

**HUMAN SERVICES DEPARTMENT**

**MEDICAL ASSISTANCE DIVISION**

**REQUEST FOR PROPOSALS (RFP)**

**EXTERNAL QUALITY REVIEW ORGANIZATION  
(EQRO) SERVICES**



**RFP# 18-630-8000-0005**

**Release Date: February 26, 2018**

**Amendment 2**

**Proposals Due Date: April 5, 2018**

**Request for Proposals # 18-630-8000-0005 is amended as follows:**

**E. DEFINITION OF TERMINOLOGY**

Page 4

**Add:**

“Peer Review” means an internal evaluation for content, format, and grammar of the EQR technical report(s). The review is to be completed by professional staff of the EQRO prior to review and approval by HSD/MAD.

**D. PROPOSAL FORMAT**

Page 21

**Remove:**

**PLEASE NOTE: if the proposal is submitted through State Purchasing’s electronic submission system, the Offeror need submit only a single electronic copy of each binder of the proposal. Please separate the proposal for the technical specifications and the proposal for the cost as well as the proposal for the confidential information into separate files in your submission. Each “envelope” (file) location for each of the three sections of the RFP will be specified in the upload section of the Offeror’s electronic submission.**

A. DETAILED SCOPE OF WORK  
Page 27 and 28

**From:**

**1. Communications and Meetings:**

**To:**

**8. Communications and Meetings:**

IV. SPECIFICATIONS  
A. DETAILED SCOPE OF WORK  
DELIVERABLES  
PAGE 27 Number 7

**FROM:**

e. Report findings of NF LOC activities in monthly, quarterly, and annual reports to HSD/MAD.

**TO:**

e. Report findings of NF LOC activities in quarterly and annual reports to HSD/MAD.

V. EVALUATION  
A. EVALUATION POINT SUMMARY  
B. Mandatory Specification  
Page 34, number 7

**REMOVE:**

8. Demonstrate Policy

APPENDIX F  
Letter of Transmittal Form  
Page 76

**FROM:**

\_\_\_\_\_, 2014  
Authorized Signature and Date (Must be signed by the person identified in item #2, above.)

**To:**

\_\_\_\_\_, 2018  
Authorized Signature and Date (Must be signed by the person identified in item #2, above.)

APPENDIX G  
Page 78

**From:**

(Name of Offeror)

Return no later than 5 pm on April 4, 2018, and **must not** be returned to the company requesting the reference.

**To:**

Return no later than 5 pm on April 5, 2018, and **must not** be returned to the company requesting the reference.

APPENDIX D  
Page 71  
COST RESPONSE FORM SAMPLE  
REMOVE

Encounter Data Validation	FY19	1		
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**ADD**

Encounter Data Validation	FY21	1		
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