**HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern New York**

Signature: 

Title: Executive Vice President, Strategy & Growth Officer

PRINT SIGNATORY'S NAME: Dr. Michael Edbauer

Date: 7/9/20

**INDIVIDUAL, CORPORATION, PARTNERSHIP, OR LLC ACKNOWLEDGMENT**

STATE OF } New York

**Sworn Statement:**

COUNTY OF } Erie

On the 9<sup>th</sup> day of July in the year 2021 ~~2020~~, before me personally appeared Michael Edbauer, known to me to be the person who executed the foregoing instrument, who, being duly sworn by me did depose and say that he maintains an office at Town of Buffalo

County of Erie, State of New York; and further that:

\_\_\_\_ (If an individual): \_he executed the foregoing instrument in his/her name and on his/her own behalf.

(If a corporation): \_he is the  
Executive Vice President, Strategy & Growth Officer of  
HealthNow New York, Inc. dba BlueCross BlueShield of Western New York and BlueShield of Northeastern  
New York, the corporation described in said instrument; that, by authority of the Board of Directors of said  
corporation, \_he is authorized to execute the foregoing instrument on behalf of the corporation for  
purposes set forth therein; and that, pursuant to that authority, \_he executed the foregoing instrument in  
the name of and on behalf of said corporation as the act and deed of said corporation.

\_\_\_\_ (If a partnership): \_he is the  
\_\_\_\_ of  
\_\_\_\_, the partnership described in said instrument; that, by  
the terms of said partnership, \_he is authorized to execute the foregoing instrument on behalf of the  
partnership for purposes set forth therein; and that, pursuant to that authority, \_he executed the  
foregoing instrument in the name of and on behalf of said partnership as the act and deed of said  
partnership.

\_\_\_\_ (If a limited liability company): \_he is a duly authorized member of  
\_\_\_\_  
\_\_\_\_, LLC, the limited liability company described in said  
instrument; that, \_he is authorized to execute the foregoing instrument on behalf of the limited liability  
company for purposes set forth therein; and that, pursuant to that authority, \_he executed the foregoing  
instrument in the name of and on behalf of said limited liability company as the act and deed of said limited  
liability company.

Notary Public Mary L. Barron Date: 7/9/2020

Mary L. Barron  
Notary Public, State of New York  
Commission No. 01BA6289871  
Qualified in Genesee County  
My Commission Expires Sept. 30, 2021